

0512930

19CT-22064

NH

1797

ARREST / NOTICE TO APPEAR

AD M I N I S T R A T I O N	OBTS Number	Agency ORI Number 0501700		Agency Name Jupiter Police Department		Agency Report Number (N.T.A.'s only) 5, 4 19-005332		1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias	1	JUVENILE		
D E F E N D A N T	Charge Type: Check as many as apply:	☐ 1. Felony ☐ 2. Traffic Felony ☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other		If Weapon Seized Enter Type NONE		Multiple Clearance Indicator						
	Location of Arrest (Including Name of Business) FREDERICK SMALL RD/HEIGHTS BLVD Jupiter FL 33428		Location of Offense (Business Name, Address) 5749 DONALD ROSS RD/HEIGHTS BLVD, JUPITER, FL 33418									
	Date of Arrest 11/28/2019	Time of Arrest 21:04	Booking Date 11/28/2019	Booking Time 21:14	Jail Date	Jail Time	Location of Vehicle					
	Name (Last, First, Middle) MALASKY, LORRAINE											
D E F E N D A N T	Alias: SMON											
	Race W - White B - Black O - Oriental/Asian	Sex M - Male F - Female	Date of Birth 10/13/1946	Height 5'02	Weight 110	Eye Color BLUE	Hair Color BLONDE /	Complexion LIGHT	Indication of: Alcohol Influence Yes ☒ No ☐ Unk. ☐ Drug Influence Yes ☐ No ☒ Unk. ☐			
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)					Marital Status S	Religion JEWISH	Residence Type: 1. City 3. Florida 2. County 4. Out of State				
	Local Address (Street, Apt. Number) 13 VIA VIZCAYA, PALM BEACH, FL 33480					(City) (State)		(Zip) (561) 214-3171	Phone			
C O D E	Permanent Address (Street, Apt. Number) 13 VIA VIZCAYA, PALM BEACH, FL 33480					(City) (State)		(Zip) (561) 214-3171	Phone			
	Business Address (Name, Street) (City)					(State) (Zip)		Phone		Occupation		
	DL Number, State M420520468730 / FL		Soc. Sec. Number [REDACTED]		INS Number		Place of Birth (City, State) PHILADELPHIA, PA		Citizenship US			
	Co-Defendant Name (Last, First, Middle)					Race	Sex	Date of Birth	☐ 1. Arrested ☐ 3. Felony ☐ 5. Juvenile ☐ 2. At Large ☐ 4. Misdemeanor			
J U V E N I L E	Co-Defendant Name (Last, First, Middle)					Race	Sex	Date of Birth	☐ 1. Arrested ☐ 3. Felony ☐ 5. Juvenile ☐ 2. At Large ☐ 4. Misdemeanor			
	Name (Last, First, Middle)					Residence Phone		Business Phone				
	Address (Street, Apt. Number) (City)					(State) (Zip)						
	Notified by: (Name)					Date	Time	JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated				
C H A R G E	Released To: (Name)					Relationship	Date	Time				
	The above address was provided by ☐ defendant and/or ☐ defendant's parents. The child and/or parent was told to keep the Juvenile Court Clerk's Office (Phone 355-2526) informed of any change of address.											
	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 N. N/A A. Amphetamine B. Barbiturate C. Cocaine E. Heroin H. Hallucinogen M. Marijuana O. Opium/Deriv. P. Paraphernalia/ Equipment S. Synthetic U. Unknown: Z. Other						
C H A R G E	Charge Description DUI - DRIVING UNDER INFLUENCE					State Violation Number 316.193(1)*		Violation of ORD #				
	Drug Activity	Drug Type N	Amount / Unit /	Offense #	Counts 1	Domestic Violence ☐ Y ☒ N	Warrant / Capias Number		Bond OK			
	Charge Description					State Violation Number		Violation of ORD #				
	Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence ☐ Y ☐ N	Warrant / Capias Number		Bond			
C H A R G E	Charge Description					State Violation Number		Violation of ORD #				
	Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence ☐ Y ☐ N	Warrant / Capias Number		Bond			
	Health / Apparent Physical Condition of Defendant					Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries Explain:						
	Check which applies: ☐ Released O.R. ☐ Released to Parent/Guardian ☐ T.O.T. County Jail ☐ Posted Bond ☐ South County Mental Health					PROPERTY - Received By		Released By		Released To		
N O T I C E T O A P P E A R	Transported By					Date Transported 11/28/19	Time Transported	Other				
	☐ INSTRUCTION NO. 1 - Mandatory appearance in court ☒ INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.					Location (Court, Room) North County		Court Date and Time 12/19/19 8:30:00				
	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		No Photo Available				
A D M I N	HOLD for Other Agency					Signature of Arresting Officer Ryan R. Ferguson		Name Verification (Printed by Arrestee)				
	☐ Dangerous ☐ Resisted Arrest ☐ Belicidal ☐ Other					Manner of Arresting Officer (Print) FERGUSON, RYAN		I.D. # 1202		PAGE 1 OF 1		
	Transporting Officer R. FERGUSON					I.D. # 385		Agency JUPITE				
	Witness here if subject signed with an "X".											

