J#0156405 PCH#2097

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

ADMINISTRATIVE

OBTS Number	Agency ORI Number	Agency Name	Agency Report Number (N.T.A.'s only)
	FLO 500000	PALM BEACH COUNTY SHERIFF'S OFFICE	06- 18-139601

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

Weapon Seized / Type: 2 | 1. Yes 2. No | NONE

Multiple Clearance Indicator: 01

Location of Arrest (Including Name of Business)	Location of Offense (Business Name, Address)
FOREST HILL BLVD / SOUTHERN BLVD	FOREST HILL BLVD / SOUTHERN BLVD

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
11/01/2018	0146					WEST WAY TOWING

DEFENDANT

Name (Last, First, Middle): JARRIEL JR ROBERT JOHN
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	8/28/64	6'02"	210	BLUE	BROWN	MED	MED

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description): TATTOO - RIGHT INNER BICEP - "AJ"

Marital Status: Single | Religion: CHRISTIAN | Indication of: Alcohol Influence [ ] 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
5963 QUEEN ANN RD.	WEST PALM BEACH,	FL.	33415	(561) 504-7395	2

Permanent Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Address Source
,				( )	DEFENDANT VERBAL

Business Address (Name, Street)	(City)	(State)	(Zip)	Phone	Occupation
				( )	SOFTWARE SALES

DL Number, State	INS Number	Place of Birth (City, State)	Citizenship
J640-770-64-308-0 [redacted]		WEST PALM BEACH, FL.	U.S.

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:

Address (Street, Apt. Number)	(City)	(State)	(Zip)	Residence Phone	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 [X] N	316.193(1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N	NONE	18-139601		

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 / 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

CRIMINAL JUSTICE COMPLEX / 3228 GUN CLUB ROAD, WPB, FL 33406

Court Date and Time: Month NOVEMBER Day 29 Year 2018 Time 8:30 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, THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED

X _____ 11/01/2018
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

Name of Arresting Officer (Print): INV. P. ZEITZ I.D. #: 24970

Name Verification (Printed by Arrestee): X (PRINT)

Intake Deputy I.D. # Pouch #: 2097

Transporting Officer: INV. P. ZEITZ ID #: 24970 Agency: PBSO

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 #148 REV. 6/97

NOT A CERTIFIED COPY

SHARON R. BOCK, CLERK & COMPTROLLER PALM BEACH COUNTY, FLORIDA BY _____ DEPUTY CLERK 2018 NOV -1 AM 9:24

SCANNED NOV 06 2018

OBTS Number

PROBABLE CAUSE AFFIDAVIT

1 Arrest 3 Request For Warrant 2 NTA 4 Request For Capias [1] Juvenile [ ]

Agency ORI Number	Agency Name	Agency Report Number
FLO 5 0 0 0 0 0	PALM BEACH COUNTY SHERIFF'S OFFICE	06 18-139601

Charge Type (Check as many as apply): [ ] 1 Felony [ ] 2 Traffic Felony [ ] 3 Misdemeanor [X] 4 Traffic Misdemeanor [ ] 5 Ordinance [ ] 6 Other

Special Notes: SUP PC

Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth
Jarriel Robert	W	M	8/28/1964

Charge	Charge
D.U.I	
Charge	Charge

Victim Name (Last, First, Middle)	Race	Sex	Date of Birth
State of Florida			

Local Address (Street, Apt Number)	City	State	Zip	Phone	Address Source

Business Address (Street, Apt Number)	City	State	Zip	Phone	Occupation

The undersign 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

[X] 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 (described) investigation

On the 1st day of November 20 18 at 1:15 [X] AM [ ] PM

While driving east on State Rd 80 I saw a black Ford Explorer driving East. The Explore made a right turn not in the turn lane to go south onto Forest Hill Blvd. I followed the Explorer south at which time it puled over to the outside lane, stopping in the road with the tires partially on the curb. I approached the vehicle and saw that Robert Jarriel (identified by his FLorida DL) was in the driver's seat. An unknown odor of alcohol came from Jarriel. His face was flushed with blood shot eyes, he also slurred his words. I asked Jarriel were he had come from, he stated his sister's residence in West Palm Beach. I explained to Jarriel that he was on State Rd 80 between Wellington and Loxahatchee. Jarriel then stated he was at Duffy's and had did have a few drinks. DUI investigation Zeltz came out to conduct a DUI investigation.

