

0332001		108	
OBTS Number		ARREST / NOTICE TO APPEAR Juvenile Referral Report	
Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	
Agency Report Number (N.T.A.'s only) 06-19-054081		19015928	
Charge Type: Check as many as apply: ☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other		Weapon Seized / Type ☒ 1. Yes ☐ 2. No	
Location of Arrest (Including Name of Business) 8500 blk Boynton Beach Blvd, Boynton Beach, FL 33472		Location of Offense (Business Name, Address) 8500 blk Boynton Beach Blvd, Boynton Beach, FL 33472	
Date of Arrest 03/31/2019	Time of Arrest 2301	Booking Date	Booking Time
Jail Date	Jail Time	Location of Vehicle	
Name (Last, First, Middle) Buchman, David, A		Alias (Name, DOB, Soc. Sec. #, Etc.)	
Race W - White I - American Indian B - Black O - Oriental/Asian W	Sex M	Date of Birth 03/29/1971	Height 5'11
Weight 180	Eye Color Blu	Hair Color Bro	Complexion Light
Build Med	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		
Local Address (Street, Apt. Number) 6628 Cobia Cir, Boynton Beach, FL 33437		Phone (408) 791-7988	
Permanent Address (Street, Apt. Number)		Address Source FL DL	
Business Address (Name, Street)		Occupation Sales	
D/L Number, State B255161711090, FL	Soc. Sec. Number	INS Number	Place of Birth (City, State) Queens, Ny
Citizenship US		Co-Defendant Name (Last, First, Middle)	
Race		Sex	Date of Birth
Co-Defendant Name (Last, First, Middle)		Race	Sex
Date of Birth		☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile	
Parent / Legal Custodian		Residence Phone	
Address (Street, Apt. Number)		()	
(City)		(State) (Zip)	
Business Phone		()	
Notified by: (Name)		Date	Time
Released To: (Name)		Relationship	
Date		Time	
The above address provided by ☐ defendant and / or ☐ defendant's parents. The child and / or parent was told to keep the Juvenile Court Clerk (Phone 355-2525) informed of any change of address.		School Attended	
☐ Yes, by: (Name) ☐ No: (Reason)		Grade	
Property Crime? ☐ Yes ☐ No		Description of Property	
Value of Property			
Drug Activity N. N/A S. Sell B. Buy P. Possess R. Smuggle D. Deliver E. Use K. Dispense/Distribute M. Manufacture/Produce/Cultivate Z. Other		Drug Type N. N/A A. Amphetamine B. Barbiturate C. Cocaine E. Heroin H. Hallucinogen M. Marijuana O. Opium/Deriv. P. Paraphernalia/Equipment S. Synthetics U. Unknown Z. Other	
Charge Description Driving Under the Influence		Counts	Domestic Violence ☐ Y ☐ N
Statute Violation Number 316.193(1)		Violation of ORD #	
Drug Activity N. N/A S. Sell B. Buy P. Possess R. Smuggle D. Deliver E. Use K. Dispense/Distribute M. Manufacture/Produce/Cultivate Z. Other		Amount / Unit	Offense # 19-054081
Warrant / Capias Number		Bond OR	
Charge Description		Counts	Domestic Violence ☐ Y ☐ N
Statute Violation Number		Violation of ORD #	
Drug Activity N. N/A S. Sell B. Buy P. Possess R. Smuggle D. Deliver E. Use K. Dispense/Distribute M. Manufacture/Produce/Cultivate Z. Other		Amount / Unit	Offense #
Warrant / Capias Number		Bond	
Charge Description		Counts	Domestic Violence ☐ Y ☐ N
Statute Violation Number		Violation of ORD #	
Drug Activity N. N/A S. Sell B. Buy P. Possess R. Smuggle D. Deliver E. Use K. Dispense/Distribute M. Manufacture/Produce/Cultivate Z. Other		Amount / Unit	Offense #
Warrant / Capias Number		Bond	
Charge Description		Counts	Domestic Violence ☐ Y ☐ N
Statute Violation Number		Violation of ORD #	
Drug Activity N. N/A S. Sell B. Buy P. Possess R. Smuggle D. Deliver E. Use K. Dispense/Distribute M. Manufacture/Produce/Cultivate Z. Other		Amount / Unit	Offense #
Warrant / Capias Number		Bond	
Location (Court, Room Number, Address) South County Courthouse 200 W. Atlantic Ave, Courtroom 1, Delray Beach, FL 33444			
Court Date and Time Month April Day 29 Year 2019 Time 8:30 AM ☒ PM			
I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED BY THIS NOTICE TO APPEAR, THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED			
Signature of Defendant (or Juvenile and Parent/Custodian)		Date Signed 03/31/2019	
HOLD for other Agency Name:		Signature of Arresting Officer	
☐ Dangerous ☐ Suicidal ☐ Resisted Arrest ☐ Other:		Name of Arresting Officer (Print) D/S Christopher Ward # 16305 16305	
I.D. #		I.D. #	
Pouch #		Agency PBSO	
Name Verification (Printed by Arrestee) MAR 31 AM 1:21		(PRINT)	
Witness here if subject signed with an		PAGE	

