

Agency ORI Number: FLO 500000 Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE Agency Report Number (N.T.A.'s only): 06-19-102439 19114686

Charge Type: 1. Felony 2. Traffic Felony 3. Misdemeanor 4. Traffic Misdemeanor 5. Ordinance 6. Other Weapon Seized / Type: 2 1. Yes 2. No NONE Multiple Clearance Indicator: 01

Location of Arrest (Including Name of Business): OKEECHOBEE BLVD & BREEZY LANE WEST PALM BEACH, FL 33409 Location of Offense (Business Name, Address): GARDENS TOWING

Date of Arrest: 08/09/2019 Time of Arrest: 23:40 Booking Date: Booking Time: Jail Date: Jail Time: Location of Vehicle: GARDENS TOWING

Name (Last, First, Middle): MORALES, KARISSA, OLGA Alias (Name, DOB, Soc. Sec. #, Etc.):

Race: W Sex: F Date of Birth: 04/08/1998 Height: 5'01" Weight: 150 Eye Color: GREEN Hair Color: BRW Complexion: MED Build: MED

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description): RT ANKLE: "ANCHOR" RT WRIST: "FAITH" Marital Status: Single Religion: CHRISTIAN Indication of: Alcohol Influence Drug Influence Y N Unk

Local Address (Street, Apt. Number): 822 AVENIDA HERMOSA (City): WEST PALM BEACH, FL 33405 (State): (Zip): Phone: (561) 356-4821 Residence Type: 1. City 2. County 3. Florida 4. Out of State 2

Permanent Address (Street, Apt. Number): (City): (State): (Zip): Phone: Address Source: FLORIDA DRIVER LICENSE

Business Address (Name, Street): (City): (State): (Zip): Phone: Occupation:

D/L Number, State: M642-514-98-628-0, FL Soc. Sec. Number: INS Number: Place of Birth (City, State): WATERBURY, MA Citizenship: US

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

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 Other: Residence Phone: Business 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. School Attended: Grade:

Property Crime? Yes No Description of Property: Value of Property:

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: 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: 1 Domestic Violence: Y N Statute Violation Number: 316.193(1) Violation of ORD #:

Drug Activity: N Drug Type: N Amount / Unit: NONE Offense #: 19-102439 Warrant / Capias Number: Bond: OR

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

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

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

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

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

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

Location (Court Room Number, Address): CRIMINAL JUSTICE COMPLEX / 3228 GUN CLUB ROAD, WPB, FL 33406

Court Date and Time: Month: SEPTEMBER Day: 8th Year: 2019 Time: 08:30 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: 08/09/2019 AUG 10 AM 2:48

HOLD for other Agency Name: SCANNED Signature of Arresting Officer: Inv. Schaefer # 8777 Name Verification (Printed by Arrestee): (PRINT) Karissa Morales

Dangerous Rejected Arrest Suicidal AUG 11 2019 Name of Arresting Officer (Print): INV. J. SCHAEFER I.D. #: 8777 (PRINT) Karissa Morales

Intake Deputy: DS/OLIAS 7697 Pouch #: Transporting Officer: INV. J. SCHAEFER ID #: 8777 Agency: PBSO Witness here if subject signed with an "X": 1 OF 1

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

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 9th DAY OF AUGUST 20 19, AT 23:21 PM AM PM
SUBJECT: MORALES, KARISSA, OLGA CASE NUMBER: 19-102439

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: INV. J. SCHAEFER

PERSONAL CONTACT

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

On 08/09/2019 at approximately 23:21hrs, while conducting selective traffic enforcement in the area of Okeechobee Blvd and Haverhill Road which is located in unincorporated West Palm Beach, Palm Beach County, Florida I observed a beige 1996 Toyota Corolla bearing Florida tag IM2-9FE which was traveling well below the posted speed limit of 45mph impeding. I activated my in car radar unit which displayed an actual speed of 30mph. As the Toyota came to a stop for a red traffic signal I observed the driver, a W/F, not wearing her seatbelt. The W/F looked over at me slowly with a glazed-over look and turned her head back straight. I elected to initiate a traffic stop on the Toyota for a seatbelt violation. The driver was identified by her Florida driver license. The W/F was the sole occupant of the vehicle.

OBSERVATION OF DRIVER:

Upon making contact with the driver who was identified by her Florida driver license as "KARISSA OLGA MORALES", I immediately detected an obvious and strong odor which I immediately recognized as marijuana emanated from her person and face area. This odor maintained throughout the interaction. Morales had glassy, glazed, and blood shot eyes. Morales' speech was slurred, slow, thick, and at times difficult to understand. Morales' movements were slow, deliberate, and lethargic. Morales was wearing a gray t-shirt, tan shorts, and silver sandals. All the clothing appeared disheveled.

