

J#0510330

1128

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

1. Arrest
2. N.T.A.

3. Request for Warrant
4. Request for Copies

1

Juvenile

N

OBTS Number

Agency ORI Number
FLO 502600

Agency Name
PALM BEACH GARDENS POLICE DEPARTMENT

Agency Report Number (N.T.A.'s only)
78-19004911

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)

12000 N Military Trail, Palm Beach Gardens, FL 33410

Location of Offense (Business Name, Address)

12000 N Military Trail, Palm Beach Gardens, FL 33410

Date of Arrest
08/20/2019

Time of Arrest
00:34

Booking Date

Booking Time

Jail Date

Jail Time

Location of Vehicle KADOFF'S TOWING & RECOVERY
4301 East Avenue, West Palm Beach, FL 33405

Name (Last, First, Middle)
Knight, Kristina,

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

Race
W - White I - American Indian
B - Black O - Oriental/Asian

Sex
W F

Date of Birth
07/21/1986

Height
5'2"

Weight
150

Eye Color
Hazel

Hair Color
Black

Complexion
Tan

Build
Medium

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)

Tattoo - center of upper back

Marital Status
Single

Religion
CHRISTIAN

Indication of Alcohol Influence
Drug Influence
Y N Unk

Local Address (Street, Apt. Number)

4040 NW 17th Ave

(City) Boca Raton

(State) FL

(Zip) 334313

Phone (561) 247-8513

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

Permanent Address (Street, Apt. Number)

4040 NW 17th Ave

(City) Boca Raton

(State) FL

(Zip) 334313

Phone ()

Address Source
DL

Business Address (Name, Street)

(City) (State) (Zip)

Phone ()

Occupation

DL Number, State

K523500867610 FL

Soc. Sec. Number

INS Number

Place of Birth (City, State)

Helsinki, Finland

Citizenship

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

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 355-2528) informed of any change of address.

Yes, by: (Name)

No: (Reason)

School Attended

Grade

Property Crime?

Yes No

Description of Property

Value of Property

Drug Activity

S. Sell
N. N/A
P. Possess

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/Opiv.

P. Paraphernalia/
Equipment
S. Synthetic

U. Unknown
Z. Other

Charge Description

Driving under the Influence (F.S. 316.103) RTS

Counts

Domestic Violence
 Y N

Statute Violation Number
316.193(1) RTS

Violation of ORD #

Drug Activity

Drug Type

Amount / Unit

Offense #

Warrant / Copies Number

Bond

Charge Description

Counts

Domestic Violence
 Y N

Statute Violation Number

Violation of ORD #

Charge Description

Counts

Domestic Violence
 Y N

Statute Violation Number

Violation of ORD #

Charge Description

Counts

Domestic Violence
 Y N

Statute Violation Number

Violation of ORD #

Charge Description

Counts

Domestic Violence
 Y N

Statute Violation Number

Violation of ORD #

Location (Court Name, Address)

NORTH COUNTY COURTHOUSE, 3188 PGA BOULEVARD, PALM BEACH GARDENS, FL 33410 - PH: (561) 662-6700

Court Date and Time

Month September

Day 25

Year 2019

Time 10:00

AM X

PM

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

Uncooperative
Signature of Defendant (or Juvenile and Parent /Custodian)

08/20/2019
Date Signed

HOLD for other Agency Name:

Signature of Arresting Officer

Name Verification (Printed by Arrestee)

Dangerous
 Suicidal

Resisted Arrest
 Other

Name of Arresting Officer (Print)
Off. R. Smith

I.D. #
#489

(PRINT)

Intake Deputy
Amalcho

I.D. #

Pouch #

Transporting Officer
Off. R. Smith

ID #
489

Agency
PBGPD

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)

2019 CT015311

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 20 DAY OF August 2019 AT 00:18 AM PM

SUBJECT: Knight, Kristina, CASE NUMBER: 19004911

AGENCY: PALM BEACH GARDENS POLICE DEPT. ARRESTING OFFICER: Ofc. R. Smith #489

PERSONAL CONTACT

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

Vehicle was driving 25-30 miles per hour in a posted 45 mile per hour zone and was swaying inside her lane. Vehicle was stopped for the move over law and the driver was seen driving with her cell phone resting on the steering wheel and appeared to be texting on her cell phone. When I attempted to stop the vehicle, the driver was slow to stop the vehicle and at first began to stop in the center lane and was idling forward, then abruptly changed lanes from the center lane to the right lane. The driver was the sole occupant of the vehicle.

