

J - 0510671

PALM BEACH GARDENS P-3268

Check if Supplement is Attached

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

ADMINISTRATIVE	OBTS Number 2019ACT016191ANB		ARREST / NOTICE TO APPEAR		1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias		Juvenile <input checked="" type="checkbox"/>		
	Agency ORI Number FLO, 5, 0, 0, 0, 0, 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 0 6 1 1 9 1 0 0 5 1 8 2 1 1 1 1				
	Charge Type: Check as many as apply. <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		If Weapon Seized N/A		Multiple Clearance Indicator				
DEFENDANT	Location of Arrest (Including Name of Business) 2401 PGA Blvd, PBE, FL				Location of Offense (Business Name, Address) 2401 PGA Blvd, PBE, FL				
	Date of Arrest 09 03 19	Time of Arrest 2:15.5	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle 2401 PGA Blvd, PBE, FL		
	Name (Last, First, Middle) Van Hatten, John				Alias (Name, DOB, Soc. Sec. #, Etc.)				
CO-DEF	Race W	Sex M	Date of Birth 09 18 47	Height 6'3"	Weight 250	Eye Color BLU	Hair Color BLO	Complexion Light	Build Large
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) N/A				Marital Status	Religion Walter	Indication of Alcohol Influence Drug Influence <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>		
	Local Address (Street, Apt. Number) 728 Kithybank Way NPB FL 33408		(City) NPB	(State) FL	(Zip) 33408	Phone (813) 610 5120	Residence Type: 1. City 2. County 3. Florida 4. Out of State 2		
	Permanent Address (Street, Apt. Number) 728 Kithybank Way NPB FL 33408		(City) NPB	(State) FL	(Zip) 33408	Phone	Address Source Verbal		
	Business Address (Name, Street) N/A		(City)	(State)	(Zip)	Phone	Occupation Contractor		
JUVENILE	D/I Number, State V563460473380/FL		INS Number		Place of Birth (City, State) Lakewood, NJ		Citizenship US		
	Co-Defendant (Last, First, Middle)		Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large <input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile			
	Co-Defendant (Last, First, Middle)		Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large <input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile			
CHARGE	Parent Legal Custodian <input type="checkbox"/> Other <input type="checkbox"/>		Name (Last) (First) (Middle)		Residence Phone		Business Phone		
	Address (Street, Apt. Number) (City) (State) (Zip)								
	Notified by: (Name) (Date) (Time)		Relationship		Juvenile Disposition 1. Handled/Processed within Dept. and Released. 2. TOT HRS/DYS 3. Incarcerated				
	Released To: (Name) (Date) (Time)								
CHARGE	The above address was provided by <input type="checkbox"/> defendant and / or <input type="checkbox"/> 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. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No (Reason)								
	Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property		Value of Property				
	Drug Activity N/A		S. Sell N/A		R. Smuggle N/A		K. Dispense/Distribute N/A		
	Charge Description Driving Under the Influence		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 315.1193		Violation of ORD #		
	Drug Activity N/A		Drug Type N/A	Amount / Unit	Offense #	Warrant / Capias Number	Bond OR		
CHARGE	Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation of ORD #		
	Drug Activity N/A		Drug Type N/A	Amount / Unit	Offense #	Warrant / Capias Number	Bond		
	Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation of ORD #		
	Drug Activity N/A		Drug Type N/A	Amount / Unit	Offense #	Warrant / Capias Number	Bond		
	Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation of ORD #		
NOTICE TO APPEAR	Location (Court, Room Number, Address) 3188 PGA Blvd, Palm Beach Gardens, FL 33410		Court Date and Time Oct 09 2019 1000 A.M.						
	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								
ADMIN	Signature of Defendant (or Juvenile and Parent/Custodian) [Signature]		Date Signed 9/13/19		Name Verification (Printed by Arrestee)				
	Signature of Arresting Officer [Signature]		Name of Arresting Officer (Print) Andrew Flink 514		Witness here if subject signed with an "X"				
	Signature of Transporting Officer [Signature]		Name of Transporting Officer (Print) Andrew Flink 514		PAGE 1 OF 1				

FLINK #514

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 3rd DAY OF September 20 19, AT 2102 AM PM

SUBJECT: Van Harte, John, CASE NUMBER: 19005182

AGENCY: PALM BEACH GARDENS POLICE DEPT. ARRESTING OFFICER: ANDREW FLINK 514

PERSONAL CONTACT

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

Van Harte backed his vehicle into a parked trailer which was behind his vehicle. Ofc Kalish 506 arrived on scene and observed Van Harte in the driver seat of the vehicle, while the vehicle was still on and running. Van Harte was outside of the vehicle, next to the building when I arrived.