☐ COURT ☐ JUVENILE ☐ AGENCY ☐ CENTRAL RECORDS ☐ JAIL ☐ CRIMINAL ANALYSIS

 SCANNED
 NOV 29 2019

OBS Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	JUVENILE	
A D M I N I S T R A T I V E	Agency ORI Number FL 0501700	Agency Name JUPITER POLICE DEPARTMENT	Agency Report Number 5 4 19-005332							
	Charge Type: Check as many as apply. ☐ 1. Felony ☐ 3. Misdemeanor ☐ 5. Ordinance ☐ 2. Traffic Felony ☒ 4. Traffic Misdemeanor ☐ 6. Other			Special Notes:						
	Name (Last, First, Middle) MALASKY, LORRAINE			Race W		Sex F		Date of Birth 10/13/1946		
	Charge Description 316.193(1)* DUI - DRIVING UNDER INFLUENCE			Charge Description						
	Charge Description			Charge Description						
	Victim's Name (Last, First, Middle) State Of Florida			Race		Sex		Date of Birth		
	Local Address (Street, Apt. Number) (City) (State) (Zip)			Phone		Address Source				
	Business Address (Name, Street) (City) (State) (Zip)			Phone		Occupation				
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. ☐ was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. ☐ confessed to _____ admitting to the below facts. ☒ was found to have committed the below acts, resulting from my (described) investigation. On the <u>28</u> day of <u>November</u>, <u>2019</u> at <u>23:45</u> (Specifically include facts constituting cause for arrest.)										
My Body Worn Camera was utilized for the following incident: On November 28th 2019 at approximately 2040 hours, I was patrolling the area of Donald Ross Rd/Heights Blvd. While patrolling the area, Northcom Communication dispatched me to Donald Ross Rd/Interstate 95 and advised that the caller was following behind a blue BMW Z4 from Northlake Blvd on to Interstate 95. The caller advised the vehicle was getting off Donald Ross Rd from Interstate 95. I observed a 2019 2dr Blue BMW Z4 bearing FL tag LCBF68. The vehicle was driving eastbound towards the intersection of Donald Ross Rd/Heights Blvd. The vehicle proceeded to drive past a red turning light that indicated a vehicle to turn north onto Heights Blvd. The vehicle then went westbound on Heights Blvd swerving in the westbound lane. The vehicle then drove north on Heights Blvd towards the intersection of Fleming St/Heights Blvd. I proceeded to conduct a traffic stop to which the vehicle took a slow time to come to a stop. The final stop of the traffic stop was at Frederick Small/Heights Blvd. Upon my approach to the vehicle, I made contact with a white female who was the sole occupant of the vehicle and was later identified as Lorraine Malasky (W/F - 10/13/1946). Malasky had glossy eyes, her face was flushed red and she appeared sweaty. Malasky had a moderate smell of an unknown alcoholic beverage coming from her person that grew when she spoke. I asked Malasky for her driver's license, registration, and insurance card to which she handed me a Florida Blue insurance card and stopped searching for anything else. I asked Malasky for her driver's license and registration to which she handed me her driver's license and stopped searching for anything else. I asked Malasky for her registration to which she handed me an envelope containing multiple documentations. I asked Malasky for her registration to which she handed it to me from the envelope.										
	SWORN AND SUBSCRIBED BEFORE ME  T. Leahey NOTARY PUBLIC / CLERK OF COURT <u>11/28/19</u> DATE			SIGNATURE OF ARRESTING / INVESTIGATING OFFICER  FERGUSON, RYAN (1202) NAME OF OFFICER (PLEASE PRINT) <u>11/28/2019</u> DATE						
							PAGE 1 OF 2			

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P.I.O.

