			05	090	38 T		DECT (N	NT 05		1	9	A	119	州	() _	1		
A D	OBTS No	a-ber				AR	REST / NO	TICE	10 8	APPEM	к ∨			t for Warn at for Capi	<u> </u>		JUVENI	LE
M I N	Agency O	PU Number 0501700		Jupites		Departm	ent				Agenc		19-003102					
S	Charge Ty Check as as apply.	many III T-65	,	3.1	Misdemeanor Traffic Misdem		5. Ordinance 6. Other						If Weapon Seized Enser Type NO	V <i>E</i>			Multip Clears Indica	ance
R A T	Location	of Arrest (Including Name of ENTRAL BLVD		VILL	4GE RD	JUP			•		(Business Na		") VD/W INDLA	NTO	WN RD.	JUPI		
1 0 N	Date of A		Time of Arrest	Boo	oking Date	,	Booking Tin	e i	Jail Date					ation of V		, , , , , ,		
	Name (Le	et, First, Middle) GUE, HILARY				· · · · · · · · · · · · · · · · · · ·	!	Ali	as.			Alias (Nau	e, DOB, Soc. Sec. #, Etc.)				
	Race W - White	e 1 - American Indian	W Se		use of Birth 06/06	71064	Height	Weig	gha	Eye	Color BLUI	- 1	Hair Color BLONDE	. 1	Complexion E	UR	Build	arge
D E	B - Black Scars, Ma	O - Oriental/Asian rks, Tatoos, Unique Physical		<u> </u>		/1704	1 3 00		140	Mar	ital Status		BLUNDE	1	Indication of: Alcohol Influe	ace Yes		
FEX		fress (Street, Apt. Number)			City)	**	(State)		(Žip)	L_	S	Phone		- 11	Drug Influence Residence Typ 1. City 3	162	<u> </u>	<u>81 U</u>
2 4 2	Permanes	WANDERING a Address (Street, Aps. Norsi	ber)	((City)		(State)		(Zip)			Phone			City 3 County 4 Address Source	†		
T	Business	WANDERING Address (Name, Street)			<i>FL 334.</i> City)	38	(State)		(Zip)			Phone	<u>(561) 746-800</u>		Occupation	FLI		
	D/L Nem			Soc. Sec.	Number		INS Number				lace of Birth			Citizensh		ouse K	<u>eepin;</u>	?
С		T200320647060 dent Name (Last, First, Midd		i				R	ice	Sex	HUN7 Date of B		ON, NY,	US 1. A	rrested 🔯	3. Pelony	_	5. Juvenile
0.01	Co-Defea	dant Name (Lest, First, Mide	fle)	-			· .	R	LCE	Sex	Date of B	irth			Large rrested			5. Juvenile
P	D Page	a Other:			·	Name (Last	, First, Middle)				<u> </u>				Lange 🔲		00r	
100	☐ leggs	i Custodian (Street, Apt. Number)			(C	'ity)	1	(State)		(Zip)					Bu	siness Phone		
E	Notified	by: (Name)				((-i,0)	<u> </u>	Date			ime	JUVENILE DISPOS	TION				
Ĺ	L	To: (Name)				Relationship	$\frac{C}{C}$		Date			ine	1. Handled/Proc Department	cseed with		TOT JAC	·	
						·												
	The a	bove address was hild and/or parent	provided by was told to k	cep the	fendant an Juvenile (nd/or ⊔ d Court Clerk's	efendant's p office	arents.	Á			d Attended					Grade	
L	(Priod	e 355-2526) infor	med or any c		No:			\mathcal{A}		y Crime? es 👿 N		iption of Pr	operty			Ì	Value of Pr	operty
C O D E	Drug A N. N/A P. Puu	B. Buy	R. Samegle D. Deliver E. Usc	K. Dispe Distr		A. Manufacture/ Produce/ Cultivate	Z. Other		Drug N. N/ A. Ar		B. Barl C. Coc E. Hen		H. Hallucinogen M. Marijuana O. Oplum/Deriv.		phernalia/ ipment hotic	U. Unkac Z. Other	wa	
CHA		Description U-ENHANCED	BAC OVE	R .15									Statute Violation Number 316.193(4)	7		Violation of	ORD#	
RGE	Drug As	tivity Drug Type A	mount / Unit	/	Officase #			nestic Viol		Warrant / Co	apias Numbo	Ħ				Bond		
CH	Charge	Description											Statute Violation Number	r		Violation of	OND #	
HARGE	Drag Ad	tivity Drug Type A	mount / Unit	/	Offense #		*	nestic Viol		Warrant / Co	apias Numbe					Bond		
C H A R		Description .											Statute Violation Number	,		Violation of	ORD#	-
RGE	Dreg Act	ivity Drug Type A	mount / Unit	, 1	Offense #	7		mestic Viol		Warrant / C	apias Numbe	er				Bond		
Ţ	Health /	Apparent Physical Condition	of Defendant		7					Any knowlo Explain:	dge of the fo	dlowing:	☐ Mental ☐ Esc	ape Risk	Medicati	on 🗆 De	formities	lajuries
N T A	Check w	hich applies: Relea			Parent/Guardia ty Mental Healt		O.T. County Jail	PROPER	TY - Reco			Releas	od By		Released	4 To		
E	Тганаров	The second secon		7				Date Tre	asported	Time	c Transporte	d Other			<u> </u>		,	
707		NSTRUCTION NO							ation (Co.	rt, Room) County	-	PA	LM BEACH (GARD)			
NOTICE		NSTRUCTION NO				Court structions on	Page 2.		art Date an	d Time	07/201			<i>37111.</i>			N	_
Ţ		E TO APPEAR AT TH								PAY TH	E FINE S	UBSCRI	BED. I UNDERSTA			,	Pho	
A P P	FOR M	FULLY FAIL TO APPE Y ARREST SHALL BE		E COOK	i na negoi	KED BT THIS	NOTICE TO A	rear,	I II AI I I	WAI DE I	TELL IN	COMIEN	IFI OF COURT AN	U A WAI	C.	, 3	Avail	able
P E A R	-	5	Signature of Defe	ndant (or J	uvenile and P	arent/Custodian) /			· · ·		I	Pate Signed		= =====================================	- 3	7019	•
^	.1	r Other Agency				Signature of Arres	ting Officer	<u>/</u>	327	רוו	7	Name V	crification (Printed by An	restee)				
M			Resisted Arrest			Name of Arresting ROCHA, I			(1.D.# 1.77	(PRIN	T)		်ယ်င် တာင		I Tea	\Œ
١	ing A	T Haileal	72010	Pouch	1#	Transporting Offic	DET 1	77	7/1		Agency	Wiran	here if subject signed wi	th an °Y"			- 1	Lor 1
_		1 11x 14.31				- 1 1 - 0	~+~~	ا ر	$\cdot \mu'$		<u> </u>	1			~ 7.7	MM	-	}