OBSERVATION OF DRIVER:

Van Harte was off balance and uneasy on his feet. Van Harte claimed this was due to a medical condition with his knee. I observed Van Harte walking seemingly normal when not asked to participate in exercises. While speaking with Van Harte, I was able to detect the odor of an unknown alcoholic beverage emanating from his breath. Van Harte had watery eyes and a flushed red face.

DRIVER'S STATEMENTS:

Van Harte had stated he was coming from "Carmine's" and that he had consumed two alcoholic beverages. It should be noted, "Carmine's" was a restaurant approximately 200 feet to the west of our location. Van Harte later clarified that the two beverages were Vodka mixed with water.

ODORS:

Unknown alcoholic beverage.

GENERAL OBSERVATIONS

SPEECH: Slow

ATTITUDE: Mood swings and non-compliant.

CLOTHING: Blue shirt, black pants and black shoes.

MEDICAL/OTHER: Multiple medical conditions mentioned. Ear/hearing problems, knee problem and HBP.

STATE OF FLORIDA
COUNTY OF PALM BEACH

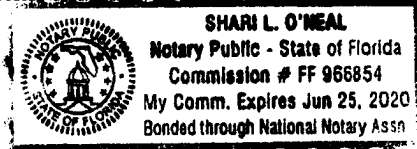
Signature of Arresting/Investigative Officer

The foregoing instrument was sworn to or affirmed and subscribed before me this 3rd day of September 20 19 by ANDREW FLINK

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)



ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- | | |
|--|---|
| <input checked="" type="checkbox"/> LT EYE-LACK OF SMOOTH PURSUIT | <input checked="" type="checkbox"/> RT EYE-LACK OF SMOOTH PURSUIT |
| <input type="checkbox"/> LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION | <input checked="" type="checkbox"/> RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION |
| <input type="checkbox"/> LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES | <input type="checkbox"/> RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES |

Other Observations:

Van Harte was unable to maintain his balance on his own and kept placing his right hand on his vehicle for balance. I was unable to conduct the full exercise with him, because he would not follow the instructions I provided. The observations I did make, were made when Van Harte followed instructions.

HAND COORDINATION:

First exercise conducted, was finger dexterity. Van Harte started the exercise multiple times, before being told to begin. Van Harte counted forward aloud, however, did not count aloud in reverse from four to one. Van Harte then attempted the exercise again, and while counting down from four, he counted "four, three, one, zero". Also while doing this, he failed to touch the tip of his middle finger, to the tip of his thumb.

FINGER TO NOSE:

The exercise was conducted while Van Harte was seated in his vehicle. Van Harte said he would be unable to close his eyes to participate in the exercise, when asked why, he said he would close his eyes. On the sixth instance of the exercise, Van Harte was told to use his right hand, he proceeded to touch his nose with his left hand, then immediately corrected himself to used his right hand.

PALM PAT:

The exercise was conducted while Van Harte was seated in his vehicle. The first attempt, Van Harte moved his top hand next to his bottom hand rather than placing the rear of his top hand into the palm of the bottom hand. I stopped Van Harte to ensure he understood what I instructed him to do. Van Harte then did the same thing as his first attempt. I stopped Van Harte and had him do the exercise with me, thus I could see he understood the proper way to conduct the Palm Pat. Van Harte did the exercise in the proper method while I was demonstrating it with him. I then asked Van Harte to do the exercise on his own, to which he again placed his top hand next to his bottom hand not making contact with his palm. I stopped Van Harte one last time and told him to do the exercise with me, to which he did the proper form. Van Harte then placed his top hand behind his bottom hand, rather than as instructed. Van Harte then did one proper set of Palm Pats, then when he switched hands he again placed the top hand behind the bottom hand.