DISTRIBUTION: WHITE - COURT COPY

GREEN - STATE ATTORNEY

YELLOW - AGENCY

PINK - AGENCY

GOLD - DEFENDANT (N.T.A.'s ONLY)

015 010260 8054 P316

APR 01 2019

PROBABLE CAUSE AFFIDAVIT		1 Arrest 2 NTA	3 Request for Warrant 4 Request for Capias	1	Juvenile
OBTS Number		Agency ORI Number FLO. 5 0 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	
Agency Report Number 19-054081		Special Notes Supplement			
Charge Type Check as many as apply ☐ 1 Felony ☐ 2 Traffic Felony ☐ 3 Misdemeanor ☐ 4 Traffic Misdemeanor ☐ 5 Ordinance ☐ 6 Other		Name (Last, First, Middle) Buchman, David, Allen			
Race W		Sex M		Date of Birth 03/29/71	
Charge Description Driving Under the Influence 316.193		Charge Description			
Charge Description		Charge Description			
Victim's Name (Last, First, Middle) State of Florida		Race		Sex	
Local Address (Street, Apt Number)		(City)		(State)	
(Zip)		Phone		Address Source	
Business Address (Name, Street)		(City)		(State)	
(Zip)		Phone		Occupation GOVERNMENT	
The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following violation of law The Person taken into custody ☐ committed the below acts in my presence. ☐ was observed by _____ who told _____ ☐ confessed to _____ ☒ that he/she saw the arrested person commit the below acts. admitting to the below facts. was found to have committed the below acts, resulting from my (described) investigation. On the 30 day of March 20 19 at 10:33 ☐ A.M ☒ P.M (Specifically include facts constituting cause for arrest.) On 03/30/19 at approximately 2230 hrs I was conducting traffic enforcement in the area of W Boynton Beach Blvd and Acme Dairy Rd in unincorporated Boynton Beach, Palm Beach County, FL. I observed a vehicle traveling west on W Boynton Beach Blvd and I estimated the vehicle to be traveling at a high rate of speed in a marked 45 MPH area. Using Pro Laser III serial #PL26338 I verified the vehicle was traveling at a speed of 84 MPH. I never lost sight of the vehicle as I pulled up behind it at the intersection at W Boynton Beach Blvd and Lyons Rd. When the light turned green the vehicle, a 2018 Dodge Durango, FL tag JYCP33 made a U-turn and proceeded east on W Boynton Beach Blvd. I activated my overhead lights to conduct a traffic stop at which time the vehicle slowed and pulled over to the left. I made contact with the driver who identified himself via FL DL as David Buchman. Upon making contact I immediately detected a strong and obvious odor of an unknown alcoholic beverage coming from Buchman's breath and person. I observed him to have glassy eyes and he slurred his speech when he spoke to me. As Buchman appeared to be impaired I requested D/S Ward #16305 to respond. Upon his arrival he took over the investigation.					
PROBABLE CAUSE STATEMENT					
STATE OF FLORIDA COUNTY OF PALM BEACH (Signature of Arresting Investigative Officer) <i>[Signature]</i> 26733 The foregoing instrument was sworn to or affirmed and subscribed before me this 30 day of March 20 19 by _____ (Print name of Arresting Investigative Officer, who is personally known to me and/or produced identification. Type of identification produced Personally Known Notary Public, Clerk of Court, Officer (F.S.S. 117.10) <i>[Signature]</i> 1634					