OBSERVATION OF DRIVER:

Driver had watery, glassy eyes and at first was slightly swaying when she stood still. Driver began to dance around at times and had to be told multiple times to follow directions.

DRIVER'S STATEMENTS:

Driver stated she was coming from a friends house and stated she had one drink. Multiple times the driver stated that she knew she had been driving while under the influence. Driver stated that the Standardized Field Sobriety Tasks were funny. Driver asked if she is supposed to be a ballerina.

ODORS:

Odor of an unknown alcoholic beverage emanated from her breath that grew stronger as she spoke.

GENERAL OBSERVATIONS

SPEECH: Slurred, Mush mouthed

ATTITUDE: Mood swings varying from compliant to upset to uncooperative

CLOTHING: Tennis shoes, black capri pants, grey t-shirt

MEDICAL/OTHER: None

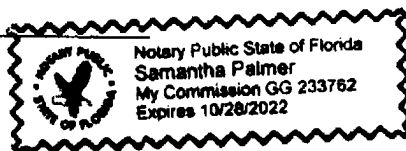
STATE OF FLORIDA
COUNTY OF PALM BEACH

[Signature] 489
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 20 day of August 2019 by Ofc. R. Smith

(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)



SUBJECT: Knight, Kristina,

CASE NUMBER 19004911

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

LT EYE-LACK OF SMOOTH PURSUIT

RT EYE-LACK OF SMOOTH PURSUIT

LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION

RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION

LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

Other Observations:

Subject was swaying slightly and would move her hands away from her sides. Subject also would stop following the stimulus and look directly at me and had to be told multiple times what to do.

WALK & TURN:

Subject initially would not get into the starting position to be given the instructions. Subject kept raising her arms during the instruction phase. Driver attempted to start before being told to. Driver missed heel to toe multiple times. Driver used arms for balance and stepped of the line. Driver counted and took 10 steps prior to the turn. Driver started at 11 after the turn contrary to instructions given. Driver stopped counting at number 12 and continued walking stating "and so on".

ONE LEG STAND:

I tried to have the subject attempt the exercise how ever she was non compliant and would not let me explain the task and became argumentative. Task was stopped due to the driver becoming more and more non-compliant and thus becoming a safety concern for herself and officers on scene.

ROMBERG ALPHABET:

Did not complete due to being uncooperative

FINGER TO NOSE:

Did not complete due to being uncooperative

BREATH TEST RESULTS: Refusal Refusal

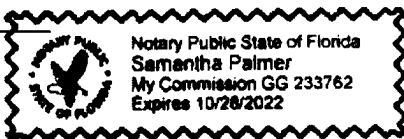
STATE OF FLORIDA
COUNTY OF PALM BEACH

[Signature] 489
(Signature of Arresting/Investigative Officer)

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(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)



WITNESS LIST

CASE NUMBER: 19004911

ARRESTING OFFICER: Ofc. R. Smith

ADDRESS: 10500 N. Military Trail, Palm Beach Gardens, FL 33410

PHONE NUMBERS (HOME): N/A (WORK) (561) 799-4445

CAN TESTIFY TO: Facts of Case

NAME: Ofc. W. ButzBach

ADDRESS: 10500 N. Military Trail, Palm Beach Gardens, FL 33410

PHONE NUMBERS (HOME) N/A (WORK) (561) 799-4445

CAN TESTIFY TO: Facts of the case

NAME: Ofc. J. Kalish

ADDRESS: 10500 N. Military Trail, Palm Beach Gardens, FL 33410

PHONE NUMBERS (HOME) N/A (WORK) (561) 799-4445

CAN TESTIFY TO: Search of driver's person and driver being uncooperative.

