J-0508882 19 CT 11400 P-941

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias: **1** | Juvenile: **N**

Field	Value
OBTS Number	
Agency ORI Number	FLO 502600
Agency Name	PALM BEACH GARDENS POLICE DEPARTMENT
Agency Report Number (N.T.A.'s only)	78- 19003768
ChargeType: 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)	2
Multiple Clearance Indicator	
Location of Arrest (Including Name of Business)	4500 PGA BLVD, PALM BEACH GARDENS, FL 33410
Location of Offense (Business Name, Address)	PGA BLVD/ N MILITARY TRAIL, PALM BEACH GARDENS, FL 33410
Date of Arrest	06/21/2019
Time of Arrest	21:33
Booking Date	
Booking Time	
Jail Date	
Jail Time	
Location of Vehicle	KAUFF'S TOWING & RECOVERY 4301 East Avenue, West Palm Beach, FL 33405

DEFENDANT

Field	Value
Name (Last, First, Middle)	HUGHES, DAVID, MATTHEW
Alias (Name, DOB, Soc. Sec. #, Etc.)	NONE
Race (W - White I - American Indian B - Black 0- Oriental/Asian)	W
Sex	M
Date of Birth	01/09/1980
Height	510
Weight	180
Eye Color	BRO
Hair Color	BRO
Complexion	LGT
Build	MED
Scars, Marks, Tatoos, Unique Physcal Features (Location, Type, Description)	NONE
Marital Status	DIVORCED
Religion	CHRISTIAN
Indication of: Alcohol Influence / Drug Influence	Unk. ☒ / Unk. ☒
Local Address (Street, Apt. Number) (City) (State) (Zip)	4110 UNION SQUARE BLVD #445, PALM BEACH GARDENS, FL 33410
Phone	(330) 819-9778
Residence Type: 1. City 2. County 3. Florida 4. Out of State	1
Permanent Address (Street, Apt. Number) (City) (State) (Zip)	4110 UNION SQUARE BLVD #445, PALM BEACH GARDENS, FL 33410
Phone	( )
Address Source	DAVID
Business Address (Name, Street) (City) (State) (Zip)	BECTON DICKINSON, STUART, FL
Phone	( )
Occupation	SOFTWARE DEVELOPMENT
D/L Number, State	H220173800090 FL
Soc. Sec. Number	[redacted]
INS Number	
Place of Birth (City, State)	MAYFIELD, OH
Citizenship	USA

CO-DEF

Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	☐ 1. Arrested ☐ 2. At Large	☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile

JUVENILE

☐ Parent ☐ Legal Custodian ☐ Other: Name (Last) (First) (Middle) — Residence Phone ( )

Address (Street, Apt. Number) (City) (State) (Zip) — Business Phone ( )

Notified by: (Name) — Date — Time — Juvenile Disposition: 1. Handled/ processed within Dept. and Released. 2. TOT HRS / DYS 3. Incarcerated

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 355-2526) informed of any change of address. ☐ Yes, by: (Name) ☐ No. (Reason) — School Attended — Grade

Property Crime? ☐ Yes ☐ No — Description of Property — Value of Property

CODE

Drug Activity: N. N/A P. Possess S. Sell B. Buy T. Traffic 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

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
DRIVING UNDER THE INFLUENCE	1	☐Y ☒N	316.193(1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N	N/A			

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

NOTICE TO APPEAR

Location (Court, Room Number, Address): NORTH COUNTY COURTHOUSE, 3188 PGA BOULEVARD, PALM BEACH GARDENS, FL 33410 - PH: (561) 662-6700

Court Date and Time: Month JULY Day 24 Year 2019 Time 10:00 AM X 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: 06/21/2019

ADMIN

Field	Value
HOLD for other Agency Name	
☐ Dangerous ☐ Suicidal ☐ Resisted Arrest ☐ Other:	
Signature of Arresting Officer	471
Name of Arresting Officer (Print)	Ofc. Cameron Carver
I.D. #	#471
Intake Deputy	Dunn S
I.D. #	6674
Pouch #	
Transporting Officer	Ofc. Cameron Carver
ID #	#471
Agency	PBGPD
Name Verification (Printed by Arrestee) (PRINT)	
Witness here if subject signed with an -X-	
PAGE	1 OF 1

