0505732 (0505732) 181

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:

ADMINISTRATIVE

Agency ORI Number	Agency Name	Agency Report Number (N.T.A.'s only)
FLO 500000	PALM BEACH COUNTY SHERIFF'S OFFICE	06- 19-041517

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

Weapon Seized / Type: 1. Yes 2. No | Multiple Clearance Indicator:

Location of Arrest (Including Name of Business): 619 LAKE AVE, LAKE WORTH, FL 33460

Location of Offense (Business Name, Address): 619 LAKE AVE

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
2/25/2019	1335					

DEFENDANT

Name (Last, First, Middle): COLLINS, KEVIN F

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	07/30/1954	5'9"	200	HAZEL	GRAY	LIGHT	MEDIUM

Scars, Marks, Tatoos, Unique Physcal Features (Location, Type, Description): SCARS ON BOTH KNEES

Marital Status: DIVORCED | Religion: NONE

Indication of: Alcohol Influence ☑ Y ☐ N ☐ Unk. | Drug Influence ☐ Y ☐ N ☑ Unk.

Local Address (Street, Apt. Number) (City) (State) (Zip): 3160 SOUTH BROADWAY, LANTANA, FL 33462 | Phone: (917) 957-3027 | Residence Type: 1. City 2. County 3. Florida 4. Out of State: 2

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 3160 SOUTH BROADWAY, LANTANA, FL 33462 | Phone: (917) 957-3027 | Address Source: VERBAL

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

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
[redacted] (NY)	[redacted]		NEW YORK CITY, NY	U.S.A.

CO-DEF

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

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 B. Buy T. Traffic R. Smuggle D. Deliver E. Use 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		19-041517		

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
	1	☐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 I 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

Received WB FEB 28 2019

NOTICE TO APPEAR

Location (Court, Room Number, Address): CRIMINAL JUSTICE COMPLEX, 3228 GUN CLUB RD, WEST PALM BEACH, FL 33406

Court Date and Time: Month MARCH Day 28 Year 2019 Time 1:30 AM 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

ADMIN

HOLD for other Agency Name: ☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:

Signature of Arresting Officer: X 9144

Name of Arresting Officer (Print) I.D. #: CPL. C JOHNSON 9144

Name Verification (Printed by Arrestee) (PRINT)

Intake Detail | Pouch # | Transporting Officer ID # | Agency | Address 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. ONLY)

PBSO #148 REV. 8/97

2019 CT 3956

FEB 25 PM 4:27

NOT A CERTIFIED COPY

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 25 DAY OF FEBRUARY 20 19, AT 1245 AM ✓ PM

SUBJECT: COLLINS, KEVIN F CASE NUMBER: 19-041517

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: CPL. C. JOHNSON

PERSONAL CONTACT

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

NO DRIVING PATTERN SEEN, CRASH RELATED, DEFENDANT WAS STILL BEHIND THE WHEEL OF THE VEHICLE. DEFENDANT HAD COLLIDED (SIDE-SWIPED) ANOTHER VEHICLE WHILE IN TRANSPORT, WHILE PULLING OUT OF A PARKING SPACE.

OBSERVATION OF DRIVER:

DRIVER WAS STILL SITTING IN VEHICLE. HIS EYES WERE BLOODSHOT, WATERY, AND HAD CONSTRICTED PUPILS. HIS FACE HAD A SUN-BURNT APPEARENCE. HE WAS SLOUCHED WHILE SITTING INSIDE OF THE VEHICLE. WHEN EXITING THE VEHICLE HE WAS SLOW TO MOVE AND NEEDED THE SUPPORT OF THE DOOR TO KEEP FROM FALLING. WHILE OUTSIDE OF THE VEHICLE HE NEEDED TO LEAN AGAINST A NEARBY PALM TREE TO STAY STANDING. AFTER ARREST HE HAD DIFFICULT ENTER/EXITING THE PATROL VEHICLE, NEEDING MY ASSISTANCE.

DRIVER'S STATEMENTS:

DRIVER ADVISED HE HAD NOT HAD ANY ALCOHOL, BUT HAD JUST EATEN BREAKFAST AT BROUGHES DOWN UNDER. AN ESTABLISHMENT WHICH DOES SERVE ALCOHOLIC BEVERAGES.

ODORS:

ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE EMANTING FROM HIS BREATH.