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

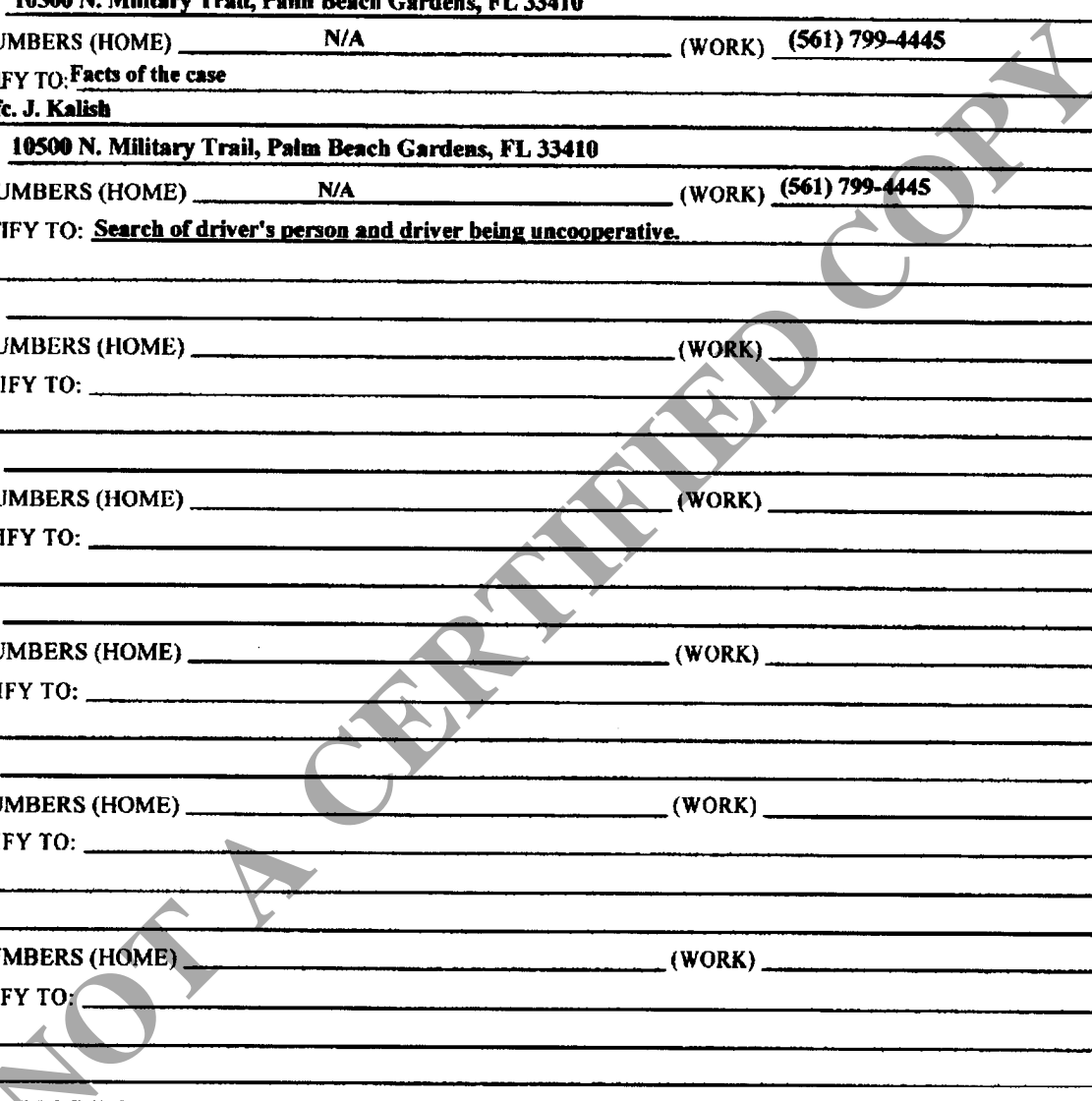
CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____



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

I, Ofc. R. Smith, a duly certified Law Enforcement Officer or Correctional Officer,
(Name of Officer reading Implied Consent Warning)

am a member of Palm Beach Gardens Police Department, and I do swear
(Name of law enforcement agency)

or affirm that on or about the 20 day of August, 20 19, at 00:34 P.M. A.M.