DRIVER'S STATEMENTS:

Pre-Miranda: Morales stated she had been smoking while driving for her job and didn't think it was illegal.

Morales consented to breath and but refused to provide a urine sample when requested. Implied consent was read to Morales which she stated that she understood and again refused. Morales participated in Q&A.

ODORS:

An obvious and strong odor which I immediately recognized as marijuana emanated from her person and face area.

GENERAL OBSERVATIONS

SPEECH: Morales' speech was slurred, slow, and thick, and at times difficult to understand.

ATTITUDE: polite, friendly, cooperative

CLOTHING: gray t-shirt, tan shorts, and silver sandals

MEDICAL/OTHER: none stated

STATE OF FLORIDA
COUNTY OF PALM BEACH

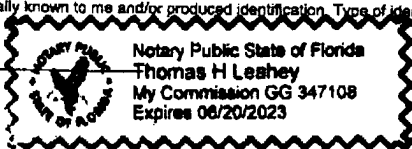
INV. J. SCHAEFER Inv. *J. Schaefer* # 5777

(Signature of Arresting/Investigative Officer)

This foregoing instrument was sworn to or affirmed and subscribed before me this 9th day of AUGUST 20 19 by INV. J. SCHAEFER

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

(Signature of 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 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:

Morales would sway roughly in a side to side front to back pattern throughout the task. Morales did not touch the tip of the pen as directed to positively identify the point to be tracked. Morales was reminded numerous times to track the pen with her eyes only. Morales failed to keep her head still while tracking the stimulus. Morales had LOC.

WALK & TURN:

I explained and demonstrated the instructions for the "Walk & Turn" to Morales who stated she understood. During the task, I observed Morales to sway roughly in a side to side, front to back pattern throughout the demonstration phase. Morales could not maintain her balance while listening to instructions. Morales stepped out of the instructional stance during the demonstration to catch her balance. Morales missed heel-to-toe steps while taking normal strides. Morales used her arms for balance by raising them more than six inches. Morales performed an improper turn by turning other than which was demonstrated. Additionally, Morales performed the incorrect number of steps, taking 12.

ONE LEG STAND:

I explained and demonstrated the instructions for the "One Leg Stand" to Morales who stated that she understood. During the task, I observed Morales to sway roughly in a side to side, front to back pattern throughout the demonstration phase. Morales continued to sway while balancing on one leg. Morales used her arms to balance raising them more than 6 inches from her sides. Morales failed to count properly by thousands as instructed, but corrected herself. Morales raised her foot higher than the 6 inches, failing to follow instructions.

FINGER TO NOSE:

I explained and demonstrated the instructions for the "Finger to Nose" task to Morales who stated that she understood. During the task, I observed Morales to sway roughly in a side to side, front to back pattern throughout the demonstration phase. Morales did not keep her eyes closed and had to be reminded numerous times. Morales' index finger did not touch the tip of the nose on 4 of 6 attempts. The sequence used for this task was L, R, L, R, R, L.

ROMBERG ALPHABET:

I explained and demonstrated the instructions for the "Rhombert Alphabet" task to Morales who stated that she understood. During the task, I observed Morales to sway roughly in a side to side, front to back pattern throughout the demonstration phase. Morales correctly recited the alphabet.

BREATH TEST RESULTS: .000 .000 Urine Ref

STATE OF FLORIDA
COUNTY OF PALM BEACH

INV. J. SCHAEFER *Inv. J. Schaefer #8777*

Signature of Arresting/Investigative Officer)
The foregoing instrument was sworn to or affirmed and subscribed before me this 9th day of AUGUST 2019 by INV. J. SCHAEFER

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)



TESTING FACILITY TASK REPORT

AGENCY: PBSO
SUBJECT: Mirales, Karissa O CASE NUMBER: 19-102439
DATE: 03/10/19 VIDEO TAPE NUMBER: N/A
BEGINNING TIME: 00:25 ENDING TIME: 00:42
BREATH TESTS RESULTS: 1) .000 TIME 00:27 A.M./P.M. 2) .000 TIME 00:32 A.M./P.M.
3) N/A TIME — A.M./P.M. 4) N/A TIME — A.M./P.M.
BREATH OPERATOR: T. Leary # 19183
MAINTENANCE TECHNICIAN: J Karlock # 6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: thick, deliberate
ATTITUDE: calm, cooperative
CLOTHING: tan shirt, gray pants, silver sandals
MEDICAL CONDITIONS: None
MEDICATIONS: None
OTHER: eyes pupils dilated
no visible medical equipment

COMMENTS: arrived at center. A/O conducted 20 minute observation period at 00:02 hrs.

