2018CT19392

0582533

3155

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

OBTS Number

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

Juvenile: N

ADMINISTRATIVE

Agency ORI Number: FLO 500000

Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE

Agency Report Number (N.T.A.'s only): 06- 18-137325

Charge Type: Check as many as apply: ☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

Weapon Seized / Type: 2 (1. Yes 2. No)

Multiple Clearance Indicator: 01

Location of Arrest (Including Name of Business): 22735 Tradewinds Rd, Boca Raton, FL 33428

Location of Offense (Business Name, Address): 22735 Tradewinds Rd, Boca Raton, FL 33428

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
10/26/2018	00:12	10/26/2018				West Way Towing, 1600 NW Madrid Way, Boca Raton, FL 33432, (561) 368-4466

DEFENDANT

Name (Last, First, Middle): Gruen, Keith, A

Alias (Name, DOB, Soc. Sec. #, Etc.)

Race (W - White I - American Indian B - Black O- Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	9/1/1964	6'00	200	brown	brown	light	small

Scars, Marks, Tatoos, Unique Physcal Features (Location, Type, Description): none

Marital Status: Married

Religion: NONE

Indication of: Alcohol Influence Y ☒ N ☐ Unk. ☐; Drug Influence Y ☐ N ☐ Unk. ☒

Local Address (Street, Apt. Number) (City) (State) (Zip): 23029 Watergate Circle, Boca Raton, FL 33428

Phone: (954) 531 3990

Residence Type: 1. City 2. County 3. Florida 4. Out of State: 2

Permanent Address (Street, Apt. Number) (City) (State) (Zip):

Phone:

Address Source: DL

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

Phone:

Occupation: none

D/L Number, State: G650501643210, FL

Soc. Sec. Number: [redacted]

INS Number:

Place of Birth (City, State): Illinois

Citizenship: US

CO-DEF

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

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 T. Traffic B. Buy D. Deliver E. Use R. Smuggle 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 I Capias Number	Bond
N	N		18-137325		OR

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

FILED
OCT 27 2018
SHARON R. BOCK
Clerk & Comptroller

Received WB
OCT 29 2018

NOTICE TO APPEAR

Location (Court, Room Number, Address): South County Courthouse, Courtroom #1, 200 W. Atlantic Ave., Delray Beach, FL 33444 - Ph: (561) 355-2996

Court Date and Time: Month November Day 26th Year 2018 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)

10/26/2018
Date Signed

ADMIN

HOLD for other Agency Name:

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:

Intake Deputy I.D. # Pouch #

Signature of Arresting Officer: X

Name of Arresting Officer (Print): D/S POINTU P. I.D. #: 16032

Transporting Officer: D/S POINTU P. ID #: 16032 Agency: PBSO

Name Verification (Printed by Arrestee) (PRINT) Keith Gruen

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)

PBSO #148 REV. 8/97

D/S J. Pinzon #33100

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PROBABLE CAUSE AFFIDAVIT

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

ADMIN

Agency ORI Number	Agency Name	Agency Report Number
FLO 500000	PALM BEACH COUNTY SHERIFF'S OFFICE	06- 18-137325

Charge Type: Check as many as apply. [ ] 1. Felony [ ] 2. Traffic Felony [X] 3. Misdemeanor [ ] 4. Traffic Misdemeanor [ ] 5. Ordinance [ ] 6. Other

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
Gruen, Keith, A		W	M	9/1/1964

CHARGES

Charge Description		Charge Description	
D.U.I.	316.193(1)		
Charge Description		Charge Description	

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
STATE, OF, FLORIDA			

Local Address (Street, Apt. Number) (City) (State) (zip)	Phone	Address Source
,	( )	
Business Address (Name, Street) (City) (State) (zip)	**Phone**	**Occupation**
	( )	

PROBABLE CAUSE STATEMENT

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.
[ ] confessed to _____ admitting to the below facts.
[ ] was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.
[X] was found to have commited the below acts, resulting from my (described) investigation.

On the 25TH day of OCTOBER 2018 at 2336 [X] A.M. [ ] P.M. (Specifically include facts constituting cause for arrest.)

