

1481

ARREST / NOTICE TO APPEAR

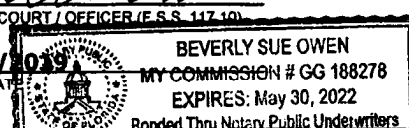
1. Arrest
2. N.T.A.
3. Request for Warrant
4. Request for Capias

1

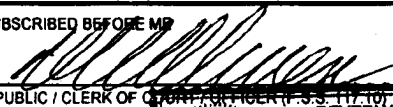
JUVENILE

N

OBTS Number	Agency ORI Number 0501700		Agency Name Jupiter Police Department		Agency Report Number (N.T.A.'s only) 514 19-005422	
Charge Type: Check as many as apply	☐ 1. Felony ☐ 2. Traffic Felony	☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor	☐ 5. Ordinance ☐ 6. Other	If Weapon Seized Enter Type NONE		Multiple Clearance Indicator 01
Location of Arrest (Including Name of Business) N ALT AIA/CENTER ST, JUPITER FL 33477				Location of Offense (Business Name, Address) 899 N ALT AIA/CENTER ST, JUPITER, FL 33477		
Date of Arrest 12/04/2019	Time of Arrest 20:52	Booking Date 12/04/2019	Booking Time 21:02	Jail Date	Jail Time	Location of Vehicle EAST COAST TOWING
Name (Last, First, Middle) JACKSON, JOAN L				Alias (Name, DOB, Soc. Sec. #, Etc.)		
Race W - White B - Black O - Oriental/Asian W	Sex F	Date of Birth 09/23/1938	Height 5'05	Weight 140	Eye Color BLUE	Hair Color BLACK
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)				Complexion LIGHT	Build Small	Indication of Alcohol Influence Yes ☒ No ☐ Unk. ☐
Local Address (Street, Apt. Number) 338 CLOCKTOWER DRIVE, JUPITER, FL 33458				Marital Status S	Religion	Residence Type: 1. City 3. Florida 2. County 4. Out of State 1
Permanent Address (Street, Apt. Number) 338 CLOCKTOWER DRIVE, JUPITER, FL 33458				Phone		Address Source DL
Business Address (Name, Street) J250492388430 / FL				Phone		Occupation Retired
D/L Number, State J250492388430 / FL		Soc. Sec. Number	INS Number	Place of Birth (City, State) HIGHLAND PK, IL		Citizenship US
Co-Defendant Name (Last, First, Middle)				Race	Sex	Date of Birth
Co-Defendant Name (Last, First, Middle)				Race	Sex	Date of Birth
Name (Last, First, Middle)				Relationship		
Address (Street, Apt. Number)				Business Phone		
Notified by: (Name)				Date	Time	JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated
Released To: (Name)				Date	Time	
The above address was provided by ☐ defendant and/or ☐ defendant's parents. The child and/or parent was told to keep the Juvenile Court Clerk's Office (Phone 355-2526) informed of any change of address.				School Attended		
Property Crime? ☐ Yes ☒ No				Description of Property		Value of Property
Drug Activity N. N/A P. Possess				Drug Type N. N/A A. Amphetamine		
S. Sell B. Buy T. Traffic				B. Barbiturate C. Cocaine E. Heroin		
R. Smuggle D. Deliver E. Use				H. Hallucinogen M. Marijuana O. Opium/Deriv.		
K. Disperses/ Distribute				P. Paraphernalia/ Equipment S. Synthetic		
M. Manufacture/ Produce/ Cultivate				U. Unknown Z. Other		
Z. Other						
Charge Description DUI - DRIVING UNDER INFLUENCE				Statute Violation Number 316.193(1) k3		Violation of ORD #
Drug Activity	Drug Type N	Amount / Unit /	Offense #	Counts 1	Domestic Violence ☐ Y ☒ N	Warrant / Capias Number
Charge Description				Statute Violation Number		Violation of ORD #
Drug Activity	Drug Type	Amount / Unit /	Offense #	Counts	Domestic Violence ☐ Y ☐ N	Warrant / Capias Number
Charge Description				Statute Violation Number		Violation of ORD #
Drug Activity	Drug Type	Amount / Unit /	Offense #	Counts	Domestic Violence ☐ Y ☐ N	Warrant / Capias Number
Health / Apparent Physical Condition of Defendant				Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries		
Check which applies: ☐ Released O.R. ☐ Released to Parent/Guardian ☐ T.O.T. County Jail ☐ Posted Bond ☐ South County Mental Health				PROPERTY - Received By		
Transported By				Date Transported	Time Transported	Other
☒ INSTRUCTION NO. 1 - Mandatory appearance in court ☐ INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.				Location (Court, Room) North County PALM BEACH GARD		No Photo Available
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.				Court Date and Time 01/08/2020 08:30:00		
Signature of Defendant (or Juvenile and Parent/Custodian) Joan L Jackson				Date Signed 12/4/19		
HOLD for Other Agency				Signature of Arresting Officer A. Borrows		Name Verification (Printed by Arrestee)
☐ Dangerous ☐ Suicidal ☐ Resisted Arrest ☐ Other				Name of Arresting Officer (Print) BORROWS, ANDREW		(PRINT)
Pouch #				I.D. # 1138		PAGE 1 OF 1
Transporting Officer A BORROWS				Agency JUPITE		Witness here if subject signed with an "X".