WALK & TURN:

Not conducted

BREATH TEST RESULTS: 1) REF 2) REF 3) 4)

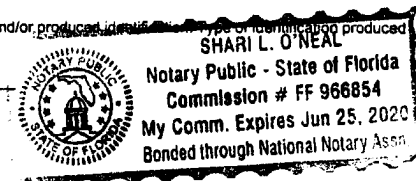
STATE OF FLORIDA
COUNTY OF PALM BEACH

Signature of Arresting/Investigative Officer

The foregoing instrument was sworn to or affirmed and subscribed before me this 3rd day of September 2019 by ANDREW FLINK

Print name of Arresting/Investigative Officer, who is personally known to me and/or produced identification type or form, also produced Personally Known

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





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

PBSO CASE # 19-111103 PBSO ZONE 3-21

AGENCY CASE # 19005182 CRASH CASE # _____

TIME OF STOP/CRASH 2102 DATE 09/03/19 DAY Tuesday

SUBJECT'S NAME VanHarte, John RACE W SEX M

HGT 6'3 WGT 250 DOB 09/18/1947

LOCATION 2401 PGA Blvd, PBG, FL

ARRESTING OFFICER'S NAME & ID ANDREW FLINK 514 AGENCY PBGPD

DIVISION: _____

NOTIFIED BY COMMO ✓

ARRIVAL AT FACILITY 2215

BREATH RESULTS: Arrest Time 2155

- 1. _____
- 2. _____
- 3. _____
- 4. _____

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

NOT A CERTIFIED COPY

TESTING FACILITY TASK REPORT

AGENCY: PDG Ofc. Flick #314

SUBJECT: Vann Hurst, John CASE NUMBER: 19-11103

DATE: 09-03-19 VIDEO TAPE NUMBER: N/A

BEGINNING TIME: 2242 hrs ENDING TIME: 2247 hrs

BREATH TESTS RESULTS: **REFUSED** TIME 2247 A.M./P.M. P.M. 2) TIME _____ A.M./P.M.
3) TIME _____ A.M./P.M. 4) TIME _____ A.M./P.M.

BREATH OPERATOR: S. O'Neal #10212

MAINTENANCE TECHNICIAN: C. Kuckucke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: Slurred

ATTITUDE: Calm, Talkative, Demanding, Indecisive

CLOTHING: Shirt - Blue Pants - Black / Socks

MEDICAL CONDITIONS: Bad hearing in right ear

MEDICATIONS: _____

OTHER: Eyes: Red, Glassy

COMMENTS: 20 min. observation done by AIO Flick #314

AIO requested the breath test.

D refused the request.

AIO read the implied consent or consent

numerous times.

D still refused to cooperate during the

process.

No W4A, D asked for his attorney.

La Trattoria Ristorante
Harbour Shops
2401 PGA Boulevard
Palm Beach Gardens, FL
Phone: (561) 775-0186

200010 TRATTORI

Chk 8097 1B JOHN Gst 0
Sep03'19 06:45PM

1 Ketel One Up Martini	14.00
1 BB TUNA TARTARE	10.00
1 Ketel One Up Martini	14.00
1 B PRIME RIB SPCL	28.00
2 GLS PN MEIQMI @ 12.00	24.00
50 % Auto 50% HH	26.00-
Subtotal	64.00
Tax	4.48
08:12PM Amount Due	68.48

HAVE YOUR NEXT PARTY
in our Private
Waterfront Dining Room
Contact Gianni Giache at
Gianni@carmines.com
Follow us on Facebook
facebook.com/carmineslatrattoria
WWW.CARMINES.COM

The following Gratuity table is
provided for your convenience:

15% Gratuity = \$9.60
18% Gratuity = \$11.52
20% Gratuity = \$12.80

NOT A CERTIFIED COPY

La Trattoria Ristorante
2401 PGA Boulevard
Palm Beach Gardens, FL 33410
Phone: (561) 775-0186

Date: Sep03'19 08:14PM
Card Type: Visa
Acct #: XXXXXXXXXX
Card Entry: SWIPED
Trans Type: PURCHASE
Auth Code: 030959
Check: 8097
Check ID: 1B JOHN
Server: 200010 TRATTORI

Subtotal: **68.48**

Gratuity: _____

Total Amount: _____

Signature _____

Merchant Copy XXXXXXXXXX

NOT A CERTIFIED COPY

FLINK
(514)