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The foregoing instrument was sworn to and affirmed before me this 1st day of November 20 18 , by

Name of Notary Public / Clerk of Court / Officer (F S S 117 00)	Name of Arresting/Investigating Officer
D/S P. Zeltz 24970	D/S F. Schofield 8842
Signature of Notary Public / Clerk of Court / Officer (F S S 117 00)	Signature of Arresting/Investigating Officer

SCANNED
NOV 06 2018

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 1st DAY OF NOVEMBER 20 18, AT 0115 AM PM

SUBJECT: JARRIEL JR ROBERT JOHN CASE NUMBER: 18-139601

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: INV. P. ZEITZ

PERSONAL CONTACT

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

On 11/1/18 at approximately 01:27hrs, I was called to the scene of a traffic stop near the intersection of Southern Blvd and Forest Hill Blvd, which is located in the Village of Wellington, Palm Beach County, Florida. I arrived at the scene at approximately 01:34hrs. D/S Schofield #8842 relayed to me, and completed a written signed sworn supplemental Probable Cause Affidavit, that he had stopped the defendant's vehicle, a black Ford Explorer bearing FL tag L794Z, because the defendant made an improper right turn while traveling East on Southern Blvd onto Forest Hill Blvd. The defendant made the turn from the middle through lane of travel. D/S Schofield noticed that the defendant had articulable indicators of impairment, so he called for a DUI unit to conduct a possible DUI investigation. D/S Schofield identified the defendant, to me, as the driver/sole occupant of the vehicle, at the time of the stop.

OBSERVATION OF DRIVER:

Upon making contact with the driver who was identified by his Florida driver license as Robert J Jarriel Jr, I immediately detected an obvious and strong odor of an unknown alcoholic beverage emitting from his person and face area. This odor intensified as I spoke to him. Jarriel Jr. had glassy, glazed, and blood shot eyes. Jarriel's speech was slurred, slow, thick, and at times difficult to understand. His movements were slow and deliberate. Jarriel was wearing a blue and white shirt, denim pants, and black shoes.

DRIVER'S STATEMENTS:

Pre-Miranda: Jarriel stated that he was coming from Duffy's restaurant in Riverbridge. He said that he was going home, (Which is in the opposite direction.) When asked if he had anything to drink, he said that he had one (1) beer only. When asked to step out of the vehicle to participate in roadside tasks, Jarriel refused and said that he would not be doing anything. He was informed of his Taylor Warnings and asked if he would participate a second time. He again refused.

Jarriel refused breath testing when asked to submit lawful samples of his breath. After being read implied consent, he again refused. Question and Answer portion was refused.

ODORS:

A strong and obvious odor of an unknown alcoholic beverage was emitting from his person and face area which intensified as I spoke to him.

GENERAL OBSERVATIONS

SPEECH: **Jarriel's speech was slurred, slow, and thick, and at times difficult to understand.**

ATTITUDE: **Sleepy, Refused immediately**

CLOTHING: **White/blue shirt, denim pants and black shoes**

MEDICAL/OTHER:

STATE OF FLORIDA
COUNTY OF PALM BEACH

INV. P. ZEITZ
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 1st day of NOVEMBER 20 18 by INV. P. ZEITZ

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

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

Notary Public State of Florida
Paris Pound
My Commission GG 200028
Expires 03/25/2022

SCANNED
NOV 06 2018

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SUBJECT: JARRIEL JR ROBERT CASE NUMBER 18-139601

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:

Defendant declined to participate in roadside tasks. Defendant was advised of his Taylor Warnings and again declined.

WALK & TURN:
Not performed.

ONE LEG STAND:
Not performed.

FINGER TO NOSE:
Not performed.

ROMBERG ALPHABET:
Not performed.

