J# 0513328 19CT-23128 P# 662

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	Agency Name	Agency Report Number (N.T.A.'s only)
FLO 502600	PALM BEACH GARDENS POLICE DEPARTMENT	78- 19007329

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)	Location of Offense (Business Name, Address)
CENTRAL BLVD/DONALD ROSS RD, PALM BEACH GARDENS, FL 33410	CENTRAL BLVD/DONALD ROSS RD, PALM BEACH GARDENS, FL 33410

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
12/14/2019	01:36					DONALD ROSS VILLAGE

DEFENDANT

Name (Last, First, Middle): AMATO, RACHEL, LYNN
Alias (Name, DOB, Soc. Sec. #, Etc.): NONE

Race (W - White I - American Indian B - Black 0- Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	03/02/1993	503	140	HAZ	BLN	LGT	SMALL

Scars, Marks, Tatoos, Unique Physcal Features (Location, Type, Description): TATT: R-LEG: PINAPPLE, HEARTS ; L-LEG: WEDNESDAY ADAMS FACE, PALM
Marital Status: SINGLE | Religion: NONE
Indication of: Alcohol Influence Y ☑ N ☐ Unk. ☐ | Drug Influence Y ☐ N ☐ Unk. ☑

Local Address (Street, Apt. Number) (City) (State) (Zip): 610 CLEMATIS STREET, #304, WEST PALM BEACH, FL 33401
Phone: (561) 501-8473
Residence Type: 1. City 2. County 3. Florida 4. Out of State: 2

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 610 CLEMATIS STREET, #304, WEST PALM BEACH, FL 33401
Phone: ( )
Address Source: FLORIDA DRIVER'S LICENSE

Business Address (Name, Street) (City) (State) (Zip): PARCHED PIG 4580 DONALD ROSS ROAD #100 PALM BEACH GARDENS, FL 33418
Phone: (561) 360-3063
Occupation: BARTENDER

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
A530732935820 FL	[redacted]		DETROIT, MI	USA

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 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 - PROPERTY DAMAGE	1	☐Y ☒N	316.193(3)(C)(1)	

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

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

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

NOTICE TO APPEAR

Location (Court Room Number, Address): NORTH COUNTY COURTHOUSE, 3188 PGA BOULEVARD, PALM BEACH GARDENS, FL 33410 - PH: (561) 662-6700
Court Date and Time: Month JANUARY Day 15 Year 2020 Time 10:00 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, 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: 12/14/2019

ADMIN

HOLD for other Agency Name:
☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:
In-Take Bench | Locker | Pouch #

Signature of Arresting Officer: X [signature] 471
Name of Arresting Officer (Print): Ofc. Cameron Carver | I.D. #: #471
Transporting Officer: Ofc C. Carver 471 | ID #: | Agency: PBGPD

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)

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 14 DAY OF DECEMBER 20 19, AT 00:37 ✓ AM PM

SUBJECT: AMATO, RACHEL, LYNN CASE NUMBER: 19007329

AGENCY: PALM BEACH GARDENS POLICE DEPT. ARRESTING OFFICER: Ofc. Cameron Carver #471

PERSONAL CONTACT

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

+Responded to Central Blvd and Donald Ross Road in reference to a Motor Vehicle Crash. Both parties participated in crash investigation.
+Wheel Witness: Driver (Carla Spalding) of victim vehicle identified Amato as driver that hit her car.

OBSERVATION OF DRIVER:

+Face/Eyes: Flush face, glassy and bloodshot eyes.
+Clothing Condition: Clean, Neat. Odor coming off breath not her person.
+Exit Sequence: Jumped out of vehicle during crash investigation when asked to exit vehicle.

DRIVER'S STATEMENTS:

+Participated in Crash Investigation
+Roadsides: Stated she works at Parched Pig, had two shots towards the end of shift and and samples of drinks being made throughout the shift. Last ate around 10:00pm at work, eating two slices of pizza. Stated she used to do ballet.
+Implied Consent Read: Agreed to Perform Breath.

ODORS:

Odor of unknown alcoholic beverage coming off breath.

GENERAL OBSERVATIONS

SPEECH: Foreign Language (type), Deliberate, Mumbled, Mush-mouthed, Pronounced, Slurred, Thick,

ATTITUDE: Calm, Cooperative

CLOTHING: Brown Top; Blue Jean Shorts; Black and White Shoes

MEDICAL/OTHER: Adderall for ADHD

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 14 day of DECEMBER 20 19 by Ofc. Cameron Carver

(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)

JOSHUA BELL
MY COMMISSION #GG346008
EXPIRES: JUN 18, 2023
Bonded through 1st State Insurance

SUBJECT: AMATO, RACHEL, LYNN CASE NUMBER 19007329

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:

Condition of Eyes: Glassy, Bloodshot
Observations: VGN Not Present

WALK & TURN:

***Lost Balance**
***Started Before Instructed**
***Stepped Off Line**
***Used Arms for Balance**
***Wrong Number of Steps**
***Stopped While Performing Task**
***Improper Turn**
Other Observations: Looked ahead of the line rather than looking at feet.

ONE LEG STAND:

***Used Arms for Balance**
***Swayed**
Other Observations: Did not keep foot elevated near six-inches; Started prior to being instructed.

ROMBERG ALPHABET:

Started prior to being told. Upon conclusion asked and attempted to recite the alphabet backwards.

FINGER TO NOSE:

Missed touching tip of finger to tip of nose.