On Thursday, October 25, 2018 at approximately 2336 hours I was traveling westbound on Judge Winikoff Rd from S State Road 7 when I observed a red in color Jeep bearing FL tag #459RS also traveling westbound on Judge Winikoff Rd immediately in front of my vehicle.

While behind the vehicle in the #1 lane, I observed it swerve and to the left crossing the solid white line as well as swerve to the right crossing the striped line separating the #1 and #2 lanes. Due to the driving pattern of the vehicle and failing to maintain a single lane, I conducted a traffic stop on the vehicle by activating the overhead lights on my patrol vehicle. The vehicle maintained its speed and only slowed down after I activated my vehicles sirens. The vehicle came to a stop at 22700 block of Tradewind Rd.

I exited my patrol vehicle and approached the front driver side door where I made contact with the driver and sole occupant of the vehicle Keith Gruen. I introduced myself as D/S Harding and stated the reason for the traffic stop was due to failing to maintain a lane. I asked Gruen for his Driver's License and vehicle Registration. Gruen opened his wallet and gave me his License, but took several minutes to locate his vehicle registration, and gave me a Mechanical Failure Service Contract paper thinking it was his registration.

Gruen's speech was slurred and mumbled, his movements in the vehicle were slow, his eyes had a glossy look to them. Due to the behavior of Gruen, I notified D/S Pointu #16032 who responded to the scene to conduct a D.U.I investigation.

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ADMINISTRATIVE

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 26 day of OCTOBER 2018 by J. HARDING

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

D/S POINTU # 16032

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

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 25th DAY OF October 20 18, AT 23:36 AM ✓ PM

SUBJECT: Gruen, Keith, A CASE NUMBER: 18-137325

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: D/S POINTU P.

PERSONAL CONTACT

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

Was observed by D/S Harding (#28989) driving a red Jeep bearing Florida tag 459RS Westbound on Judge Winikoff Road, in unincorporated Boca Raton, Palm Beach County, Florida. The Jeep was swerving to the right crossing the stripped line separating lane 1 and 2. D/S Harding initiated a traffic stop by turning his overhead lights on, but the vehicle continued maintaining its speed. The vehicle came to a stop in the 22700 block of Tradewinds road. Keith Gruen was the driver and only occupant of the Jeep.

OBSERVATION OF DRIVER:

Keith Gruen had glassy and bloodshot eyes. It took Gruen several minutes to get his registration and provided instead a mechanical contract. Gruen was very slow and had slurred speech.

Upon my arrival, Gruen was still siting on the driver seat of the car. I asked him to exit the vehicle and he stumble while standing and had to regain his balance by leaning on the car. I asked him to walk with me to a flat and secure area. Gruen was shuffling his feet and stumbled multiple time.

DRIVER'S STATEMENTS:

Denied having been drinking any alcohol. Denied any medical condition

ODORS:

Strong odor of unknown alcohol beverage that became stronger when he talked

GENERAL OBSERVATIONS

SPEECH: **muffled, slurred**

ATTITUDE: **annoyed**

CLOTHING: **tan pants, blue shirt, brown shoes**

MEDICAL/OTHER: **none**

TATE OF FLORIDA
'OUNTY OF PALM BEACH

D/S POINTU P.
ignature of Arresting/Investigative Officer)

he foregoing instrument was sworn to or affirmed and subscribed before me this 26 day of October 20 18 by D/S POINTU P.

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

Samantha Palmer (#24520)
otary Public, Clerk of Court, Officer (F.S.S 117.10)

Notary Public State of Florida
Samantha Palmer
My Commission GG 233762
Expires 10/28/2022

NOT A CERTIFIED COPY

SUBJECT: Gruen, Keith, A CASE NUMBER 18-137325

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- [x] LT EYE-LACK OF SMOOTH PURSUIT
- [x] RT EYE-LACK OF SMOOTH PURSUIT
- [x] LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- [x] RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- [x] LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES
- [x] RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

)ther Observations:

Unable to keep his balance. Did not keep his head still. Did not focus on the stimulus. Had a short span of attention. No LOC. Slight VGN.