	OBTS N	dumber		P.	ROBABLE CAU	SE AFFIDAVIT	•	1. Arrest 2. N.T.A.	3. Reques 4. Reques	t for Warrs at for Capit		JUVENILE	
D	Agency	ORI Number	Agency Name				Agency Repo	1					7
1		FL 0501700			DEPARTMENT	<u> </u>	5 4	19-0	03102	<u> </u>			_
N	Charge Check a as apply	Type: 1. Felony 2. Traffic Felony	☐ 3. Misde 2 4. Traffic	meanor : Misdemeanor	5. Ordinance 6. Other								
ΩW	Name (I	ast, First, Middle)			Alias				Race	Sex	Date of Birth		
6		AGUE, HILARY RAM Description	SDEN		· · · · · · · · · · · · · · · · · · ·	Charge Description		<u>-</u>	W	F	06/0	5/1964	4
CHA	_	193(4) DUI-ENHANCED	BAC OVER .	.15									
K G E	Charge	Description				Charge Description						***	
S	Victim's	Name (Last, First, Middle)				<u> </u>			Race	Sex	Date of Birth		_
ľ		te Of Florida											
c		ddress (Street, Apt. Number)	(City)	··· .,	(State)	(Zip)	Phon	•		Ad	dress Source		_
	Busines	Address (Name, Street)	(City)	·	(State)	(Zip)	Phon	•		00	cupation		_
												<u> </u>	
П		undersigned certifies and swears th	at he/she has just	and resonable g	rounds to believe, and o	loes believe that the a	bove named	Defendant o	ommitted I	he follow	ring violation	of law.	
		Person taken into custody committed the below acts in r	my presence.		☐ was	observed by						who told	,
	Ē	confessed to										mitt the below acts.	-
	_	admitting to the below facts.	_	3040		ound to have comm			1 -	•	(described) investigation.	
	On	the <u>30</u> day of	June		at 02:40	(Specifically inclu	de facts co	nstituting ca	ause for a	arrest.)			╛
	On	06/30/2019 at ap	proximat	ely 0240	0 hours I w	as on patr	ol in	my Ju	pite	. PD	polic	9	١
	vel	aicle. As I drove	eastbou	and on W	Indiantown	Rd, I pas	sed S	Centr	al B	Lvd a	and ob	served a	-
		lver SUV stopped										-	ļ
R	1	aind my vehicle.	I turned	d on my	emergency 1	ights and	siren	s to k	eep t	the s	vehicl	e from	-
0 B	mor	ving.											
Ā	Whe	n the traffic si	onal tur	ned gree	en the vehi	cle drove	south	acros	s the	a in	terser	tion.	
L		ost striking a m	_	_	and the second s							•	
E	Blv	d. The vehicle o	lid not y	rield to	my lights	and sirens	and	contin	ued t	to di	rive s	outh at	
c		out 35 mph. With											ĺ
Ā		e to a stop. The and S Central Bl								on at	t W In	diantown	
s		and a contrar bi	.vu, wilei		e activate	w my rrdu	s and	STLAU	. J .				
E	One	ce the vehicle wa	s stoppe	d I made	e contact w	ith the dr	civer,	a whi	te f	mal	e who	was	-
s		er identified as											
T		I could smell a											
TE		gue would at fir sked Teague if s											
M		ry. I asked Teag										тид	·
E	ins	urance. Teague w	ould sev	eral ti	mes start t	o look for	her o	docume	nts a	and	then s		
τ		logize or ask fo											
		interview. Teag											
		specifically. I she was not on											
		m Uncle Micks (a											
		st she refused.											
	hin	there. I opened	l the dri	iver doo:	r and Teagu	e stepped.	Teag	ue was	uns	tead	y on h	er feet	
L	and	I observed her	sway whe	on she wa	as standing	in place.	. I as	ked Te	ague	if	she fe	elt as if	
₹03-	SW	ORN AND SUSSCRIBED REFORE	ME	dann	·····	*****	<u></u>	12	/	770	14-		
Z - E		الشكا		3 survey	Notary Public State	of Florida SIGNATUR	RE OF ARRE	Z STING / INV	ESTIGATI	NG OFF	バノフク ICER		
Š	-	NOTARY PUBLIC / CLERK OF	OURT / OFFICE		Paris Pound My Commission G	G 200028 🔾 _	/						
Ř		06/30/	2019	AN OF POR	Expires 03/25/202	²	ROCHA. NAME OF O		(1177 ASE PRIN		·	<u> </u>	_
Z-STRAT->			TE	*****			06/	30/201	9			PAGE 1 OF 2	2
Ε	<u> </u>							DATE			4 A 1 A	115	_
	COL	JRT STATE AT	TORNEY	CE	NTRAL RECO	RDS	JAIL	CI	RIMES	VAN	ABUI		