DRIVER Kristina Knight
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# K523500867610, state of FL, was placed under lawful arrest for

the offense of Driving under the Influence (F.S.S. 316.193) by Ofc. R. Smith and
(Name of Arresting Officer)

issued Citation # A56H2VE

That on or about the 20 day of August, 20 19, at 00:34 P.M. A.M.

in PALM BEACH County,

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

[Signature] 489
Signature of Law Enforcement Officer or
Correctional Officer

THE AFFIDAVIT MUST BE NOTARIZED OR ATTESTED TO (F.S. 117.10)



(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before

me this 20 day of August, 20 19,

by Ofc. R. Smith

who is personally known to me or who has produced

Personally Known as identification

Notary Public [Signature]

HSMV-BAR1001 (REV. 10/2016)

The foregoing instrument was sworn and subscribed before me:

[Signature] 489
Signature of Attesting Officer

Title Officer

Date 8-20-2019

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.

TESTING FACILITY TASK REPORT

AGENCY: PBG/SMITH

SUBJECT: KNIGHT, KRISTINA

CASE NUMBER: 19-106026

DATE: Aug 20, 2019

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 0121

ENDING TIME: 0127

BREATH TESTS RESULTS: 1) R TIME 0126 A.M. P.M. 2) XX TIME XX 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 TECHNICIAN: J Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED,

ATTITUDE: UNCOOPERATIVE, CRYING, EMOTIONAL, RAMBLING

CLOTHING: GREY TANK TOP, BLACK LEGGINGS, BLACK SNEAKERS

MEDICAL CONDITIONS: NONE

MEDICATIONS: "NOT YET"

OTHER:

EYES: GLASSY AND BLOODSHOT,

COMMENTS:

ARRESTING OFFICER CONDUCTED THE 20 MINUTE OBSERVATION BEGINNING AT 0100
SUBJECT REFUSED TO ANSWER CAMERA FORMAT QUESTIONS AND TAKE BREATH TEST
A/O READ I/C
SUBJECT STATED SHE UNDERSTOOD I/C
SUBJECT AGREED TO TAKE BREATH TEST AND THEN AGAIN REFUSED TO TAKE BREATH TEST
A/O CALLED A REFUSAL @ 0126
A/O DID NOT READ RIGHTS OR CONDUCT Q&A
DUE TO SUBJECT BEING UNCOOPERATIVE



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

PBSO CASE # 19-106026 PBSO ZONE 3-13

AGENCY CASE # 19004911 CRASH CASE # N/A

TIME OF STOP/CRASH 00:18 DATE 08/20/2019 DAY Tuesday

SUBJECT'S NAME Kristina Knight RACE W SEX F

HGT 5' 2" WGT 150 DOB 07/21/1986

LOCATION 12000 N Military Trail, Palm Beach Gardens, FL 33410

ARRESTING OFFICER'S NAME & ID R. Smith 489 AGENCY PBG PD

DIVISION: Patrol

NOTIFIED BY COMMO 00:37

ARRIVAL AT FACILITY 0100

BREATH RESULTS:

Arrest Time 00:34

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

TESTING OFFICER'S ID 24520 PBSO VIDEOTAPE # N/A

NOT A CERTIFIED RELEASE

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) _____

WHITE - STATE ATTY.

YELLOW - DHSMV

PINK - CENTRAL RECORDS

GOLD - JAIL

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: _____



**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	<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"/>			
Other	<input type="checkbox"/>	539.001(b)-(l)FSS, 539.003FSS	Other: Pawn Broker Information.	
	<input type="checkbox"/>	3119.0712 (2)	Other: Personal Information Contained in a Motor Vehicle Record	

REVIEW COMPLETED BY

Booking Number: 2019027177	Date: 8/20/2019
	Specialist Name/ID: M. Tooks #8557