GENERAL OBSERVATIONS

SPEECH: **LOW/RASPY; MUMBLING; SLURRED; INCOHERENT AT TIMES**

ATTITUDE: **COOPERATIVE; POLITE**

CLOTHING: **NOTHING TO MENTION**

MEDICAL/OTHER: **SURGERY ON BOTH KNEES, NOTHING ELSE**

STATE OF FLORIDA
COUNTY OF PALM BEACH

CPL. C. JOHNSON 9144
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 25TH day of FEBRUARY 20 19 by CPL. C. JOHNSON

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

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

SHARI L. O'NEAL
Notary Public - State of Florida
Commission # FF 966854
My Comm. Expires Jun 25, 2020
Bonded through National Notary Assn.

SHARI L. O'NEAL
Notary Public - State of Florida
Commission # FF 966854
My Comm. Expires Jun 25, 2020
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NOT A CERTIFIED COPY

SUBJECT: COLLINS, KEVIN F **CASE NUMBER** 19-041517

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

Other Observations:

FAILED TO KEEP HEAD STILL; NEED TO BE REMINDED; DOES HAVE A LAZY LEFT EYE

WALK & TURN:

ATTEMPTED: DEFENDANT WAS UNABLE TO PLACE RIGHT TOES AGAINTS HEEL OF THE LEFT AT START OF TASK. WHEN ASKED IF HE COULD PREFORM THE TASK, HE PLACED HIS LEFT HAND ON MY SHOULDER AND STATED HE COULD IF HE COULD HOLD ONTO ME IN ORDER TO COMPLETE TASK. DEFENDANT WAS UNABLE TO START/FINISH THIS TASK.

ONE LEG STAND:

NOT PERFORMED DUE TO HAVING DIFFICULTY BALANCING AND HAVING HAD SURGERY ON BOTH KNEES.

FINGER TO NOSE:

DEFENDANT WOULD OPEN EYES AND LEAN HIS HEAD FORWARD EACH TIME HE WOULD ATTEMPT TO DO THE TASK, ALLOWING HIM TO TOUCH THE TIP OF HIS NOSE WITH HIS FINGER. ON THE SEVENTH REQUEST HE RAISED HIS LEFT ARM/FINGER WHEN ASKED TO LIFT RIGHT.

ROMBERG ALPHABET:

REQUESTED TO SAY ALPHABET STARTING AT "C" AND ENDING AT "J" IN NON-RHYTHMIC MANNER. DEFENDANT QUICKLY SANG ALPHABET FROM "C" THROUGH "P", PAUSED, THEN MUMBLED LETTERS, F, M, R, S, AND ADDITIONALS WHICH I COULD NOT UNDERSTAND.

BREATH TEST RESULTS: | 1) 0.189 | 2) 0.184 | 3) | 4) |

STATE OF FLORIDA
COUNTY OF PALM BEACH

CPL. C. JOHNSON 9144
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 25TH day of FEBRUARY 20 19 by CPL. C. JOHNSON

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

K. O'Neal
Notary Public, Clerk of Court, Officer (F.S.S 117.10)

SHARI L. O'NEAL
Notary Public - State of Florida
Commission # FF 966854
My Comm. Expires Jun 25, 2020
Bonded through National N

NOT A CERTIFIED COPY

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

PBSO CASE # 19-041517 PBSO ZONE 14-52

AGENCY CASE # 19-041517 CRASH CASE # 19-041506

TIME OF STOP/CRASH 1245 DATE 2/25/2019 DAY MONDAY

SUBJECT'S NAME COLLINS, KEVIN F RACE W SEX M

HGT 5'9" WGT 200 DOB 07/30/1954

LOCATION 619 LAKE AVE

ARRESTING OFFICER'S NAME & ID CPL. C. JOHNSON AGENCY PBSO

DIVISION: 14 Charles

NOTIFIED BY COMMO ✓

ARRIVAL AT FACILITY 1357

ARREST TIME 1335

BREATH RESULTS:

1) .189
2) .184
3)
4)

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

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WITNESS LIST

CASE NUMBER: 19-041517

ARRESTING OFFICER: CPL. C. JOHNSON

ADDRESS: PBSO DISTRICT 14 (LAKE WORTH), 120 NORTH G STREET, LAKE WORTH, FL 33460

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

CAN TESTIFY TO: CRASH AND DUI INVESTIGATION

NAME: _____

ADDRESS: _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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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 Cpl. Johnson # 9144

SUBJECT: Collins, Kevin F. CASE NUMBER: 14-041517

DATE: 02-25-14 VIDEO TAPE NUMBER: N/A

BEGINNING TIME: 1420hrs ENDING TIME: 1443hrs

BREATH TESTS RESULTS: 1) .134 TIME 1427 A.M./P.M. 2) .134 TIME 1430 A.M./P.M.