CRIME SAAN NED. 1. O.
JUL 0 1 2019

۱	BTS N	umber	PROBABLE CAUSE AFFIDAVIT 1. Arrest 3. Request for Warrant SUPPLEMENT 2. N.T.A. 4. Request for Capies 1 JUVENILE	\neg						
<u> </u>	gency		Agency Report Number ITTER POLICE DEPARTMENT 5 4 19-003102	\Box						
- 10	zharge zheck e is apply	Type: 1. Felony	3. Misdemeanor 5. Ordinance Special Notes:	ヿ						
_	teme (i	ast, First, Middle) AGUE, HILARY RAMS	Alias Race Sex Date of Birth	ㅓ						
	she tin sto	was intoxicated a e she first got to p answering or re	she replied no. I asked Teague if she remembered around what Uncle Micks and she could not recall. Teague would several times se to answer questions, and begin to ask for her husband. I then							
	no. roa I p	sked Teague if she was willing to complete standardized roadside tasks and she stated of I explained to Teague her Taylor warnings and asked her again to complete the padside tasks. Teague refused again. At this time I placed Teague under arrest for DUI. placed Teague in handcuffs, double locked and asked for a female officer to respond the scene for a search. OFC Shaff ID389 arrived on scene and completed a search of								
	Tea bel	gue`s person. I po ongings.	Teague in the back of my police vehicle, and gathered her							
P R O B A B	con mou agr fro Pal	ducted a 20 minute th or regurgitate seed. Teague prove m a prepared text	ed two samples of .214 and .203. I read Teague her Miranda Rights							
C A U	J. (
E STATEMENT										
â	sw	ORN AND SUBSCRIBED BEFORE ME								
Ý N	٥	100	Notary Public State of Florsienatine of Armesting / Investigating officer							
S T R		NOTARY PUBLIC / CLERK OF COL	My Commission GG 200028 ROCHA, LUIS (1177)							
Î	_	06/30/2 DATE	06/30/2019 PAGE 2 OF	2						
			DATE							