SCANNED
APR 01 2019

STATE OF FLORIDA
DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES
AFFIDAVIT OF REFUSAL TO SUBMIT TO
BREATH AND/OR URINE TEST

I, D/S Christopher Ward # 5, a duly certified Law Enforcement Officer or Correctional Officer,
(Name of Officer reading Implied Consent Warning)

am a member of Palm Beach County Sheriff's Office, and I do swear
(Name of law enforcement agency)

or affirm that on or about the 30 day of March, 20 19, at 2301 ☒ P.M. ☒ A.M.

DRIVER
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# B255161711090, state of Florida, was placed under lawful arrest for
the offense of Driving Under the Influence by D/S Christopher Ward # 5 and
(Name of Arresting Officer)
issued Citation # A2G3X7P

That on or about the 31 day of March, 20 19, at 0009 ☐ P.M. ☒ A.M.
in Palm Beach County,

I requested that the driver submit to a ☒breath and/or ☐urine test to determine his or her blood alcohol level and/or the presence of chemical or controlled substances. I informed the driver that the refusal to submit to such test(s) would result in the suspension of his or her driving privilege for a period of one (1) year for a first refusal, or for a period of eighteen (18) months if his or her driving privilege had been previously suspended for refusing to submit to a breath, urine or blood test. I also informed the driver that he or she commits a misdemeanor by refusing to submit to a lawful test as requested above if his or her driving privilege has been previously suspended for refusal to submit to a lawful test of his or her breath, urine, or blood. Additionally, I informed the driver that if he or she holds a CDL, or was operating a CMV, refusal will result in the disqualification of the Commercial Driver's License/driving privilege for a period of one (1) year in the case of a first refusal or permanently if he or she has previously been disqualified as a result of a refusal to submit to any such lawful test. Nonetheless, the driver refused to submit to the test(s) requested.

1634
Signature of Law Enforcement Officer or
Correctional Officer

THE AFFIDAVIT MUST BE NOTARIZED OR ATTESTED TO (F.S. 117.10)



The foregoing instrument was sworn and subscribed before

me this 31 day of March, 20 19,

by _____,

who is personally known to me or who has produced

as identification

Notary Public S. O'Neal

The foregoing instrument was sworn and subscribed before me:

Signature of Attesting Officer

Title _____

Date _____

Note: Mail or hand deliver to the designated
Bureau of Administrative Reviews office,
Department of Highway Safety and Motor
Vehicles, with the driver's license, the
appropriate copy of the UTC, and the
probable cause affidavit.

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APR 01 2019



PALM BEACH COUNTY SHERIFF'S OFFICE
DUI TESTING FACILITY
INFORMATION SHEET

PBSO CASE # 19-054081 PBSO ZONE 6-62
AGENCY CASE # 19-053802 CRASH CASE # -
TIME OF STOP/CRASH 22:29 DATE 03/30/2019 DAY Saturday
SUBJECT'S NAME Buchman, David, A RACE W SEX M
HGT 5'11 WGT 180 DOB 03/29/1971
LOCATION 8500 blk Boynton Beach Blvd, Boynton Beach, FL 33472
ARRESTING OFFICER'S NAME & ID D/S Christopher Ward # 16305 AGENCY PBSO
DIVISION: Road Patrol- D6
NOTIFIED BY COMMO Yes
ARRIVAL AT FACILITY 2339
ARREST TIME 2301

BREATH RESULTS:

1)	
2)	
3)	
4)	

TESTING OFFICER'S ID 6212 PBSO VIDEOTAPE # N/A

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APR 01 2019

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 30 DAY OF March 20 19, AT 22:29 AM ☒ PM

SUBJECT: Buchman, David, A CASE NUMBER: 19-054081

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: D/S Christopher Ward # 5
PERSONAL CONTACT

DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENTS PUTTING DEF. BEHIND WHEEL OF VEHICLE)

I was called to the scene of a traffic stop near the intersection of Boynton Beach Blvd and Acme Dairy Rd, in unincorporated Palm Beach County, Florida. I arrived at the scene at approximately 2246 hrs.

