

0510112

19CT14707

972

ARREST / NOTICE TO APPEAR  
Juvenile Referral Report

Check if Supplement is Attached  
1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias

Juvenile  N

OBTS Number	Agency ORI Number FLD, 5 0 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 0 6 - 1 1 9 - 0 0 4 7 2 7 ( 1 1 1 )	
Charge Type: Check as many as apply.	<input type="checkbox"/> 1. Felony	<input checked="" type="checkbox"/> 3. Misdemeanor	<input type="checkbox"/> 5. Ordinance	# Weapon Seized		Multiple Clearance Indicator
Location of Arrest (Including Name of Business) Northlake Blvd / N Congress Ave		Location of Offense (Business Name, Address) Northlake Blvd / N Congress Ave				
Date of Arrest 08.10.19	Time of Arrest 2:12.6	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle

Name (Last, First, Middle) Brown, Ronald, Lee		Alias (Name, DOB, Soc. Sec. #, Etc.)							
Race W - White B - Black	I - American Indian O - Oriental/Asian	Sex W M	Date of Birth 08.26.90	Height 5'07	Weight 200	Eye Color Blue	Hair Color Brown	Complexion Light	Build Med
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)				Marital Status Single	Religion Atheist	Indication of Alcohol Influence Drug Influence Y <input checked="" type="checkbox"/> N <input type="checkbox"/> Unk <input type="checkbox"/>			
Local Address (Street, Apt. Number) 4784 Central Blvd		(City) Jupiter	(State) FL	(Zip) 32088	Phone 4349423175	Residence Type: 1. City 2. County 3. Florida 4. Out of State			
Permanent Address (Street, Apt. Number) 4784 Central Blvd		(City) Jupiter	(State) FL	(Zip) 32058	Phone ( )	Address Source			
Business Address (Name, Street)		(City)	(State)	(Zip)	Phone ( )	Occupation Engineer			
D/L Number, State B650737903060 FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) Bedford VA		Citizenship US	

Co-Defendant (Last, First, Middle)	Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large	<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile
Co-Defendant (Last, First, Middle)	Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large	<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile

<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other:	Name (Last) (First) (Middle)	Residence Phone ( )
Address (Street, Apt. Number) (City) (State) (Zip)		Business Phone ( )
Notified by: (Name)	Date	Time
Released To: (Name)	Relationship	Juvenile Disposition 1. Handled/Processed within Dept. and Released. 2. TOT HRS/DYS 3. Incarcerated
The above address was provided by <input type="checkbox"/> defendant and / or <input type="checkbox"/> 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. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No (Reason)		School Attended
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No	Description of Property	Value of Property

Drug Activity N. N/A F. 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
Charge Description Driving under Influence		Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 3161193111		Violation of ORD #				
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond OR				
Charge Description DUI over .15		Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 3161193114		Violation of ORD #				
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond OR				
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation of ORD #				
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond				
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation of ORD #				
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond				

Location (Court, Room Number, Address) 3188 PGA Blvd, PB6, FL 33410		North County Courthouse	
Court Date and Time Month Sept Day 11 Year 2019 Time 1000 (A.M.) P.M.			
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	

HOLD for other agency	Signature of Arresting Officer Johnston	Name Verification (Printed by Arrestee) AUG 11 AM 12:33
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal	Name of Arresting Officer (Print) Johnston	(PRINT)
<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:	I.D. # 451	PAGE
Intake Deputy DS/MS 7622	Transporting Officer Johnston	Agency PB6
I.D. #	Pouch #	Witness here if subject signed with an

**D.U.I. PROBABLE CAUSE AFFIDAVIT**

ON THE 10TH DAY OF AUGUST 20 13 AT 2110 AM PM  
SUBJECT: BROWN, RONALD, LEE CASE NUMBER: 19004727  
AGENCY: PALM BEACH GARDENS POLICE DEPT. ARRESTING OFFICER: JOHNSTON 451

**PERSONAL CONTACT**

DRIVING PATTERN: ACTUAL PHYSICAL CONTROL, PHYSICAL EVIDENCE OR STATEMENTS PUTTING DEF. BEHIND WHEEL OF VEHICLE:  
OBSERVED VEHICLE TRAVEL THROUGH SOLID RED LIGHT INDICATOR. VEHICLE SPED UP TO APPROXIMATELY 60 MPH IN A 45 MPH ZONE. VEHICLE WAS CROSSING LANE INDICATORS MULTIPLE TIMES FOR APPROXIMATELY 1 MILE.

OBSERVATION OF DRIVER:

DRIVER HAD WATERY EYES, SLURRED SPEECH AND HAD DIFFICULTY LOCATING INSURANCE INFORMATION. DRIVER WAS NOT WEARING HIS RIGHT SHOE. WHEN DRIVER EXITED VEHICLE HE WAS SWAYING WHILE STANDING.

DRIVER'S STATEMENTS:

ADVISED THAT HE HAD DRINKS WHILE AT WORK. ADVISED OF RED LIGHT VIOLATION, DRIVER STATED HE "NORMALLY STOPS" FOR RED LIGHTS.

ODORS:

ODOR OF UNKNOWN ALCOHOLIC BEVERAGE EMITTING FROM HIS PERSON.

