0288692 18CT019290 2808

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

ADMINISTRATIVE

OBTS Number

Agency ORI Number: FLO 502600 | Agency Name: Palm Beach Gardens Police Department | Agency Report Number (N.T.A.'s only): 78- 18-006480

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:

Location of Arrest (Including Name of Business): GRANDE CARNICHE/CHARROUX DR

Location of Offense (Business Name, Address): GRANDE CARNICHE/CHARROUX DR

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
10/23/18	2036					GRANDE CARNICHE/CHARROU

DEFENDANT

Name (Last, First, Middle): SALVATORE, LINDA, DIANE

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	F	10/24/55	5-08	120	BLU	BLN	LGT	SLIM

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

Marital Status: SINGLE | Religion: CATHOLI | Indication of: Alcohol Influence Y ☑ N ☐ Unk. ☐ | Drug Influence Y ☐ N ☑ Unk. ☐

Local Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Residence Type: 1. City 2. County 3. Florida 4. Out of State
669 HERMITAGE CIR	PBG	FL	33410	(561) 493-8020	1

Permanent Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Address Source
Same as Local Address				( ) Same	FL DL

Business Address (Name, Street)	(City)	(State)	(Zip)	Phone	Occupation
669 HERMITAGE CIR	PBG	FL	33410	(561) 493-8020	HOME CARE

O/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
S413524558840 FL	[redacted]		WORCESTER, MA	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
NONE				☐ 1. ☐ 2.	☐ 3. ☐ 4. ☐ 5.
NONE				☐ 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 #
DUI	1	☐Y ☑N	316.193(1)	

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

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

Received WD

CHARGE

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

OCT 25 2018

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

NOTICE TO APPEAR

Location (Court, Room Number, Address): North County Courthouse 3188 PGA Blvd, Palm Beach Gardens, FL 33410

Court Date and Time: Month NOVEMBER Day 28 Year 2018 Time 10:00 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 ☐ Suicidal ☐ Resisted Arrest ☐ Other: ☐ Intake Deputy I.D. # Booth #

Signature of Arresting Officer: X [signature] 493

Name of Arresting Officer (Print): TRUDEAU | I.D. #: 493

Transporting Officer: TRUDEAU | ID #: 493 | Agency: PBG

Name Verification (Printed by Arrestee) (PRINT)

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 5148, REV. 8/97

NOT A CERTIFIED COPY

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 23rd DAY OF October 20 18, AT 1948

SUBJECT: SALVATORE, LINDA, DIANE CASE NUMBER: 18-006480

AGENCY: Palm Beach Gardens Police Department ARRESTING OFFICER: TRUDEAU

PERSONAL CONTACT

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

On 10/23/18 at approximately 1941 hours, I responded to Grande Corniche/Charroux Dr, in reference to a reckless driver called in by Frenchman's Reserve Security, that was possibly under the influence of alcohol. During my investigation, my department issued body worn camera was utilized. Upon arrival I made contact with Frenchman's Reserve Security Officer, Steven Subin, who provided a sworn video recorded statement. The following is a summary of his statement: He was responding to a reckless driver in the area of Hermitage Cir when he observed a vehicle stopped facing the opposing lane of travel just East of the intersection of Grande Carniche/Charroux Dr. He approached the vehicle and observed a female, later identified as Linda Salvatore, in the driver's seat with the engine running. Linda told Steven that she was trying to go to Frenchman's Reserve and was trying to go home. Linda continued to mumble and ramble on about trying to get a ride home, and asked Steven to driver her vehicle home and not contact the police, in which steven refused. Steven asked Linda to exit the vehicle for safety reasons and await police arrival.

OBSERVATION OF DRIVER:

While standing outside of the vehicle, I observed Linda's pupils to be dilated more than a normal persons, the whites of her eyes to be red and watery. Upon requesting Linda to stand in front of my police vehicle, I observed her to have an ataxic gait as she walked, and as she stood, had an orbital sway. Linda also had difficulty standing in one spot without moving to regain balance.

DRIVER'S STATEMENTS:

Linda stated she did not consume any alcohol. She also stated she was trying to drive home and was confused, not realizing she was in the opposing lane of travel.

ODORS:

Strong odor of the impurities of an alcoholic beverage emitting from her breath from a conversational distance.

GENERAL OBSERVATIONS

SPEECH: Slow, deliberate, and mumbled.

ATTITUDE: Normal, argumentative

CLOTHING: Normal, clean

MEDICAL PROBLEMS: No medical ailments, later stated she had raw skin and an open wound on her left foot.

MEDICATIONS: Paxil (20mg), Lipitor (20mg)

OTHER: N/A

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SUBJECT: SALVATORE, LINDA, DIANE CASE NUMBER: 18-006480

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

☑ LEFT EYE DOES NOT FOLLOW SMOOTHLY
☑ LEFT EYE JERKS AT 45 DEGREE ANGLE OR LESS
☑ DISTINCT JERKING LEFT EYE MAXIMUM DEVIATION
☑ RIGHT EYE DOES NOT FOLLOW SMOOTHLY
☑ RIGHT EYE JERKS AT 45 DEGREE ANGLE OR LESS
☑ DISTINCT JERKING RIGHT EYE MAXIMUM DEVIATION

CAN NOT DO, WHY? _____

WALK AND TURN:

During the instructions stage Linda was unable to maintain balance while standing on the line during the instructions. Linda refused to stand in the position I instructed her to. After providing the instructions several times, Linda stated she had an open wound on her left foot and raw skin making her unable to stand.

CAN NOT DO, WHY? Linda stated she had an open wound on her left foot and raw skin making her unable to stand.