D/S J. Ramirez # 23729 told me, in a signed sworn PC Supplement, that he had stopped the defendant's vehicle, 2018 Dodge Durango FL tag JYCP33, because the defendant's vehicle was (travelling 84 mph in a posted 45 mph zone. D/S Ramirez noticed that the defendant had articulable indicators of impairment, so he requested me to respond to conduct a possible DUI investigation. D/S Ramirez identified the defendant, to me, as the driver and sole occupant of the defendant's vehicle, at the time of the stop. (See PC Sup for further)

OBSERVATION OF DRIVER:

I made contact with the defendant, later identified by FL DL as, David Buchman. I observed that the defendant had red, watery, bloodshot eyes. The defendant had slurred speech, and the odor of an unknown alcoholic beverage, based on my training and life experiences, that came from their breath which intensified as they spoke to me. I asked the defendant if they had any medical problems or had taken any medications and the defendant said no. I asked how much they had had to drink. The defendant said, he had not. I asked the defendant if he had taken drugs or smoked marijuana and he said no.

I asked the defendant to exit the vehicle. The defendant swayed while standing, and stumbled while walking. I continued to smell the odor of an unknown alcoholic beverage that came from his person and intensified as he spoke to me.

I asked the defendant to perform voluntary roadside tasks. The defendant refused, so I gave the Taylor Warnings and explained the evidence that I had already observed red, watery, bloodshot eyes, slurred speech, odor of alcohol, driving pattern, other. I again asked the defendant to complete the voluntary roadside tasks and the defendant refused again.

DRIVER'S STATEMENTS:

While in the vehicle the defendant stated that he was coming from Wellington. He stated that he was headed to his residence which is in the area of Boynton and Jog. He stated that he was at the Wanderer's club where he ate approximately 2 hours prior. He stated that he drank no alcohol while he was there. He stated that he had no medical issues. He stated that he had not taken any drugs or marijuana today.

While outside of the car he stated that he was not injured. He stated that he had vertigo. When I asked him when was the last time he had an episode he stated that he lost hearing in his ear. I again asked him when he last had vertigo and he said approximately 4 hours prior. He again stated that he had not drank any alcohol. When I asked him why I could smell the odor of alcohol. I asked him if he could why he was swaying and he stated that he was not.

ODORS:

I could smell the obvious odor of an unknown alcoholic beverage, based on my training and experience, that came from the defendant and intensified as the defendant spoke to me.

GENERAL OBSERVATIONS

SPEECH: slurred,

ATTITUDE: polite, cooperative,

CLOTHING: Gray Polo Shirt, Gray Whors Black Sneakers.

MEDICAL/OTHER: Defendant states that he had had vertigo. When asked when he had the last incident he stated approximately 4 hours prior. He stated that he had no other medical issues. He stated that he has taken no drugs or marijuana.

STATE OF FLORIDA
COUNTY OF PALM BEACH

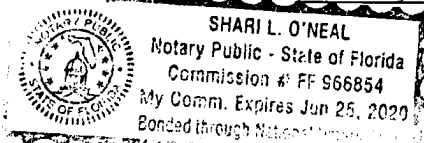
D/S Christopher Ward # 5

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 31 day of March 20 2019 by D/S Christopher Ward # 5

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced Personally Known LEO

Notary Public, Clerk of Court, Officer (F.S.S. 117.14)



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APR 01 2019

SUBJECT: Buchman, David, A

CASE NUMBER 19-054081

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- | | |
|--|--|
| ☐ LT EYE-LACK OF SMOOTH PURSUIT | ☐ RT EYE-LACK OF SMOOTH PURSUIT |
| ☐ LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION | ☐ RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION |
| ☐ LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES | ☐ RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES |

Other Observations:

Refused

WALK & TURN:

refused

ONE LEG STAND:

refused

FINGER TO NOSE:

refused

MODIFIED ROMBERG:

refused

BREATH TEST RESULTS:

1) refused	2)	3)	4)
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STATE OF FLORIDA
COUNTY OF PALM BEACH

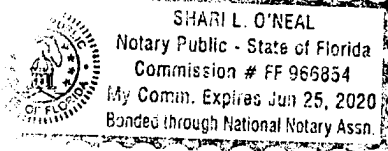
D/S Christopher Ward # 5

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 31 day of March, 202019 by D/S Christopher Ward # 5

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced Personally Known LEO

Notary Public, Clerk of Court, Officer (F.S.S. 117.10)



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APR 01 2019

WITNESS LIST

CASE NUMBER: **19-054081**

ARRESTING OFFICER: **D/S Christopher Ward # [REDACTED] 5**

ADDRESS: **3228 Gun Club Rd, West Palm Beach, FL 33406**

PHONE NUMBERS (HOME): **561-688-3000** (WORK)

CAN TESTIFY TO: **DUI Investigation**

NAME: **D/S J. Ramirez #**

ADDRESS: **3228 Gun Club Rd, West Palm Beach, FL 33406**

PHONE NUMBERS (HOME) **561-688-3000** (WORK)

CAN TESTIFY TO: **Wheel Witness**

NAME: **D/S R. Gonzalez #**

ADDRESS **3228 Gun Club Rd, West Palm Beach, FL 33406**

PHONE NUMBERS (HOME) **561-688-3000** (WORK)

CAN TESTIFY TO: **Back Up/Scene Security**

NAME:

ADDRESS

PHONE NUMBERS (HOME) **0** (WORK) **0**

CAN TESTIFY TO:

NAME:

ADDRESS

PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO:

NAME:

ADDRESS

PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO:

NAME:

ADDRESS

PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO:

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PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO:

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PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO:

NAME:

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PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO:

NAME:

ADDRESS

PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO:

SCANNED
APR 01 2019

TESTING FACILITY TASK REPORT

AGENCY: 1115 1/15 1115 1115
SUBJECT: 1115 1/15 1115 1115 CASE NUMBER: 14-079031

DATE: 0-20-19/ 0-21-19 VIDEO TAPE NUMBER: 1115

BEGINNING TIME: 0001 ENDING TIME: 0101

BREATH TESTS RESULTS: 1) 1115 TIME 1115 A.M./P.M. 2) 1115 TIME 1115 A.M./P.M.
TIME 1115 A.M./P.M. 4) 1115 TIME 1115 A.M./P.M.

BREATH OPERATOR: 1115

MAINTENANCE TECHNICIAN: 1115

TESTING OFFICER'S OBSERVATIONS

SPEECH: 1115

ATTITUDE: 1115

CLOTHING: 1115

MEDICAL CONDITIONS: 1115

MEDICATIONS: 1115

OTHER: 1115

COMMENTS: 1115

1115

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SUBJECT: _____ CASE NUMBER: 19-071281

IMPLIED CONSENT FOR DUI IN A MOTOR VEHICLE

NOTE: READ ONLY THE PARAGRAPH APPLICABLE TO THE TYPE OF TEST YOU ARE REQUESTING.

I am now requesting that you submit to a lawful test of your BREATH for the purpose of determining its alcohol content.

-OR-

I am now requesting that you submit to a lawful test of your URINE for the purpose of detecting the presence of chemical or controlled substances.

-OR-

I am now requesting that you submit to a lawful test of your BLOOD for the purpose of detecting its alcohol content and the presence of chemical or controlled substances.

NOTE: READ ONLY IF THE SUBJECT DOES NOT COMPLY WITH YOUR REQUEST.

I am _____ of the _____

If you fail to submit to the test I have requested of you, your privilege to operate a motor vehicle will be suspended for a period of one (1) year for a first refusal, or eighteen (18) months if your privilege has been previously suspended as a result of a refusal to submit to a lawful test of your breath, urine or blood. Additionally, if you refuse to submit to the test I have requested of you and if your driving privilege has been previously suspended for a prior refusal to submit to a lawful test of your breath, urine or blood, you will be committing a misdemeanor. Refusal to submit to the test I have requested of you is admissible into evidence in any criminal proceeding.