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NOV 29 2019

OBTS Number		PROBABLE CAUSE AFFIDAVIT SUPPLEMENT		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Copies	1	JUVENILE
Agency ORI Number FL 0501700	Agency Name JUPITER POLICE DEPARTMENT	Agency Report Number 5 4 19-005332					
Charge Type: ☐ 1. Felony ☐ 3. Misdemeanor ☐ 5. Ordinance ☐ 2. Traffic Felony ☒ 4. Traffic Misdemeanor ☐ 6. Other		Special Notes:					
Name (Last, First, Middle) MALASKY, LORRAINE				Race W	Sex F	Date of Birth 10/13/1946	

Malasky advised she was coming from her step-son house in Frenchmen's Creek. She advised she was at her step-son residence for Thanksgiving and was on her way to her residence. Malasky stated she was looking for Interstate 95 to go back home and did not know where she was.

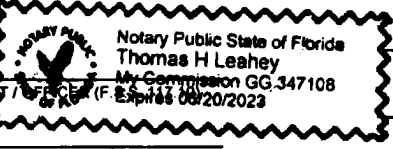
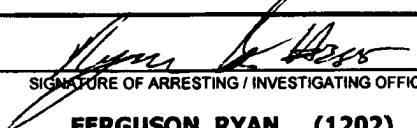
I asked Malasky to step out of the vehicle and walk towards the rear of her vehicle to which she complied. Malasky was barefoot and stumbled out of her vehicle. I asked Malasky if she had any alcoholic beverages to which she admitted to having one red wine.

Due to the driving pattern and my observation of Malasky, I asked her if she would like to perform the Standardized Field Sobriety Task's to which she refused. I advised Malasky of Taylor Warning's and asked if she would like to perform the Standardized Field Sobriety Task's to which he refused.

Based on my investigation and the totality of the circumstances, I found probable cause to arrest Lorraine Malasky for DUI because she did drive or was in actual physical control of a vehicle, while under the influence of alcoholic beverages as set forth in Florida Statute 877.111, or a controlled substance as set forth in Chapter 893 or any combination thereof, and was affected to the extent that her normal faculties were impaired; breath alcohol level of .08 or more grams of alcohol per 210 liters of breath, contrary to Florida Statute 316.193(1).

I advised Malasky that she was being placed under arrest for DUI. I placed Malasky in handcuffs behind her back which were checked for proper spacing and double-locked to prevent tightening. Malasky was issued a citation for DUI, failure to obey traffic control device and driving with an expired registration. The vehicle was towed by All Hooked Up.

Malasky was transported to the Palm Beach County Jail without further incident. BrAC Results: Refusal.

SWORN AND SUBSCRIBED BEFORE ME  NOTARY PUBLIC / CLERK OF COURT / OFFICE (F.S. 117.10) 11/28/19 DATE	 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER FERGUSON, RYAN (1202) NAME OF OFFICER (PLEASE PRINT) 11/28/2019 DATE
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 2 OF 2

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

I.O.

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 NOV 29 2019

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

I, R. Ferguson #385/1202, a duly certified Law Enforcement Officer or Correctional Officer,
 (Name of Officer reading Implied Consent Warning)

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

or affirm that on or about the 28th day of November, 20 19, at 2040 ☒ P.M. ☐ A.M.

DRIVER Lorraine Malasky
 (Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

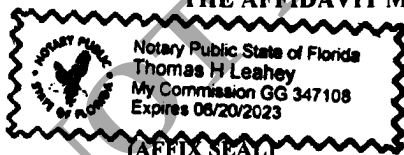
DL# M420-520-46-873-0, state of Florida, was placed under lawful arrest for
 the offense of DUI by R. Ferguson #385/1202 and
 (Name of Arresting Officer)
 issued Citation # AD3VIXE

That on or about the 28th day of November, 20 19, at 2221 ☒ 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]
 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 28th day of November, 20 19,

by R. Ferguson #385/1202,

who is personally known to me or who has produced

personally known as identification
 Notary Public T. Leahy

The foregoing instrument was sworn and subscribed before me:

[Signature]
 Signature of Attesting Officer

Title _____

Date _____

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.