OBTN Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Copies		1	JUVENILE
A D M I N I S T R A T I V E	Agency ORI Number FL 0501700		Agency Name JUPITER POLICE DEPARTMENT		Agency Report Number 5 4 19-005422				
	Charge Type: Check as many as apply. ☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other				Special Notes:				
D E F E N D E N T	Name (Last, First, Middle) JACKSON, JOAN L				Race W		Sex F		Date of Birth 09/23/1938
	Charge Description DUI 316.193(1)				Charge Description				
C H A R G E S	Charge Description				Charge Description				
	Charge Description				Charge Description				
V I C T I M	Victim's Name (Last, First, Middle)				Race		Sex		Date of Birth
	Local Address (Street, Apt. Number) (City) (State) (Zip)				Phone		Address Source		
B U S I N E S S	Business Address (Name, Street) (City) (State) (Zip)				Phone		Occupation		
	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 _____ that he/she saw the arrested person commit the below acts. ☐ confessed to _____ admitting to the below facts. ☐ was found to have committed the below acts, resulting from my (described) investigation. On the <u>4</u> day of <u>December</u>, <u>2019</u> at <u>20:18</u> (Specifically include facts constituting cause for arrest.) On the above date at approximately 2018 hours I was dispatched to a call of a careless driver in the area of Center Street and Old Dixie Highway in the Town of Jupiter, Palm Beach County, Florida. Joan Jackson had reportedly taken a very wide right hand turn from southbound North Alternate A1A onto Center Street to the extent she drove into oncoming lanes. An unidentified male and another named Frederick Ellis observed Jackson's driving and verbally detained her pending arrival of police. Upon my arrival I saw both of the males and I saw a white BMW SUV bearing Florida license plate JUCU30 across the eastbound lanes of traffic facing southwest. The defendant, identified by DAVID as Joan Jackson was in the driver's seat. The vehicle was not running. I spoke to both males, Ellis agreed to remain on scene to provide a statement, and the other did not wish to stay. I walked up to the passenger side of the SUV and spoke to Jackson. I could smell the odor of an unknown alcoholic beverage coming from within the vehicle. Jackson's speech was slurred and her eyes were bloodshot and glassy. I took a sworn BWC recorded statement from Ellis, who stated he observed Jackson turning right from southbound North Alternate A1A. He stated he worked with the other male to keep Ellis on scene pending arrival of police. Upon the arrival of Officer Raleigh, we worked to clear the roadway as Jackson's vehicle was causing a dangerous situation. I noticed upon my return to Jackson's vehicle that she had restarted it and it was now running. I had Jackson exit her vehicle and Officer Raleigh moved her vehicle to the right hand side of North Alternate A1A and we were able to clear the roadway.								
S W O R N A N D S U B S C R I B E D B E F O R E M E	SWORN AND SUBSCRIBED BEFORE ME				SIGNATURE OF ARRESTING / INVESTIGATING OFFICER				
	NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) 12/04/2019 DATE 				BORROWS, ANDREW (1138) NAME OF OFFICER (PLEASE PRINT) 12/04/2019 DATE				
COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P.I.O.									