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A.'s ONLY)

2019 JUN 23 AM 7:25

SCANNED JUN 23 2019

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 21 DAY OF JUNE 20 19, AT 20:55 AM ✓ PM

SUBJECT: HUGHES, DAVID, MATTHEW CASE NUMBER: 19003768

AGENCY: PALM BEACH GARDENS POLICE DEPT. ARRESTING OFFICER: Ofc. Cameron Carver #471

PERSONAL CONTACT

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

+PC for Stop: Officer Slaughter initiated a traffic stop on the vehicle for running a solid red light and almost colliding with her marked police vehicle and another vehicle.
+Manner of Stop: Vehicle stopped in the left through lane, rather than the turn lane, obstructing traffic.

OBSERVATION OF DRIVER:

+Appearance of Driver: Sluggish, Swaying, Unsteady, Sweaty, Shaking, Tremble in Voice, Dry mouth.
+Face/Eyes: Red Face, Dazed/Blank Stare; Puffy Eyes, Glassy, Large Pupils,
+Clothing Condition: Wet from Sweat
****Fire Rescue called to ensure not having a diabetic episode. Blood Glucose was high and high blood pressure. TOT to Gardens Medical Center for evaluation. Medically Cleared for Jail. Difficulty listening and following instructions with medical personnel. Attempted to sign for documents in wrong areas while the medical personnel were explaining to him.**
***Repeated questions during interaction and while at BAT.**

DRIVER'S STATEMENTS:

+In Car: Went for a 10 mile run/walk, went to Publix to get deodorant and mistook the green turn arrow for his green light. Did not have alcohol. Does not take illicit substances, takes Rx for Insulin. Ran out of Rx for depression, so has not taken it for two days.
+Roadsides: Complained of ankle pain due to the run/walk.
+BAT: Just started taking Insulin; Repeated same questions from Roadsides and at Hospital on why he is under arrest.

ODORS:

Faint odor of unknown alcohol from breath.

GENERAL OBSERVATIONS

SPEECH: **Slurred/Tremble, Quiet, Difficult to Understand**

ATTITUDE: **Calm, Cooperative**

CLOTHING: **Gray Shirt, Tan Pants, Black Sneakers**

MEDICAL/OTHER: **In Vehicle/Roadsides: Type 1 Diabetic; Depression Rx Effexor, ran out on 06/19/19**
Hospital: Anxiety, Rx Valium 5mg, mornings.
BAT: pancreatitis Just started on Insulin (Humalog & Levemir)

STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 21 day of JUNE 20 19 by Ofc. Cameron Carver

(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)

Notary Public State of Florida
Gary J Parent
My Commission GG 085486
Expires 06/21/2021

SCANNED
JUN 23 2019

SUBJECT: HUGHES, DAVID, MATTHEW CASE NUMBER 19003768

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- [x] LT EYE-LACK OF SMOOTH PURSUIT
- [x] 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:

Condition of Eyes: Glassy, Larger than normal pupils
Observations: Visible sway, Lack of Convergence Present.

WALK & TURN:

***Lost Balance**
***Used Arms for Balance**
***Stopped While Performing Task**
***Improper Turn**
Other Observations: Very focused on having heel touching toe during the task. Asked question on performing the turn.

ONE LEG STAND:

***Put Foot Down**
***Used Arms for Balance**
***Swayed**
Other Observations: Did not keep legs straight; Did not count as instructed; Did not keep foot elevated near six-inches; Swayed visibly during exercise, leaned back to maintain balance.