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: 80-006239 Software: 8100.27
Date of Test: 06/30/2019

Date of Last Agency Inspection: 06/13/2019

Observation Period Began: 03:32 Subject's Name: HILARY R TEAGUE

Cylinder Lot: 00919080A3

DOB: 06/06/1964 Sex: F

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	04:05
	Air Blank	0.000	04:05
	Control Test	0.080	04:05
	Air Blank	0.000	04:06
	Subject Sample #1	0.214	04:07
	Air Blank	0.000	04:07
	Air Blank	0.000	04:09
	Subject Sample #2	0.203	04:10
	Air Blank	0.000	04:10
	Control Test	0.080	04:11
	Air Blank	0.000	94:11
	Diagnostics Check	OK	04:11

State of Florida, County of ALL BOYCH,

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

I PARIS D FOUND , 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:

Signature

Date: 06/30/9

Signature

Signature

Date: 06/30/9

Signature of Norary Public-State of Florida

Printed Name of Notary Fublic-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 notative audication and in the performance of official duties. In accordance with section 316.1934(5), F.S. The property of the results herein to be used in accordance with Section 316.1934(5), F.S., and in administrative proceedings pursuant to 2.1615, 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 # 19-087972	PBSO ZONE 3-14
AGENCY CASE # 19-003102	CRASH CASE #
TIME OF STOP/CRASH 0240 DATE	06/30/2019 DAY Sunday
	MID
HGT 5'8" WGT 140	DOB <u>06/06/1964</u>
LOCATION S Central Blvd/ W Indiantown Rd, Jup	piter FL
ARRESTING OFFICER'S NAME & ID Luis Roch	a 327/1177 AGENCY Jupiter PD
DIVISION:	NOTIFIED BY COMMO Yes
	ARRIVAL AT FACILITY 0332
	ARREST TIME 0257
REATH RESULTS:	
2) .203 3) m/m	
4) N/H	
	,
TESTING OFFICER'S ID 24639	PBSO VIDEOTAPE # MA

TESTING FACILITY TASK REPORT

AGENCY: JPD
SUBJECT: TEAGLIE, HILARY R CASE NUMBER: 19-087972
DATE: 06/30/19 VIDEO TAPE NUMBER: N/A
BEGINNING TIME: 03.59 ENDING TIME: 04.14
BREATH TESTS RESULTS: 1) . 2/4 TIME 01:07 (A.M./P.M. 2) . 203 TIME 04:10 (A.M./P.M.
3) ~/A TIME A.M./P.M. 4) ~/A TIME A.M./P.M.
3) w/µ TIMEA.M./P.M. 4) w/A TIMEA.M./P.M. BREATH OPERATOR: P. Pound # 2 4639
MAINTENANCE TECHNICIAN: 7. KANCECLE #6467
TESTING OFFICER'S OBSERVATIONS
SPEECH: SLURRED
ATTITUDE: CRYING, UPSET
CLOTHING: WHITE PANTS, WHITE PALVE SHIRT, BIVE SNOAKER
MEDICAL CONDITIONS:
MEDICATIONS: NONE
OTHER EYES GLASSY AND BIOOWHOT
COMMENTS: ARRIVED AT CONTER AS BIGAN THE 24
MINUTE OBSERVATION PERZOD AT 03:32 HRS.
A. ASKED TO TALK! TO ANOTHER OFFICER, ALSO
WAS SAYING SHE DON'T RNOW IF SHE SHOULD
A/O. REAL I/C
A. DIDN'T SAY SHE UNDERSTOOD I/C BUT SAID SHE
WOULD TAKE TEST.
A/O. READ RIGHTS D. STATED SHE UNDERSTOOD RIGHTS
A/O. ATTEMPTED Q+A D. REFUSED QUESTIONS.
SCANNED
TECH. READ TEST RESULTS. JUL 01 2019
A. UNDERSTOOD HER RESULTS 134 STYLOG THATS BAD WHITE-STATE ATTY. YELLOW-DHSMV PINK-CENTRAL RECORDS GOLD-JAIL PRESONIZED REV. 11/12