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OSTS Number Agency ORI Number FL 0501700	PROBABLE CAUSE AFFIDAVIT SUPPLEMENT	1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Captives 1	JUVENILE
Agency Name JUPITER POLICE DEPARTMENT	Agency Report Number 5 4 19-005422		
Charge Type: ☐ 1. Felony ☐ 3. Misdemeanor ☐ 5. Ordinance ☐ 2. Traffic Felony ☒ 4. Traffic Misdemeanor ☐ 6. Other		Special Notes:	
Name (Last, First, Middle) JACKSON, JOAN L		Race W	Sex F
Date of Birth 09/23/1938			
During that time, I spoke to Jackson. Jackson stated she'd had one and a half drinks. I could smell the odor of an unknown alcoholic beverage on her breath. Jackson appeared somewhat disoriented and was unsure of what she had done wrong (driving-wise). I asked her to complete roadside tasks. Jackson asked if she had to so I advised her of Taylor Warnings. Jackson agreed to roadsides. As Jackson was 81 years old, I decided seated roadsides would be more appropriate. I set up a folding chair next to my car away from traffic. I first conducted the Seated Horizontal Gaze Nystagmus task. I am a certified Drug Recognition Expert and conducted the task in a manner consistent with my training and experience. I observed all six clues of Horizontal Gaze Nystagmus. Jackson had Lack of Smooth Pursuit, Distinct and Sustained Nystagmus and Onset of Nystagmus prior to 45 degrees in both eyes. I observed Vertical Gaze Nystagmus also. I next conducted the Seated Finger to Nose. I observed the following: L1: When I said "left," Jackson opened her eyes and asked what to do. I explained again. Jackson turned her head, I reminded her to keep it still, and then she touched her face to the left of her nose and searched for the tip, using the pad of her finger. Jackson opened her eyes and left her finger on her nose. I reminded her to put it down to the side. R2: Jackson turned her head, opened her eyes, and touched the pad of her finger to the bridge of her nose before moving it to the tip. Jackson left her finger there and I reminded her to put it back down to the side without being told. L3: Jackson opened her eyes, moved her head towards her hand, and touched the tip of her nose with the pad of her finger. Jackson did not bring her finger down to the side. R4: Jackson opened her eyes, moved her head towards her hand, and touched the tip of her nose with the pad of her finger. Jackson did not bring her finger down to the side. R5: Jackson took her finger off of her nose and then placed it straight back on with the pad. She did not put her hand back down to the side. Her eyes remained open. L6: Jackson opened her eyes, moved her head towards her hand, and touched the tip of her nose with the pad of her finger. Jackson did not bring her finger down to the side. I then conducted the Palm Pat. Jackson did not perform the task properly. Jackson did not count as instructed (or at all). Jackson rotated both her hands together, clapping on each side. I then conducted the Hand Coordination Task. Jackson asked many questions about the task. Jackson moved her hands about each other without moving far from her chest counting to four. Jackson then did the same thing and put her hands on her lap. I then conducted Seated Alphabet Task. Jackson stated the alphabet correctly. I determined I had probable cause to arrest Jackson for DUI based on the totality of the circumstances. I placed Jackson in handcuffs (in front) which I checked for spacing			
SWORN AND SUBSCRIBED BEFORE ME  NOTARY PUBLIC / CLERK OF COURT (FLA. STAT. § 117.10) BEVERLY SUE OWEN MY COMMISSION # GG 188278 EXPIRES: May 30, 2022 Bonded Thru Notary Public Underwriters		SIGNATURE OF ARRESTING / INVESTIGATING OFFICER  BORROWS, ANDREW (1138) NAME OF OFFICER (PLEASE PRINT) 12/04/2019 DATE	