SUBJECT'S SIGNATURE: (X) _____

CONSTITUTIONAL WARNINGS

I AM REQUIRED TO WARN YOU BEFORE YOU MAKE ANY STATEMENTS THAT YOU HAVE THE FOLLOWING RIGHTS:

1. You have the right to remain silent and not answer any questions.
2. Any statement must be freely and voluntarily given.
3. You have the right to the presence of a lawyer of your choice before you make any statement and during any questioning.
4. If you cannot afford a lawyer, you are entitled to the presence of a court appointed lawyer before you make any statements and during any questioning.
5. If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.
6. I can make no threats or promises to induce you to make a statement. This must be of your own free will.
7. Any statement can and will be used against you in a court of law.

SUSPECT'S SIGNATURE: (X) _____

SCANNED
APR 01 2019

SUBJECT: _____ CASE NUMBER: _____

QUESTIONS AND ANSWERS

I AM NOW GOING TO ASK YOU SOME QUESTIONS. WITH THESE RIGHTS IN MIND, YOU MAY ANSWER SOME OF, ALL OF, OR NONE OF THE FOLLOWING QUESTIONS AS YOU LIKE.

WERE YOU OPERATING A MOTOR VEHICLE AT THE TIME OF THE STOP/ACCIDENT? _____

WHERE WERE YOU GOING? _____

WHAT STREET OR HIGHWAY WERE YOU ON? _____

DIRECTION OF TRAVEL? _____ WHERE DID YOU START? _____

WHAT TIME DID YOU START? _____ WHAT TIME IS IT NOW? _____

WHAT IS TODAY'S DATE? _____ WHAT DAY OF THE WEEK IS IT? _____

WHAT COUNTY AND CITY ARE YOU IN NOW? _____

WHEN DID YOU LAST EAT? _____ WHAT DID YOU EAT? _____

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? _____

HOW MUCH DO YOU WEIGH? _____ HAVE YOU BEEN DRINKING? _____ WHAT? _____

HOW MUCH? _____ WHERE? _____ WITH WHOM? _____

WHEN DID YOU HAVE YOUR FIRST DRINK? _____ AND YOUR LAST DRINK? _____

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? _____

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? _____ ARE YOU UNDER THE INFLUENCE? _____

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? _____ HOW MUCH? _____

WHAT? _____ WHERE? _____ WHEN? _____

WHAT LINE OF WORK ARE YOU IN? _____ WHEN DID YOU LAST WORK? _____

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? _____ WHAT? _____

ARE YOU SICK OR INJURED? _____ WHAT'S WRONG? _____

DO YOU LIMP? _____ DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? _____

WERE YOU IN AN ACCIDENT TODAY? _____

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? _____ WHEN? _____

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? _____ WHO? _____ WHY? _____

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? _____ WHAT? _____ WHEN? _____

DO YOU HAVE: EPILEPSY? _____
GLASS EYE? _____
FALSE TEETH? _____
EAR INFECTION? _____
INNER EAR TROUBLE? _____
DIABETES? _____

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? _____

DO YOU TAKE INSULIN? _____ IF SO, WHEN WAS YOUR LAST INJECTION? _____

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? _____ WHERE? _____

INTERVIEWER: _____

WHITE - STATE ATTY. YELLOW - DHSMV PINK - CENTRAL RECORDS GOLD - JAIL

SCANNED

APR 01 2019



**PALM BEACH COUNTY
SHERIFF'S OFFICE**
Florida State Statute Exemption Sheet

Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	119.071(4)(d)(2)(a)	Home address, telephone, Social Security number, date of birth, or photos of active/former LE personnel, spouses, and children.	
Florida Rules of Judicial Administration 2.420 (Rule of 23)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	☐			
	☐			
	☐			
	☐			
Other	☐	119.071(2)(h)	Other: Identity of victim of sexual battery, lewd and lascivious offense upon a person less than 16 yrs old, cheld abuse, or other sexual offense.	
	☐	948.064 (1) f.s.	Other: Notification of status as a violent felony offender of special concerns.	

REVIEW COMPLETED BY

Booking Number: 2019010714	Date: 3/31/2019
	Specialist Name/ID: M. Tooks #8557

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APR 01 2019