3) _____ TIME _____ A.M./P.M. 4) _____ TIME _____ A.M./P.M.

BREATH OPERATOR: J. O'Neal # 622

MAINTENANCE TECHNICIAN: Cpl. Fuelner # 6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: Slurred

ATTITUDE: Calm, Cooperative, Polite

CLOTHING: Shirt- Black Shorts- Black

MEDICAL CONDITIONS: None

MEDICATIONS: None

OTHER: Eyes: Red, Glassy Face: Flushed

Dexterity: Slow, Sluggish Needed assistance of tools

Strong odor of unknown # 9144

COMMENTS: 20 min observation done by AIO Cpl. Johnson

AIO requested the breath test.

D submitted to the breath exam.

D had a little difficulty, but he blew correctly to complete the test.

Clean end of exam.

Q+A conducted

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SUBJECT: Collins, Kevin F. CASE NUMBER: 14-041517

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) Read over Consent

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WHITE - STATE ATTY. YELLOW - DHSMV PINK - CENTRAL RECORDS GOLD - JAIL

SUBJECT: Collins, Kevin E. CASE NUMBER: 14-011517

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? Apartment

WHAT STREET OR HIGHWAY WERE YOU ON? LAKE AVE

DIRECTION OF TRAVEL? S WHERE DID YOU START? "South of - lot"

WHAT TIME DID YOU START? UNK WHAT TIME IS IT NOW? NL

WHAT IS TODAY'S DATE? 2/25 WHAT DAY OF THE WEEK IS IT? MONDAY

WHAT COUNTY AND CITY ARE YOU IN NOW? FL; NO COUNTY; LAKE WORTH/LANTANA

WHEN DID YOU LAST EAT? THIS MORNING 0700 WHAT DID YOU EAT? BLT + ICED TEA

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? BREAKFAST / SLEEPING BEFORE THAT

HOW MUCH DO YOU WEIGH? 200 HAVE YOU BEEN DRINKING? NO/BEER WHAT? COORS LIGHT

HOW MUCH? 16oz WHERE? HOME WITH WHOM? NONE 0700-

WHEN DID YOU HAVE YOUR FIRST DRINK? 0700 AND YOUR LAST DRINK? 0700 / 1000

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? Orally; Glass

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? NO ARE YOU UNDER THE INFLUENCE? NO

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? NO HOW MUCH? —

WHAT? — WHERE? — WHEN? —

WHAT LINE OF WORK ARE YOU IN? RETIRED - RESTAURANT WHEN DID YOU LAST WORK? 2014

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 / "Apparently = side swiped & backed"

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? NO WHEN? —

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

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? Yes WHAT? Metoprolol Eliquis WHEN? 2/24 10 A.M.

DO YOU HAVE:

EPILEPSY?	NO
GLASS EYE?	NO
FALSE TEETH?	NO
EAR INFECTION?	NO
INNER EAR TROUBLE?	NO
DIABETES?	NO

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? NO

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

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? YES NY WHERE? NY

INTERVIEWER: Cpl. C. Johnson 9144

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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: 02/25/2019

Date of Last Agency Inspection: 02/08/2019
Observation Period Began: 13:57
Subject's Name: KEVIN F COLLINS DOB: 07/30/1954 Sex: M

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	14:25
Air Blank	0.000	14:25
Control Test	0.081	14:26
Air Blank	0.000	14:26
Subject Sample #1	0.189	14:27
Air Blank	0.000	14:28
Air Blank	0.000	14:30
Subject Sample #2	0.184	14:30
Air Blank	0.000	14:31
Control Test	0.079	14:31
Air Blank	0.000	14:32
Diagnostics Check	OK	14:32

Cylinder Lot: 13518080A5
Exp: 08/05/2020

State of Florida, County of Palm Beach,

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

I SHARI L O'NEAL, 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: S. O'Neal Date: 02-25-19
Signature

Sworn to (or affirmed) before me this 25 day of February, 2019

Cpl. Johnson #9144
Signature of Notary Public-State of Florida

Cpl. Johnson #9144
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.

FDLE/ATP FORM 38 - MARCH 2004, Ref. 11D-8.007

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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	☐	119.071(2)(h)	Other: Identity of victim of sexual battery, lewd and lascivious offense upon a person less than 16 yrs old, cheld abuse, or other sexual offense.	
	☐	119.0712(2)	Other: Personal information contained in a motor vehicle record	

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REVIEW COMPLETED BY

Booking Number: 2019006672	**Date:** 2/26/2019
	Specialist Name/ID: M. Tooks #8557