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DEC 05 2019

A D M I N D E F P R O B A B L E C A U S E S T A T E M E N T A D M I N I S T R A T I V E	OBTS Number		PROBABLE CAUSE AFFIDAVIT SUPPLEMENT			1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	JUVENILE	
	Agency ORI Number FL 0501700		Agency Name JUPITER POLICE DEPARTMENT			Agency Report Number 5 4 19-005422						
	Charge Type: Check as many as apply. ☐ 1. Felony ☐ 3. Misdemeanor ☐ 5. Ordinance ☒ 4. Traffic Misdemeanor ☐ 6. Other										Special Notes:	
	Name (Last, First, Middle) JACKSON, JOAN L								Race W	Sex F	Date of Birth 09/23/1938	
and double locked. I transported Jackson to the Palm Beach County Breath Alcohol Testing Facility. I conducted a 20 minute observation period facing Jackson. I then requested Jackson provide a sample of her breath. She agreed. Jackson provided samples of .119 and .122. I read Jackson her Miranda Rights from a prepared text. Jackson answered all the questions I asked of her. I then secured Jackson in a holding cell while I completed my paperwork. I subsequently booked Jackson into the Palm Beach County Jail where I charged her with DUI per FSS 316.193(1). My on scene investigation was captured on my issued body worn camera. Jackson was generally cooperative and polite during my encounter with her.												
NOT A CERTIFIED COPY												
SWORN AND SUBSCRIBED BEFORE ME NOTARY PUBLIC / CLERK OF COURT (137-10) BEVERLY SUE OWEN MY COMMISSION # GG 188278 EXPIRES: May 30, 2022 Bonded thru Notary Public Underwriters 12/04/2019 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER BORROWS, ANDREW (1138) NAME OF OFFICER (PLEASE PRINT) 12/04/2019 DATE												

SCANNED
DEC 05 2019

WITNESS LIST

CASE NUMBER: 19-005422

ARRESTING OFFICER: Ofc. A. Borrows 380 / 1138

ADDRESS: 210 Military Trail, Jupiter Fl 33458

PHONE NUMBERS (HOME): _____ (WORK) 561 746 6201

CAN TESTIFY TO: PC

NAME: Officer Elizabeth Ralieggh

ADDRESS: 210 Military Trail, Jupiter Fl 33458

PHONE NUMBERS (HOME) _____ (WORK) 561 746 6201

CAN TESTIFY TO: Scene

NAME: Frederick Ross Ellis

ADDRESS 17937 Thelma Ave Apt D, Jupiter Fl 33458

PHONE NUMBERS (HOME) 561 707 8612 (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) 0 (WORK) 0

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

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ADDRESS _____

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CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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DEC 05 2019

TESTING FACILITY

AGENCY Jupiter Hill

SUBJECT Jackson, Joan L.

CASE NUMBER 19-144583

DATE 12/14/19

VIDEO TAPE NUMBER N/A

BEGINNING TIME 3140

ENDING TIME 2155

BREATH TESTS RESULTS: 1 119 TIME 2142 AM/PM 2 127 TIME 2157

3 TIME AM/PM 4

BREATH OPERATOR F. Owen # 3184

MAINTENANCE TECHNICIAN T. Karlock # 6467

TESTING OFFICER'S OBSERVATIONS

SPEECH

ATTITUDE Good, Cooperative

CLOTHING Dark blue jacket, dark pants

PHYSICAL CONDITIONS Good

REMARKS in last 24 hr

OTHER 5140A

COMMENTS: Joe A arrived at 3120 hrs

A. L. arrived at 3000 hrs

Joe requested breath test, A agreed

to make 2 trips. He wants 1st trip

to get sample 1st trip.

He also claims no alcohol in his

test or planned results.

He answered A & A

had couple drinks at the club.

SO
DEC 15

SUBJECT: DR. JAMES L. BARRON CASE NUMBER: 105432

QUESTIONS AND ANSWERS

DO YOU HAVE ANY RIGHTS IN THE STATE OF ALABAMA? WITH THESE RIGHTS IN THE STATE OF ALABAMA, DO YOU HAVE ALL OF OR PART OF THE FOLLOWING RIGHTS?

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

WHERE WERE YOU STOPPED/ACCIDENT?

WHAT STREET OR HIGHWAY WERE YOU ON? ALL ALA - 3

DIRECTION OF TRAVEL? South WHERE DID YOU TRAVEL?