A/O agreed to perform breath test.
T/O to read breath test results + A/O stated she understood breath test results.
A/O asked for a time 00:35 + read I/C + A/O understood I/C.
A/O refused to provide urine sample 00:36
A/O read rights + A/O stated she understood rights
A/O conducted Q+A

REFUSED

A/O answered questions

SUBJECT: Morales, Favisca O

CASE NUMBER: 19-102439

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) _____

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: Morales, Karissa O 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? YES

WHERE WERE YOU GOING? ON WAY TO "DOOR DASH"

WHAT STREET OR HIGHWAY WERE YOU ON? NOT SURE

DIRECTION OF TRAVEL? NOT SURE WHERE DID YOU START? LAKE NORTH

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

WHAT IS TODAY'S DATE? Aug 10 WHAT DAY OF THE WEEK IS IT? IDK

WHAT COUNTY AND CITY ARE YOU IN NOW? WIB PBC

WHEN DID YOU LAST EAT? 9pm WHAT DID YOU EAT? CHKK-FIL

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? DOOR DASH

HOW MUCH DO YOU WEIGH? 150 HAVE YOU BEEN DRINKING? NO 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? TU 15th

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

ARE YOU SICK OR INJURED? 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 SMOKED ANY MARIJUANA TODAY? YES WHEN? TONIGHT

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

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? NO WHAT? _____ WHEN? _____

DO YOU HAVE:
 EPILEPSY? _____
 GLASS EYE? _____
 FALSE TEETH? _____
 EAR INFECTION? _____
 INNER EAR TROUBLE? _____
 DIABETES? _____
NO

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

DO YOU TAKE INSULIN? NO IF SO, WHEN WAS YOUR LAST INJECTION? _____

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? NO WHERE? _____

INTERVIEWER: M. J. Schaefer #8777

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: 80-006478 Software: 8100.27
Date of Test: 08/10/2019

Date of Last Agency Inspection: 07/19/2019

Observation Period Began: 00:02

Subject's Name: KARISSA O MORALES

DOB: 04/08/1998 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	00:27
	Air Blank	0.000	00:27
	Control Test	0.080	00:28
	Air Blank	0.000	00:28
	Subject Sample #1	0.000	00:29
	Air Blank	0.000	00:29
	Air Blank	0.000	00:31
	Subject Sample #2	0.000	00:32
	Air Blank	0.000	00:32
	Control Test	0.081	00:32
	Air Blank	0.000	00:33
	Diagnostics Check	OK	00:33

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 LEAHY, 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: T Leahy Date: 08/10/19

Signature

Sworn to (or affirmed) before me this 10th day of August, 2019

Inv. J Schaefer #8777

Inv J Schaefer #8777

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.

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

I, INV. J. SCHAEFER, a duly certified Law Enforcement Officer or Correctional Officer,
(Name of Officer reading Implied Consent Warning)

am a member of PBSO, and I do swear
(Name of law enforcement agency)

or affirm that on or about the 9th day of AUGUST, 20 19, at 11:40 P.M. A.M.

DRIVER KARISSA, OLGA MORALES,
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# M642-514-98-628-0, FL, state of FLORIDA, was placed under lawful arrest for

the offense of DRIVING UNDER THE INFLUENCE by INV. J. SCHAEFER and
(Name of Arresting Officer)

issued Citation # A2G4BBP

That on or about the 10th day of AUGUST, 20 19, at 12:36 P.M. A.M.

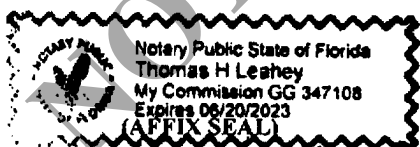
in PALM BEACH County,

I requested that the driver submit to a breath and/or X 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.

Inv. J. Schaefer # 8777

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 9th day of AUGUST, 20 19,

by INV. J. SCHAEFER,

who is personally known to me or who has produced PERSONALLY KNOWN LEO as identification

Notary Public T Leashey

The foregoing instrument was sworn and subscribed before me:

Signature of Attesting Officer

Title

Date 08 / 10 / 2019

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.

WITNESS LIST

CASE NUMBER: 19-102439

ARRESTING OFFICER: INV. J. SCHAEFER

ADDRESS: 3228 GUN CLUB ROAD WEST PALM BEACH, FL 33406

PHONE NUMBERS (HOME): _____ (WORK) (561) 688-4001

CAN TESTIFY TO: SEE DUI PROBABLE CAUSE AFFIDAVIT, OFFENSE REPORT, & IN-CAR VIDEO

NAME: _____

ADDRESS: _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

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CAN TESTIFY TO: _____

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CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NOT A CERTIFIED COPY



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"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2019026113	Date: 08/10/2019
	Specialist Name/ID: D.Beavers/9606