WALK & TURN:

Unable to keep the instructional stance. Started before being instructed. Improper turn. Did not walk heel to toe. Did not count out loud. Improper number of step. Side stepped to keep his balance.

ONE LEG STAND:

Lowered his leg multiple times. Swayed and lost his balance. Use his arms to balance.

FINGER TO NOSE:

Did not keep his eyes closed. Swayed. Touched the side of his nose twice.

ROMBERG ALPHABET:

Recited: " A B C D E F G H I J K L M N O P Q R S T V D .... QRSTV WXYZ". Sang it. Swayed back and forth. Opened his eyes.
Modified Romberg: stopped the 30s count at 18s.

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BREATH TEST RESULTS: | 1) 0.184 | 2) 0.183 | 3) | 4) |

TATE OF FLORIDA
'OUNTY OF PALM BEACH

D/S POINTU P.
Signature of Arresting/Investigative Officer)

ne foregoing instrument was sworn to or affirmed and subscribed before me this 26 day of October 20 18 by D/S POINTU P.

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

Samantha Palmer (#24520)
otary Public, Clerk of Court, Officer (F.S.S 117.10)

Notary Public State of Florida
Samantha Palmer
My Commission GG 233762
Expires 10/28/2022

WITNESS LIST

CASE NUMBER: 18-137325

ARRESTING OFFICER: D/S POINTU P.

ADDRESS: Palm Beach County Sheriff's Office - 3228 Gun Club Rd - West Palm Beach, FL 33406

PHONE NUMBERS (HOME): _____ (WORK) (561) 688 3000

CAN TESTIFY TO: see report

NAME: D/S Harding (#28989)

ADDRESS: Palm Beach County Sheriff's Office - 3228 Gun Club Rd - West Palm Beach, FL 33406

PHONE NUMBERS (HOME) 0 (WORK) (561) 688 3000

CAN TESTIFY TO: Wheel witness. Driving pattern. see supplemental PC.

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (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: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

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: _____

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TESTING FACILITY TASK REPORT

AGENCY: PBSO/POINTU

SUBJECT: GRUEN, KEITH

CASE NUMBER: 18-137325

DATE: Oct 26, 2018

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 131

ENDING TIME: 151

BREATH TESTS RESULTS: 1) .184 TIME 137 A.M. ☒ P.M. ☐ 2) .183 TIME 141 A.M. ☒ P.M. ☐

3) XX TIME XX A.M. ☐ P.M. ☐ 4) XX TIME XX A.M. ☐ P.M. ☐

BREATH OPERATOR: S. PALMER #24520

MAINTENANCE TECHNICAN: J Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: CALM, QUIET, DAZED, CONFUSED

CLOTHING: BLUE POLO SHIRT, KHAKI PANTS, BROWN SHOES

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

EYES GLASSY AND BLOODSHOT, ODOR OF UNKNOWN ALCOHOLIC BEVERAGE COMING FROM BREATH, UNSTEADY ON HIS FEET

COMMENTS:

ARRESTING OFFICER CONDUCTED THE 20 MINUTE OBSERVATION BEGINNING AT 0110
SUBJECT REFUSED TO TAKE BREATH TEST
A/O READ I/C AND EXPLAINED I/C
SUBJECT STATED HE UNDERSTOOD I/C
AND AGREED TO TAKE BREATH TEST @ 0134
SUBJECT PROVIDED TWO ADEQUATE SAMPLES SUCCESSFULLY
TECH READ RESULTS
SUBJECT STATED HE UNDERSTOOD RESULTS
A/O READ RIGHTS @ SCENE AND AGAIN ON CAMERA
SUBJECT STATED HE UNDERSTOOD RIGHTS
A/O CONDUCTED Q&A
SUBJECT ANSWERED QUESTIONS

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SUBJECT: _____ CASE NUMBER: _____

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)_____

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)_____

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SUBJECT: _____ 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? _____

INTERVIEWER: _____

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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:	

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REVIEW COMPLETED BY

Booking Number: 2018035846	**Date:** 10/27/2018
	Specialist Name/ID: AM/31562