WHAT TIME DID YOU START? 11:15 WHAT TIME IS IT NOW?

WHAT DATE DID YOU START? Dec 4 WHAT DAY OF THE WEEK IS IT?

WHAT CLOTHING AND SHOES ARE YOU WEARING?

WHEN DID YOU START? 11:15 WHAT DID YOU EAT?

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? @ club

HOW MUCH DID YOU DRINK? 140 HAVE YOU BEEN DRINKING? Yes WHEN?

HOW MUCH? 12:30 to 1:00 WHERE? @ club WITH WHOM?

WHAT WAS YOUR FIRST DRINK? — AND YOUR LAST DRINK?

WHAT WAS YOUR LAST TWO DRINKS?

HOW MUCH DID YOU DRINK OF THE ALCOHOL? N ARE YOU UNDER THE INFLUENCE? N

HAVE YOU DRUNK ANY ALCOHOL SINCE THE ACCIDENT? No HOW MUCH?

WHAT? — WHERE? — WHEN?

WHAT LINE OF BUSINESS ARE YOU IN? — WHEN DID YOU LAST DRINK?

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? No WHAT?

DO YOU SICK OR DIZZIED? No WHAT'S WRONG?

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 SMOKE ANY MARIJUANA TODAY? No

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? N WHEN?

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? No WHAT?

DO YOU HAVE: N

HEARING? N

EYES? N

TOOTH? N

LEG? N

ARM? N

DO YOU HAVE ANY PROBLEMS WITH YOUR EARS THAT ARE NOT CORRECTED BY GLASSES? N

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

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

INTERVIEWER: Ofc. James Barron 380 / 1138

WHITE STATE

SCANNED
DEC 05 2019

SUBJECT

CASE NUMBER

WRITTEN CONSENT FOR DUI IN A MOTOR VEHICLE

PLEASE READ ONLY THE PARAGRAPH APPLICABLE TO THE TYPE OF TEST REQUESTED.

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

PLEASE READ ONLY IF THE SUBJECT DOES NOT COMPLY WITH THE 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 _____ months or less (18 months if your privilege has been previously suspended for a period of 6 months or more). It is a violation of the law to refuse to submit to a test of your breath, urine or blood. If you refuse to submit to a test requested of you, you are committing a misdemeanor. Refusing to submit to the test I have requested of you is a violation of the law in any criminal proceeding.

SUBJECT'S SIGNATURE: _____

CONSTITUTIONAL WARNINGS

I AM REQUESTING 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 to have him with you during questioning.
4. If you cannot afford a lawyer, you are entitled to the presence of a court appointed lawyer before you make any statement and during any questioning.
5. If at any time during the interview you do not wish to answer any questions, you are permitted to stop the interview.
6. I can make no threats or promises to induce you to make a statement. This must be signed and read to you.
7. Any statement can be used against you in a court of law.

SUSPECT'S SIGNATURE: Reg on Camera

Instrument Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH CO SO
Instrument Serial Number: 80-006029 Software: 8100.27
Date of Test: 12/04/2019

DOB: 09/23/1938 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		21:42
Air Blank	0.000	21:43
Control Test	0.080	21:43
Air Blank	0.000	21:44
Subject Sample #1	0.119	21:47
Air Blank	0.000	21:48
Air Blank	0.000	21:49
Subject Sample #2	0.122	21:50
Air Blank	0.000	21:50
Control Test	0.079	21:51
Air Blank	0.000	21:51
Diagnostics Check OK		21:51

Cylinder Lot: 17919080A1
Exp: 08/05/2021

State of Florida, County of

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 SUE OWEN, 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:

Date:

Sworn to (or affirmed) before me this 4th day of December, 2019

Signature of Notary Public-State of Florida

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.

nt to 322.7615, F.S.
SCANNED
DEC 05 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	☐	782.04 (FS)	Other: Witness	
	☐	119.071(2)(j)	Other: Marsy's Law	

SCANNED
DEC 05 2019

REVIEW COMPLETED BY

Booking Number: 2019038828

Date: 12/5/2019

Specialist Name/ID: M. Tooks #8557