BREATH TEST RESULTS: REFUSED

STATE OF FLORIDA
COUNTY OF PALM BEACH

INV. P. ZEITZ
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to (or affirmed) and subscribed before me this 1st day of NOVEMBER 2018 by INV. P. ZEITZ

(Print name of Arresting/Investigative Officer) who is personally known to me and/or produced identification. Type of identification produced PERSONALLY KNOWN LEO

Notary Public, Clerk of Court, Officer (F.S.S 117 10)

Notary Public State of Florida
Paris Pound
My Commission GG 200028
Expires 02/25/2022

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SCANNED
NOV 06 2018

WITNESS LIST

CASE NUMBER: 18-139601

ARRESTING OFFICER: INV. P. ZEITZ

ADDRESS: 3228 GUN CLUB ROAD WEST PALM BEACH, FL 33406

PHONE NUMBERS (HOME): _____ (WORK) (561) 688-4001

CAN TESTIFY TO: SEE DUI PROBABLE CAUSE AFFIDAVIT & OFFENSE REPORT

NAME: D/S SCHOFIELD #8842

ADDRESS: 3228 GUN CLUB RD. WEST PALM BEACH, FL. 33406

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

CAN TESTIFY TO: REASON FOR STOP AND SIGNS OF IMPAIRMENT

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) 0 (WORK) 0

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

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CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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SCANNED
NOV 16 2018

TESTING FACILITY TASK REPORT

AGENCY: [illegible]

SUBJECT: [illegible] CASE NUMBER: [illegible]

DATE: 11/1/[illegible] VIDEO TAPE NUMBER: N/A

BEGINNING TIME: [illegible] ENDING TIME: [illegible]

BREATH TESTS RESULTS: 1) [illegible] TIME [illegible] A.M./P.M. 2) N/A TIME — A.M./P.M.

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

BREATH OPERATOR: [illegible]

MAINTENANCE TECHNICIAN: [illegible]

TESTING OFFICER'S OBSERVATIONS

REFUSED

SPEECH: [illegible]

ATTITUDE: [illegible]

CLOTHING: [illegible]

MEDICAL CONDITIONS: [illegible]

MEDICATIONS: [illegible]

OTHER: [illegible]

COMMENTS: [illegible]

REFUSED

SCANNED
NOV 05 2018

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SUBJECT: [illegible] CASE NUMBER: [illegible]

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 [illegible] of the [illegible].

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) [illegible]

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.

SCANNED
NOV 06 2018

SUSPECT'S SIGNATURE: (X) [illegible]

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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: _____

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SCANNED
NOV 06 2018

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

I, INV P. ZEITZ #24970 , a duly certified Law Enforcement Officer or Correctional Officer,
(Name of Officer reading Implied Consent Warning)

am a member of PALM BEACH COUNTY SHERIFF'S OFFICE , and I do swear
(Name of law enforcement agency)

or affirm that on or about the 1st day of NOVEMBER , 20 18 , at 01:46 ☐ P.M ☒ A.M.

DRIVER ROBERT JOHN JARRIEL Jr. ,
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# J640-770-64-308-0 , state of FLORIDA , was placed under lawful arrest for

the offense of DRIVING UNDER THE INFLUENCE by INV. P. ZEITZ #24970 and
(Name of Arresting Officer)

issued Citation # A2G3SMP .

That on or about the 1st day of NOVEMBER , 20 18 , at 02:46 ☐ 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 of Law Enforcement Officer or
Correctional Officer

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

Notary Public State of Florida
Pans Pound
My Commission GG 200028
Expires 03/25/2022

(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before
me this 1st day of NOVEMBER , 20 18 ,
by INV. P. ZEITZ #24970 ,
who is personally known to me or ~~who has~~ produced
PERSONALLY KNOWN as identification

Notary Public

The foregoing instrument was sworn and subscribed before me:

Signature of Attesting Officer

Title

Date 11/01/2018

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. 10/2016)

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SCANNED
NOV 06 2018

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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SCANNED
NOV 06 2018

REVIEW COMPLETED BY

Booking Number: 2018036482	**Date:** 11/01/2018
	Specialist Name/ID: LR/ #6673