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: 80-006029 Software: 8100.27
Date of Test: 11/28/2019

Date of Last Agency Inspection: 11/15/2019
Observation Period Began: 21:50
Subject's Name: LORRAINE MALASKY

DOB: 10/13/1946 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	22:17
	Air Blank	0.000	22:17
	Control Test	0.081	22:17
	Air Blank	0.000	22:18
	Subject Sample #1	VNM*	22:21
	Air Blank	0.000	22:22
	Air Blank	0.000	22:23
	Subject Sample #2	REF**	22:24
	Air Blank	0.000	22:24
	Control Test	0.078	22:24
	Air Blank	0.000	22:25
	Diagnostics Check	OK	22:25

*Volume Not Met (0.142 - Breath Sample Not
Reliable to Determine Breath Alcohol Level)
**Subject Test Refused

Cylinder Lot: 17919080A1
Exp: 08/05/2021

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:

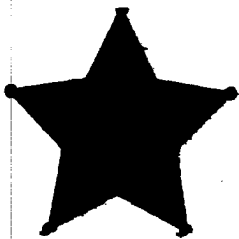
I THOMAS R LEAHEY, hold a valid Breath Test Operator permit issued by the Florida
Department of Law Enforcement, I administered the above breath test to the subject named above in
accordance with Chapter 11D-8, Florida Administrative Code, and this form is a true and accurate
report of that breath test.

Breath Test Operator: T. Leahy Date: 11/28/19
Signature

Sworn to (or affirmed) before me this 28th day of November, 2019

Signature of Notary Public-State of Florida Off R Ferguson #385
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.



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

PBSO CASE # 19-142544 PBSO ZONE 3-15

AGENCY CASE # 19-005332 CRASH CASE # _____

TIME OF STOP/CRASH 2040 DATE 11/28/19 DAY Thursday

SUBJECT'S NAME Lorraine Malasky RACE W SEX F

HGT 502 WGT 110 DOB 10-13-46

LOCATION Donald Ross Rd/ Heights Blvd

ARRESTING OFFICER'S NAME & ID PO Ferguson 385 AGENCY Jupiter

DIVISION: _____

NOTIFIED BY COMMO yes

ARRIVAL AT FACILITY 2150

BREATH RESULTS:

Arrest Time 2104

1. VNM

2. _____

3. **REFUSED**

4. _____

TESTING OFFICER'S ID 19183 PBSO VIDEOTAPE # N/A

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TESTING FACILITY TASK REPORT

AGENCY: JPD

SUBJECT: Malasky, Lorraine

CASE NUMBER: 19-142544

DATE: 11/28/19

VIDEO TAPE NUMBER: N/A

BEGINNING TIME: 22:12

ENDING TIME: 22:24

BREATH TESTS RESULTS: 1) VNM TIME 22:21 A.M./P.M. 2) R TIME 22:21 A.M./P.M.
3) N/A TIME — A.M./P.M. 4) N/A TIME — A.M./P.M.

BREATH OPERATOR: T Penney #19183

MAINTENANCE TECHNICIAN: T Kivlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: slurred, thick

ATTITUDE: talkative, highly repetitive, uncooperative

CLOTHING: black/gold dress, silver flip flops

MEDICAL CONDITIONS: depression

MEDICATIONS: 2 pills anti-depressant (unrec)

OTHER: eyes glassy, 4 black shirt

REFUSED

A stated she had 1 glass of wine -

COMMENTS: arrived at center A/O conducted a 20 minute observation period at 21:50 hrs

A agreed to perform breath test + then asked what happens if she refuses

A/O read I/c + A stated she understood I/c

A agreed to perform breath test but was unable to provide an adequate breath sample

REFUSED

A/O called refusal

A/O read rights + A stated she wanted an attorney

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A/O did not attempt Q/A

SUBJECT: Malusky, Lorraine

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 Off R Ferguson #385 of the JPD

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.

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SUSPECT'S SIGNATURE: (X) _____

Read on camera

SUBJECT: Malasky, Lorraine 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: _____

PBSO #0129C REV. 9/93 WHITE - STATE ATTY. YELLOW - DHSMV PINK - CENTRAL RECORDS GOLD - JAIL

SCANNED
NOV 29 2019



**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	☐	119.07(1)	Other: DNA analysis results information held by a public entity is exempt	
	☐	943.045(10)	Other: DNA results/analysis and comparison of analytic results submitted to FDLE	

REVIEW COMPLETED BY

Booking Number: 2019038264	Date: 11/29/2019
	Specialist Name/ID: VARGO/6665

SCANNED
NOV 29 2019