19005182

COMPLAINT



CASE NO. _____ DOCKET NO. _____ PAGE NO. _____

FLORIDA DUI UNIFORM TRAFFIC CITATION **A56H3BE**

COUNTY OF PALM BEACH 06		<input type="checkbox"/> (1) F.K.P. <input checked="" type="checkbox"/> (2) P.D. <input type="checkbox"/> (3) S.O. <input type="checkbox"/> (4) OTHER	
CITY OF APPLICABLE PALM BEACH GARDENS		AGENCY NAME PALM BEACH GARDENS	
		AGENCY # 78	
IN THE COURT DESIGNATED BELOW THE UNDERSIGNED CERTIFIES THAT HE/SHE HAS MADE AFRIT AND REASONABLE GROUNDS TO BELIEVE AND DOES BELIEVE THAT ON			
COMPLAINT (RETAINED BY COURT)			
DAY OF WEEK TUESDAY	MONTH 09	DAY 03	YEAR 2019
NAME (FIRST) JOHN		LAST VAN HARTE	
STREET 728 KITTYHAWK WAY			
CITY NORTH PALM BEACH		STATE FL	ZIP CODE 33408
TELEPHONE NUMBER	DATE OF BIRTH 09 18 1947	RACE W	SEX M
DRIVER LICENSE NUMBER V 5 6 3 4 6 0 4 7 3 3 8 0	STATE FL	CLASS E	YR LICENSE EXP. 2022
VEHICLE 2019 MERZ 5D BLK	STATE FL	YEAR TAG EXPIRES 2020	COMMERCIAL VEHICLE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
VEHICLE LICENSE NO. 382NKS	TRAILER TAG NO.	STATE FL	YEAR TAG EXPIRES 2020
UPON A PUBLIC STREET OR HIGHWAY, OR OTHER LOCATION, NAMELY 2401 PGA BLVD (Block 185), PALM BEACH GARDENS			
MOTORCYCLE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
COMPANION CITATION <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
FT. _____ MILES _____ OF HOSE _____			

DID UNLAWFULLY COMMIT THE OFFENSE OF DRIVING UNDER THE INFLUENCE OF ALCOHOLIC BEVERAGES, CHEMICAL OR CONTROLLED SUBSTANCES; DID DRIVE, OR WAS IN ACTUAL PHYSICAL CONTROL OF A VEHICLE, WHILE UNDER THE INFLUENCE OF AN ALCOHOLIC BEVERAGE/CHEMICAL SUBSTANCE/CONTROLLED SUBSTANCE TO THE EXTENT NORMAL FACILITIES WERE IMPAIRED, OR WITH A BLOOD OR BREATH ALCOHOL LEVEL OF .08 OR ABOVE OF **REF**.

COMMENTS PERTAINING TO OFFENSE (SEE FLORIDA STATUTES)
DUI - DRIVING UNDER INFLUENCE | Driving Under YES NO

AGGRESSIVE DRIVER PASSENGER YES NO STATE STATUTE SECTION **316.193 (1)*** SUB-SECTION

CRASH DAMAGE TO OTHER PROPERTY INJURY TO ANOTHER SERIOUS BODILY INJURY TO ANOTHER FATAL YES NO

THIS IS A CRIMINAL VIOLATION, COURT APPEARANCE REQUIRED, AS INDICATED BELOW.

10/09/2019 10:00 AM
COURT DATE THE **A56H3BE**
NORTH COUNTY GOVERNMENT CENTER
3188 PGA Boulevard PBG, FL 33410

ARREST DELIVERED TO **PBSO MAIN JAIL** DATE **09/03/2019**

I AGREE AND PROMISE TO COMPLY AND ARRIVE TO THE CHARGES AND INSTRUCTIONS SPECIFIED IN THIS CITATION. WILLFUL REFUSAL TO ACCEPT AND SIGN THIS CITATION MAY RESULT IN ARREST. I UNDERSTAND MY SIGNATURE IS NOT AN ADMISSION OF GUILT OR WAIVER OF RIGHTS. IF YOU NEED REASONABLE FACILITY ACCOMMODATIONS TO COMPLY WITH THIS CITATION, CONTACT THE CLERK OF THE COURT.

X SIGNATURE OF VIOLATOR
EFFECTIVE IMMEDIATELY, YOUR DRIVING PRILEGE IS SUSPENDED/DISQUALIFIED FOR:

DRIVING WITH AN UNLAWFUL BLOOD OR BREATH ALCOHOL LEVEL. THIS SUSPENSION IS FOR A PERIOD OF SIX MONTHS IF THIS IS THE FIRST VIOLATION OR ONE YEAR IF PREVIOUSLY SUSPENDED FOR DRIVING WITH AN UNLAWFUL BLOOD OR BREATH ALCOHOL LEVEL. IF YOU HOLD A CDL OR YOU ARE OPERATING A CMV, YOUR COMMERCIAL DRIVER LICENSE/PRIVILEGE WILL ALSO BE DISQUALIFIED FOR ONE YEAR FOR THE FIRST OFFENSE OR PERMANENTLY DISQUALIFIED FOR A SUBSEQUENT OFFENSE.