**GENERAL OBSERVATIONS**

SPEECH: SLURRED, SLOW

ATTITUDE: COMPLIANT, APOLOGETIC

CLOTHING: BLACK SHIRT, BLACK SHORTS, NO SHOES

MEDICAL/OTHER:

STATE OF FLORIDA  
COUNTY OF PALM BEACH

The foregoing instrument was sworn to or affirmed and subscribed before me this 10 day of August 20 13 by \_\_\_\_\_

(Print name of Arresting Investigative Officer), who is personally known to me and/or produces certification. Type of identification presented \_\_\_\_\_

Notary Public, Clerical Court Officer (F.S. 117.10)



SCANNED  
AUG 11 2013

SUBJECT: BROWN, RONALD, LEE

CASE NUMBER: 19004727

**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:**

SWAYING WHILE IN STARTING POSITION AND WHILE CONDUCTING THE EXERCISE. INITIALLY SUBJECT FOLLOWED THE STIMULUS WITH ENTIRE HEAD, WAS REMINDED TO USE EYES ONLY.

**WALK & TURN:**

SUBJECT WAS UNABLE TO MAINTAIN STARTING POSITION. STEPPED OFF LINE MULTIPLE TIMES, MISSED HEEL TO TOE MULTIPLE TIMES, COUNTED TO 10 STEPS, USED ARMS FOR BALANCING.

**ONE LEG STAND:**

SUBJECT SHUFFLED TRYING TO MAINTAIN BALANCE. SUBJECT USED HIS ARMS FOR BALANCE. SUBJECT DID NOT POINT FOOT AND SUBJECT DROPPED FOOT.

**FINGER TO NOSE:**

NOT STANDARDIZED, NOT PERFORMED.

**ROMBERG/ALPHABET:**

NOT STANDARDIZED, NOT PERFORMED.

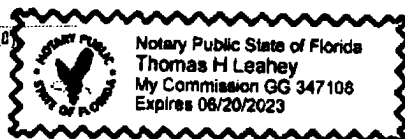
**BREATH TEST RESULTS:**

STATE OF FLORIDA  
COUNTY OF PALM BEACH

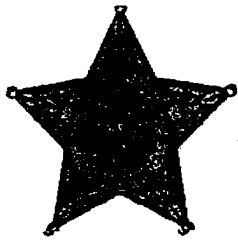
(Signature of Arresting/Investigative Officer)  
The foregoing instrument was notarized or sworn before me this 10 day of August 2019 by

who is personally known to me and/or produced identification. Type of identification produced \_\_\_\_\_

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



SCANNED  
AUG 11 2019



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

PBSO CASE # 19-102716 PBSO ZONE 3-13

AGENCY CASE # 19004727 CRASH CASE # N/A

TIME OF STOP/CRASH 2110 DATE 8/10/19 DAY Saturday

SUBJECT'S NAME Ronald Brown RACE W SEX M

HGT 5'07 WGT 200 DOB 8/26/90

LOCATION Northlake Blvd / N. Congress Ave

ARRESTING OFFICER'S NAME & ID Johnston 451 AGENCY PBG

DIVISION: Road Patrol

NOTIFIED BY COMMO 2147

ARRIVAL AT FACILITY 2203

BREATH RESULTS:

Arrest Time 2126

1. .254
2. .252
3. N/A
4. N/A

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

NOT A CERTIFIED COPY

SCANNED  
 AUG 11 2019

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: 08/10/2019

Date of Last Agency Inspection: 07/19/2019

Observation Period Began: 22:03

Subject's Name: RONALD LEE I BROWN

DOB: 08/26/1990 Sex: M

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	22:27
	Air Blank	0.000	22:28
	Control Test	0.080	22:28
	Air Blank	0.000	22:29
	Subject Sample #1	0.254	22:30
	Air Blank	0.000	22:30
	Air Blank	0.000	22:32
	Subject Sample #2	0.252	22:33
	Air Blank	0.000	22:33
	Control Test	0.078	22:34
	Air Blank	0.000	22:34
	Diagnostics Check	OK	22:34

Cylinder Lot: 00919080A3  
Exp: 03/05/2021

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 SAMANTHA M PALMER, 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: \_\_\_\_\_

Signature

Date: 8/10/19

Sworn to (or affirmed) before me this 10 day of August, 2019

Signature of Notary Public-State of Florida

OFC. Johnston #451  
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.

# TESTING FACILITY TASK REPORT

AGENCY: PBG/JOHNSTON

SUBJECT: BROWN, RONALD LEE II

CASE NUMBER: 19-102716

DATE: Aug 10, 2019

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 2225

ENDING TIME: 2237

BREATH TESTS RESULTS: 1) .254 TIME 2230 A.M.  P.M.  2) .252 TIME 2233 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: RAMBLING, TALKATIVE, COOPERATIVE, SARCASTIC

CLOTHING: BLACK SHIRT, BLACK SHORTS, RED SNEAKERS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

## OTHER:

EYES: GLASSY AND BLOODSHOT, ODOR OF UNKNOWN ALCOHOLIC BEVERAGES COMING FROM BREATH,

## COMMENTS:

ARRESTING OFFICER CONDUCTED THE 20 MINUTE OBSERVATION BEGINNING AT 2203  
SUBJECT AGREED TO TAKE BREATH TEST  
AND PROVIDED TWO ADEQUATE SAMPLES SUCCESSFULLY  
TECH READ RESULTS  
SUBJECT STATED HE UNDERSTOOD RESULTS  
A/O READ RIGHTS  
SUBJECT STATED HE UNDERSTOOD RIGHTS  
AND REFUSED QUESTIONING WITHOUT COUNSEL

SCANNED  
AUG 11 2019

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

SEARCHED  
SERIALIZED  
INDEXED  
AUG 11 2013

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: 2019026187	Date: 8/11/2019
	Specialist Name/ID: M. Tooks #8557

2019026187  
8/11/2019