ROMBERG ALPHABET:

***Swayed**
Other Observations: Stopped while performing task; sang/rhymed; voice tone changed; recited quietly.

FINGER TO NOSE:

***Swayed**
***Missed Finger to Nose**

BREATH TEST RESULTS: .000 .000

STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 21 day of JUNE 2019 by Ofc. Cameron Carver

(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)

Notary Public State of Florida
Gary J Parent
My Commission GG 085486
Expires 06/21/2021

SCANNED
JUN 23 2019

FLORIDA DEPARTMENT OF LAW ENFORCEMENT
ALCOHOL TESTING PROGRAM
BREATH ALCOHOL TEST AFFIDAVIT

Instrument Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH CO SO
Instrument Serial Number: 80-006029 Software: 8100.27
Date of Test: 06/21/2019

Date of Last Agency Inspection: 06/13/2019
Observation Period Began: 23:23
Subject's Name: DAVID M HUGHES DOB: 01/09/1980 Sex: M

The subject was observed for at least twenty-minutes prior to the administration of the breath test to ensure that the subject did not take anything orally and did not regurgitate.

Results:

Test	g/210L	Time
Diagnostics Check	OK	23:49
Air Blank	0.000	23:49
Control Test	0.080	23:50
Air Blank	0.000	23:50
Subject Sample #1	0.000	23:51
Air Blank	0.000	23:52
Air Blank	0.000	23:54
Subject Sample #2	0.000	23:54
Air Blank	0.000	23:55
Control Test	0.080	23:55
Air Blank	0.000	23:55
Diagnostics Check	OK	23:56

Cylinder Lot: 00919080A3
Exp: 03/05/2021

State of Florida, County of Palm Beach.

Personally appeared before me the undersigned authority, who (✓) is personally known to me or (__) produced _____ as identification, and who after being placed under oath, states:

I THOMAS H LEAHEY, hold a valid Breath Test Operator permit issued by the Florida Department of Law Enforcement, I administered the above breath test to the subject named above in accordance with Chapter 11D-8, Florida Administrative Code, and this form is a true and accurate report of that breath test.

Breath Test Operator: Thomas H Leahey Date: 06-22-19
Signature

Sworn to ~~(or affirmed)~~ before me this 22nd day of June, 2019

Signature of Notary Public-State of Florida

Ofc C. Carver
Printed Name of Notary Public-State of Florida

Note: Pursuant to section 117.10, Florida Statutes, law enforcement officers, correctional officers, traffic accident investigation officers and traffic infraction enforcement officers are notaries public when engaged in the performance of official duties. In accordance with section 316.1934(5), F.S., this completed form is admissible without further authentication and is presumptive proof of the results herein. To be used in accordance with Section 316.1934(5), F.S., and in administrative proceedings pursuant to 322.2615, F.S.

FDLE/ATP FORM 38 - MARCH 2004, Ref. 11D-8.007

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

PBSO CASE # 19-085047 PBSO ZONE 3-13

AGENCY CASE # 19003768 CRASH CASE #

TIME OF STOP/CRASH 20:55 DATE 06/21/2019 DAY FRIDAY

SUBJECT'S NAME HUGHES (LAST) DAVID (FIRST) MATTHEW (MID) RACE W SEX M

HGT 510 WGT 180 DOB 01/09/1980

LOCATION 4500 PGA BLVD, PALM BEACH GARDENS, FL 33410

ARRESTING OFFICER'S NAME & ID Ofc. Cameron Carver #471 AGENCY PBGPD

DIVISION: Traffic Unit

NOTIFIED BY COMMO Yes

ARRIVAL AT FACILITY 23:23

ARREST TIME 21:33

BREATH RESULTS:

.000

.000

N/A

N/A

urine

TESTING OFFICER'S ID 19183

WITNESS LIST

CASE NUMBER: 19003768

ARRESTING OFFICER: **Ofc. Cameron Carver**
ADDRESS: 10500 N. Military Trail, Palm Beach Gardens, FL 33410
PHONE NUMBERS (HOME): N/A (WORK) (561) 799-4445
CAN TESTIFY TO: Facts of Case