SURIECT	TEA	GUE,	HILA	RY	1 R
000,000					-

C	ASE	N	JME	ER:

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.
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 period of one (1) year for a first refusal, or eighteen (18) months if your privilege has been previously suspended as a resolution 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 of your breath, urine or blood, you will be committing a misdemeanor. Refusal to submit to the test I have requested of is admissible into evidence in any criminal proceeding.
SUBJECT'S SIGNATURE: (X) PERD ON GANCAG
CONSTITUTIONAL WARNINGS
I AM REQUIRED TO WARN YOU BEFORE YOU MAKE ANY STATEMENTS THAT YOU HAVE THE FOLLOWING RIGH
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 (AMERA SCANNED
JUL U 2019 WHITE -STATE ATTY. YELLOW - DHSMV PINK - CENTRAL RECORDS GOLD - JAIL

SUBJEC	T. TEA	GUE	HILARY	R

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? SCANNED
INTERVIEWER: JUL 0 1 2019
PRIO 20125C REV. 2023 WHITE - STATE ATTY. YELLOW - DHSMV PINK - CENTRAL RECORDS GOLD - JAIL

WITNESS LIST

CASE NUMBER: 19-003102 ARRESTING OFFICER: Luis Rocha ADDRESS: 210 Military Trl, Jupiter FL 33458 _____ (WORK) <u>561-746-6201</u> PHONE NUMBERS (HOME): CAN TESTIFY TO: PC NAME: OFC Lopez ID325 ADDRESS: 210 Military Trl, Jupiter FL 33458 _____ (WORK) <u>561-746-6201</u> PHONE NUMBERS (HOME) ___ CAN TESTIFY TO: Driving pattern of the suspect. NAME: OFC Tappin ID367 ADDRESS 210 Military Trl, Jupiter FL 33458 ____ (WORK) <u>561-746-6201</u> PHONE NUMBERS (HOME) CAN TESTIFY TO: Observations of the suspect. NAME: _____ ADDRESS PHONE NUMBERS (HOME) () __(WORK) <u>()</u> CAN TESTIFY TO: NAME: ADDRESS __ (WORK) PHONE NUMBERS (HOME) CAN TESTIFY TO: NAME: ____ ADDRESS ____ (WORK)____ PHONE NUMBERS (HOME) _____ CAN TESTIFY TO: NAME: _____ ADDRESS ___ (WORK) _____ PHONE NUMBERS (HOME) ____ CAN TESTIFY TO: NAME: ADDRESS _____ PHONE NUMBERS (HOME) (WORK) _____ CAN TESTIFY TO: NAME: ___ ADDRESS (WORK) _____ PHONE NUMBERS (HOME) CAN TESTIFY TO: NAME: ADDRESS __ PHONE NUMBERS (HOME) _____(WORK) _____ CAN TESTIFY TO: NAME: _ ADDRESS ___ PHONE NUMBERS (HOME) ______ (WORK) _____ SCANNED CAN TESTIFY TO: JUL 0 1 2019



Palm Beach County Sheriff's Office - Arrests Only

	<u> </u>	#1	Parastratus.	B N
	X	Florida State Statute	Description Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans	Page Number(s)
		119.071(2)(d)	pertaining to mobilization deployment or tactical operations.	
tions		943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
L/E Exemptions		119.071(4)(c)	Undercover personnel.	
L/E.E.		119.071(2)(f)	Confidential informants (CIs).	
		119.071(2)(e)	Confession.	
su		985.04(1)	Juvenile offender records.	
mptio		119.071(h)(i)	Assets of a crime victim.	
Public Info. Exemptions		395.3025(7)(a), 456.057(7)(a)	Medical information.	
lic In		394.4615(7)	Mental health information.	
P		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.	
	×	(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.	
f 23)		(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
(Rule o		(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
ation 2.420	<u> </u>			
Florida Rules of Judicial Administration 2.420 (Rule of 23)				
es of Judica		A Company		
Florida Rul				
- F		1	Other:	
Other			Other:	
	-			

REVIEW COMPLETED BY

Booking Number: 2019021366	Date: 07/01/2019
	Specialist Name/ID: AM/31562