BREATH TEST RESULTS: .120 .116

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 14 day of DECEMBER 2019 by Ofc. Cameron Carver

(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)

JOSHUA BELL
MY COMMISSION #GG346008
EXPIRES: JUN 18, 2023
Bonded through 1st State Insurance

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: 80-006239 Software: 8100.27
Date of Test: 12/14/2019

Date of Last Agency Inspection: 12/06/2019
Observation Period Began: 02:15
Subject's Name: RACHEL L AMATO DOB: 03/02/1993 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	02:41
Air Blank	0.000	02:42
Control Test	0.080	02:42
Air Blank	0.000	02:43
Subject Sample #1	0.120	02:44
Air Blank	0.000	02:45
Air Blank	0.000	02:47
Subject Sample #2	0.116	02:47
Air Blank	0.000	02:48
Control Test	0.079	02:48
Air Blank	0.000	02:49
Diagnostics Check	OK	02:49

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

State of Florida, County of Palm Beach,

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

I JOSHUA J BELL, 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: 12/14/19
Signature

Sworn to (or affirmed) before me this 14 day of December, 2019

_____ OFC. Carver #471
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

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

PBSO CASE # 19-148207 PBSO ZONE 3-13

AGENCY CASE # 19007329 CRASH CASE # 89411963

TIME OF STOP/CRASH 00:37 DATE 12/14/2019 DAY SATURDAY

SUBJECT'S NAME AMATO (LAST) RACHEL (FIRST) LYNN (MID) RACE W SEX F

HGT 503 WGT 140 DOB 03/02/1993

LOCATION CENTRAL BLVD/DONALD ROSS RD, PALM BEACH GARDENS, FL 33410

ARRESTING OFFICER'S NAME & ID Ofc. Cameron Carver #471 AGENCY PBGPD

DIVISION: Traffic Unit

NOTIFIED BY COMMO YES

ARRIVAL AT FACILITY 02:15

ARREST TIME 01:36

BREATH RESULTS:

.120

.116

BREATH TEST OPERATOR: 8656

TESTING FACILITY TASK REPORT

AGENCY: PBG

SUBJECT: AMATO, RACHEL L

CASE NUMBER: 19-148207

DATE: 12/14/19

VIDEO TAPE NUMBER: N/A

BEGINNING TIME: 0237

ENDING TIME: 0251

BREATH TESTS RESULTS: 1) .120 TIME 0244 A.M./P.M. 2) .116 TIME 0247 A.M./P.M.

3) N/A TIME XX A.M./P.M. 4) N/A TIME XX A.M./P.M.

BREATH OPERATOR: J. BELL #8656

MAINTENANCE TECHNICIAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: MUMBLED

ATTITUDE: TALKATIVE, COOPERATIVE

CLOTHING: PURPLE CROP TOP, BLUE JEAN SKIRT, BLACK SNEAKERS

MEDICAL CONDITIONS: NONE

MEDICATIONS: ADDERALL

OTHER: EYES: BLOODSHOT, GLASSY

ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE COMING FROM BREATH

COMMENTS: ARRIVED AT CENTER A/O BEGAN 20 MIN OBSERVATION AT 0215 HRS

SUBJECT STATED SHE WOULD NOT TAKE BREATH TEST

A/O READ I.C AND EXPLAINED

SUBJECT STATED SHE UNDERSTOOD I.C. AND AGREED TO TAKE BREATH TEST

A/O READ RIGHTS

SUBJECT STATED SHE UNDERSTOOD HER RIGHTS

TECH READ BREATH TEST RESULTS

SUBJECT STATED SHE UNDERSTOOD BREATH TEST RESULTS

SUBJECT DECLINED TO ANSWER ANY QUESTIONS

WITNESS LIST

CASE NUMBER: 19007329

ARRESTING OFFICER: Ofc. Cameron Carver
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. Dean Morea #517
ADDRESS: 10500 N. Military Trail, Palm Beach Gardens, FL 33410
PHONE NUMBERS (HOME) N/A (WORK) (561) 799-4445
CAN TESTIFY TO: SCENE SAFETY OFFICER

NAME: Ofc. Kristin Slaughter #500
ADDRESS 10500 N. Military Trail, Palm Beach Gardens, FL 33410
PHONE NUMBERS (HOME) N/A (WORK) (561) 799-4445
CAN TESTIFY TO: SCENE SAFETY OFFICER / SEARCH OF AMATO

NAME: Carla Spalding
ADDRESS 1856 N Nob Hill Road #421, Plantation, FL 33322
PHONE NUMBERS (HOME) 561-628-7200 (WORK)
CAN TESTIFY TO:

NAME:
ADDRESS
PHONE NUMBERS (HOME) (WORK)
CAN TESTIFY TO:

NAME:
ADDRESS
PHONE NUMBERS (HOME) (WORK)
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NAME:
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PHONE NUMBERS (HOME) (WORK)
CAN TESTIFY TO:

NAME:
ADDRESS
PHONE NUMBERS (HOME) (WORK)
CAN TESTIFY TO:

SUBJECT: Amato, Rachel L CASE NUMBER: 19007329

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: Ofc. Carver #471

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

SUBJECT: Amato, Rachel L CASE NUMBER: 19007329

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 DC Coroner Carver of the PB Gardens PD.

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) Refd 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.

Read on Scene & Read on Camera

SUSPECT'S SIGNATURE: (X)

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

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:	

REVIEW COMPLETED BY

Booking Number: 2019039900	**Date:** 12/15/2019
	Specialist Name/ID: AM/31562