NAME: **Ofc. Kristin Slaughter #500**
ADDRESS: 10500 N. Military Trail, Palm Beach Gardens, FL 33410
PHONE NUMBERS (HOME) N/A (WORK) (561) 799-4445
CAN TESTIFY TO: Traffic Stop

NAME: Ofc. Sam Warren #463
ADDRESS 10500 N. Military Trail, Palm Beach Gardens, FL 33410
PHONE NUMBERS (HOME) N/A (WORK) (561) 799-4445
CAN TESTIFY TO: Scene Safety

NAME:
ADDRESS
PHONE NUMBERS (HOME) (WORK)
CAN TESTIFY TO:

NAME:
ADDRESS
PHONE NUMBERS (HOME) (WORK)
CAN TESTIFY TO:

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ADDRESS
PHONE NUMBERS (HOME) (WORK)
CAN TESTIFY TO:

TESTING FACILITY TASK REPORT

AGENCY: PBG 19003768

SUBJECT: Hughes, David M CASE NUMBER: 19-085047

DATE: 06-21-19 VIDEO TAPE NUMBER: N/A

BEGINNING TIME: 23:46 ENDING TIME: 00:08

BREATH TESTS RESULTS: 1) .000 TIME 23:51 A.M./(P.M.) 2) .000 TIME 23:54 A.M./(P.M.)

3) N/A TIME — A.M./P.M. 4) N/A TIME — A.M./P.M.

BREATH OPERATOR: T Leahey # 19183

MAINTENANCE TECHNICIAN: J. Karlecke # 6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: clear

ATTITUDE: calm, talkative, cooperative

CLOTHING: beige shorts, gray t-shirt, black sneakers

MEDICAL CONDITIONS: Diabetes, chronic pancreatitus

MEDICATIONS: Insulin / efexor levimir, hemalog, trazadone

OTHER: eyes pupils dialated

COMMENTS: arriving at center A/o conducted 20 minute observation period at 23:23 hrs.

Δ agreed to take breath test

Tech read breath test results

Δ stated he understood breath test results

Δ agreed to provide [redacted] urine A/o read implied consent

Δ stated he understood implied consent

A/o read rights

Δ stated he understood rights

A/o conducted Q+A

Δ answered questions

A/o asked if Δ would talk to a DRE

Δ stated no he would let his attorney and a judge handle it from here

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

PBSO #0129A REV.11/02

SUBJECT: Hughes, David Matthew CASE NUMBER: 19003768

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 Ofc. Cameron Carver #471 of the Palm Beach Gardens PD.

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) Read on Camera

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) Read on Camera

SUBJECT: Hughes, David Matthew CASE NUMBER: 19003768

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? Not Asked

WHERE WERE YOU GOING? Crossroads Deli

WHAT STREET OR HIGHWAY WERE YOU ON? Military Trail

DIRECTION OF TRAVEL? S WHERE DID YOU START? Publix - Garden Square Shoppes

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? 1600 hrs WHAT DID YOU EAT? Unknown, Chicken

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? Yes WHAT? Whipple Procedure (2015)

ARE YOU SICK OR INJURED? Yes WHAT'S WRONG? Ankle Sore from walking

DO YOU LIMP? NO DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? NO

WERE YOU IN AN ACCIDENT TODAY? NO

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? NO WHEN? /

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? NO WHO? / WHY? /

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? Yes WHAT? Effexor Trazodone 10:00pm June 21 Iron Supp Levsin / Norco - 1600 6/21 WHEN?

DO YOU HAVE: EPILEPSY? _____ DRE: Y (N)
GLASS EYE? _____
FALSE TEETH? NO
EAR INFECTION? _____
INNER EAR TROUBLE? _____
DIABETES? Yes

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? NO

DO YOU TAKE INSULIN? Yes IF SO, WHEN WAS YOUR LAST INJECTION? 1600 6/22/19

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

INTERVIEWER: OSC Cameron Carver #471

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	☐		Other:	
	☐		Other:	

REVIEW COMPLETED BY

Booking Number: 2019020469	**Date:** 06/23/2019
	Specialist Name/ID: AM/31562