ONE LEG STAND:

When instructed of the position to stand during the instructions stage, Linda continued to move and was unable to maintain balance, moving from the position several times. I repeated and demonstrated the exercise several times, however Linda refused to perform the exercise.

CAN NOT DO, WHY? Linda stated she had an open wound on her left foot and raw skin making her unable to stand.

FINGER TO NOSE:

Not administered

CAN NOT DO, WHY? _____

ROMBERG/ALPHABET:

Not administered

CAN NOT DO, WHY? _____

BREATH TEST RESULTS: Refused

STATE OF FLORIDA
COUNTY OF PALM BEACH
THE FOLLOWING INSTRUMENT WAS NOTARIZED OR SWORN BEFORE ME THIS 23rd October, 2018 (DATE)

BY. Ofc Trudeau

NOTARY/CLERK OF COURT/OFFICER (F.S. 117.10)

BEVERLY SUE OWEN
MY COMMISSION # GG 188278
EXPIRES: May 30, 2022
Bonded Thru Notary Public Underwriters

493
SIGNATURE OF ARRESTING OFFICER

NOT A CERTIFIED COPY

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: 80-006477 Software: 8100.27
Date of Test: 10/23/2018

Date of Last Agency Inspection: 10/19/2018
Observation Period Began: 21:22
Subject's Name: LINDA D SALVATORE DOB: 10/24/1955 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	21:42
Air Blank	0.000	21:42
Control Test	0.079	21:43
Air Blank	0.000	21:43
Subject Sample #1	REF*	21:45
Air Blank	0.000	21:45
Control Test	0.080	21:46
Air Blank	0.000	21:46
Diagnostics Check	OK	21:46

*Subject Test Refused

Cylinder Lot: 05218080A3
Exp: 05/05/2020

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 SUE OWEN, 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: _____ Date: 10/23/18
Signature

Sworn to (or affirmed) before me this 23RD day of October, 2018

_____ ofc R. Trudeau
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.

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

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

I, Ofc. R. Trudeau #493, a duly certified Law Enforcement Officer or Correctional Officer,
(Name of Officer reading Implied Consent Warning)

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

or affirm that on or about the 23rd day of October ; 20 18 , at 9:45 ☑ P.M ☐ A.M.

DRIVER Linda Diane Salvatore ,
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# S413524155884O , state of FL. , was placed under lawful arrest for

the offense of Driving Under the Influence by Ofc. R. Trudeau #493 and
(Name of Arresting Officer)

issued Citation # A56GXIEE.

That on or about the 23RD day of October, 20 18 , at 2145 ☒ 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.

493
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:

Signature of Attesting Officer

Title

Date

(AFFIX SEAL)
The foregoing instrument was sworn and subscribed before
me this 23RD day of October, 20 18 .
by ofc Trudeau ,
who is personally known to me or who has produced
as identification

Notary Public

BEVERLY SUE OWEN
MY COMMISSION # GG 188278
EXPIRES: May 30, 2022
Bonded Thru Notary Public Underwriters

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.

HSMV-BAR1001 (REV. 10/2015)

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SUBJECT: Salvatore, Linda Diane CASE NUMBER: 18-006480

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 ofc Trudeau of the Palm Beach Gardens P.D.

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) Refused 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) Refused on Camera

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SUBJECT: SALVATORE, Linda Diane CASE NUMBER: 18-006480

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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TESTING FACILITY TASK REPORT

AGENCY: Palm Beach Gardens P.D.

SUBJECT: SALVATORE, Linda Diane CASE NUMBER: 18-136535

DATE: 10/23/18 ~~VIDEO TAPE NUMBER~~: N/A

BEGINNING TIME: 2134 ENDING TIME: 2146

BREATH TESTS RESULTS 1) REFUSED TIME 2145 A.M./P.M. 2) ____ TIME ____ A.M./P.M.

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

BREATH OPERATOR: S. Owen #3184

MAINTENANCE TECHNICIAN: J. Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH:

ATTITUDE: A complained of wig in car, cuffs, everything

CLOTHING: blue skirt, flowered shirt

MEDICAL CONDITIONS: infection left foot, antidepressant

MEDICATIONS: none, PAXEL, lipitor

OTHER: Tech got A slides from jail because of cut on foot

64 YOA

COMMENTS: A/O A arrived at 2112hrs

A/O observed 20 minutes

A had in dentures said they wouldn't come out

A/O said they had minty smell, A rinsed mouth out upon arrival.

A/O requested breath test, A refused

A/O read ICI, A didn't understand, A explained understood A agreed to test

Asked questions during instrument setting up A said she'd had prior, instrument was ready she decided to not take test

A/O read c/w A understood.

A kept telling officer how to do job

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

PBSO CASE # 18-136535 PBSO ZONE 3-15

AGENCY CASE # 18-006480 CRASH CASE # N/A

TIME OF STOP/CRASH _____ DATE 10/23/18 DAY Tuesday

SUBJECT'S NAME Linda Salvatore RACE W SEX F

HGT 5-08 WGT 119 DOB 10 / 24 / 55

LOCATION Grande Corniche/Charroux Dr

ARRESTING OFFICER'S NAME & ID Trudeau 493 AGENCY PBSO

DIVISION: _____

NOTIFIED BY COMMO 2042

ARRIVAL AT FACILITY 2112

ARREST TIME 2036

BREATH RESULTS:

1. REFUSED
2. _____
3. _____
4. _____

TESTING OFFICER'S ID 3184 PBSO VIDEOTAPE # N/A

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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: 2018035539	**Date:** 24Oct18
	Specialist Name/ID: R Ehrenberg/6104