REFUSAL TO SUBMIT TO LAWFUL BREATH, BLOOD OR URINE TEST SECTION 322.2615, F.S. THIS SUSPENSION IS FOR A PERIOD OF ONE YEAR IF THIS IS A FIRST REFUSAL OR 18 MONTHS IF PREVIOUSLY SUSPENDED FOR THIS OFFENSE. IF YOU HOLD A CDL OR YOU ARE OPERATING A CMV, YOUR COMMERCIAL DRIVER LICENSE/PRIVILEGE WILL ALSO BE DISQUALIFIED FOR A PERIOD OF ONE YEAR FOR A FIRST REFUSAL OR PERMANENTLY DISQUALIFIED FOR A SUBSEQUENT REFUSAL.

LICENSE SURRENDERED? YES NO REASON **REFUSAL**
ELIGIBLE FOR PERMIT? YES NO REASON **VALID DL**

UNLESS INELIGIBLE, THIS CITATION SHALL SERVE AS A TEMPORARY DRIVER LICENSE AND WILL EXPIRE AT MIDNIGHT ON THE 10TH DAY FOLLOWING THE DATE OF SUSPENSION.

AT THE **LAUDERDALE LAKES** BUREAU OF ADMINISTRATIVE REVIEWS OFFICE, YOU MAY REQUEST, WITHIN 10 DAYS AFTER THE DATE OF SUSPENSION, A REVIEW OF SUSPENSION BY THE DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES OR A REVIEW TO DETERMINE ELIGIBILITY FOR A RESTRICTED LICENSE IF THIS IS YOUR FIRST DUI RELATED OFFENSE. SEE REVERSE SIDE.

SIGNATURE OF OFFICER **514** ID NO. _____ TROOP UNIT _____
FHSV 78804 (Rev. 10/14)

DATE	COURT ACTION AND OTHER ORDERS
	BAIL FIXED AT \$ _____ OR CASH DEPOSIT OF \$ _____
	SIGNATURE OF PERSON GIVING BAIL _____
	SIGNATURE OF PERSON TAKING BAIL _____
	FINE IN THE AMOUNT OF \$ _____ RECEIVED AS REQUIRED BY COURT SCHEDULE.
	SIGNATURE OF CLERK _____
	CONTINUANCE TO _____ REASON _____
	CONTINUANCE TO _____ REASON _____
	BOND ESTREATED _____
	WARRANT ISSUED _____
	VIOLATOR FAILED TO APPEAR-DRIVER LICENSE SUSPENDED
	VIOLATOR ARRAIGNED ON _____ (DATE)
	PLEA: _____
	FINDING: _____
	ADJUDICATION: _____
	SENTENCE: FINE _____ COST _____
	JAILED _____ DAYS
	DRIVER IMPROVEMENT SCHOOL _____
	OTHER _____
	DRIVER LICENSE SUSPENDED OR REVOKED FOR _____ DAYS
	RECOMMEND DRIVER LICENSE SUSPENSION FOR _____ DAYS
	RECOMMEND RE-TEST _____
	SIGNATURE OF JUDGE _____
	TESTIMONY - JUDGE'S NOTES (OR OTHER COURT ORDERS):
	APPEAL BOND OF \$ _____
	VIOLATOR'S FINGERPRINT WHEN APPLICABLE _____



Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	<input type="checkbox"/>	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	<input type="checkbox"/>	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel.	
	<input type="checkbox"/>	119.071(2)(f)	Confidential informants (CIs).	
	<input type="checkbox"/>	119.071(2)(e)	Confession.	
Public Info. Exemptions	<input type="checkbox"/>	985.04(1)	Juvenile offender records.	
	<input type="checkbox"/>	119.071(h)(i)	Assets of a crime victim.	
	<input type="checkbox"/>	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	<input type="checkbox"/>	394.4615(7)	Mental health information.	
	<input type="checkbox"/>	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)	<input checked="" type="checkbox"/>	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	<input type="checkbox"/>	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	<input type="checkbox"/>	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	<input type="checkbox"/>	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2019028760	Date: 9/4/2019
	Specialist Name/ID: M Tooks #8557