

050926

NR

RCH 1149

ARREST / NOTICE TO APPEAR

Juvenile Referral Report

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

1

Juvenile

N

ADMINISTRATIVE	OBTS Number		Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06-19090697	
	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 NONE		Multiple Clearance Indicator 01			
DEFENDANT	Location of Arrest (Including Name of Business) BIG BLUE TRACE / DOUBLETREE TRL. WELLINGTON, FL 33414				Location of Offense (Business Name, Address) BIG BLUE TRACE/DOUBLETREE TRL. WELLINGTON, FL 33414			
	Date of Arrest 07/07/2019	Time of Arrest 2051	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle	
CO-DEF	Name (Last, First, Middle) DOBSON ZANE GABRIEL				Alias (Name, DOB, Soc. Sec. #, Etc.)			
	Race W - White I - American Indian B - Black O - Oriental/Asian W	Sex M	Date of Birth 03/02/1984	Height 6'00"	Weight 175LBS	Eye Color BLUE	Hair Color BROWN	Complexion LIGHT
JUVENILE	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) TAT - LEFT CHEST - SUN AROUND NIPPLE				Mental Status Single		Religion MORMON	
	Local Address (Street, Apt. Number) 13764 CARLTON ST. WELLINGTON, FL 33414				Phone (561) 768-3111		Residence Type: 1. City 2. County 3. Florida 4. Out of State 1	
CHARGE	Permanent Address (Street, Apt. Number) (City) (State) (Zip)				Phone (---) ---		Address Source FL D/L	
	Business Address (Name, Street) (City) (State) (Zip)				Phone ()		Occupation SOFTWARE DEVELOPMENT	
CHARGE	D/L Number, State D125-987-84-082-0, FL		Soc. Sec. Number [REDACTED]		INS Number		Place of Birth (City, State) PALM BEACH GARDENS, FL	
	Citizenship U.S.		Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth	☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile
CHARGE	Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth	☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile		
	Parent ☐ Legal Custodian ☐ Other		Address (Street, Apt. Number) 1-OR (City) (State) (Zip)		Residence Phone ()		Business Phone ()	
CHARGE	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		
CHARGE	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			
CHARGE	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 Description DRIVING UNDER THE INFLUENCE		Counts 1	Domestic Violence ☐ Y ☒ N	Statute Violation Number 316.193(1)		Violation of ORD #	
CHARGE	Drug Activity N	Drug Type N	Amount / Unit NONE	Offense # 19090697	Warrant / Capias Number		Bond 2019 JUL - 8 AM 6:51	
	Charge Description		Counts	Domestic Violence ☐ Y ☒ N	Statute Violation Number		Violation of ORD #	
CHARGE	Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond	
	Charge Description		Counts	Domestic Violence ☐ Y ☒ N	Statute Violation Number		Violation of ORD #	
CHARGE	Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond	
	Charge Description		Counts	Domestic Violence ☐ Y ☒ N	Statute Violation Number		Violation of ORD #	
CHARGE	Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond	
	Charge Description		Counts	Domestic Violence ☐ Y ☒ N	Statute Violation Number		Violation of ORD #	
NOTICE TO APPEAR	Location (Court Room Number, Address) CRIMINAL JUSTICE COMPLEX / 3228 GUN CLUB ROAD, WPB, FL 33406							
	Court Date and Time Month AUGUST Day 1 Year 2019 Time 8:30 AM ☒ PM							
ADMIN	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) [Signature]				Date Signed 07/07/2019			
ADMIN	HOLD for other Agency Name		Signature of Arresting Officer [Signature]		Name Verification (Printed by Arrestee) [Signature]			
	☐ Dangerous ☐ Suicidal ☐ Resisted Arrest ☐ Other		Name of Arresting Officer (Print) INV. ZEITZ		I.D. # 24970		(PRINT)	
ADMIN	Intake Deputy D/S B. SHATARA #7623		ID # 24970		Pouch #		Agency PBSO	
	Transporting Officer INV. ZEITZ		ID # 24970		Agency PBSO		Witness here if subject signed YES ☒ NO ☐	

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 7TH DAY OF JULY 20 19, AT 1958hrs AM PM
SUBJECT: DOBSON ZANE GABRIEL CASE NUMBER: 19090697

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

PERSONAL CONTACT

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

On the above date and time, I was patrolling within the Village of Wellington when a call of a possible hit and run was dispatched in the area. I responded to Big Blue Trace and Doubletree Trl where I observed a deputy stop a white Ford pickup truck bearing FL tag HWQV60, which was confirmed as the vehicle involved in the crash.

I met with W/M Ronald Rothenberg, who was the driver of the other vehicle involved in the crash. Rothenberg stated that they were traveling Southbound on Stribling Way from Forest Hill Blvd. There was a disabled vehicle/trailer on the right side of the road. Rothenberg slowed and moved slightly left within his lane so he could give the people in the disabled vehicle safe space to operate. He said the white Ford struck his driver side mirror with its driver side mirror. Both vehicles stopped and the drivers had a heated exchange. Rothenberg said that he could smell what he believed to be alcohol coming from the other driver. When he advised the driver of the white Ford that he was going to call the police, the other driver got back into this vehicle and left the area.

When the white Ford was stopped, the driver and sole occupant of the truck was identified by his FL driver license as W/M Zane Dobson. Rothenberg positively identified Dobson as the driver of the white Ford at the time of the crash.

OBSERVATION OF DRIVER:

Upon making contact with the driver who was identified by his Florida driver license as Zane Dobson, I immediately detected an obvious and strong odor of an unknown alcoholic beverage emitting from his person and breath. This odor intensified as I spoke to him. He had glassy, glazed, and blood shot eyes. Dobson's speech was slurred, slow and thick. Dobson's movements were slow, deliberate, and lethargic with poor coordination. He had an unsteady gait while walking to my patrol vehicle and had difficulty following directions given to him. Dobson was wearing a blue shirt, khaki shorts, and gray shoes.

DRIVER'S STATEMENTS:

Post Miranda - Stated that he was not at fault for the crash. Dobson confirmed that he was driving at the time of the crash. He also said he had four (4) beers at Bonefish Grill while watching the US Women's National Soccer match.

Dobson refused to provide breath samples after Implied Consent and refused to participate in the question and answer portion after being read Miranda.

ODORS:

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

GENERAL OBSERVATIONS

SPEECH: Dobson's speech was slurred, slow, and thick.

ATTITUDE: Polite and cooperative

CLOTHING: Blue shirt with khaki shorts and gray shoes

MEDICAL/OTHER: SEE BAT REPORT

STATE OF FLORIDA
COUNTY OF PALM BEACH

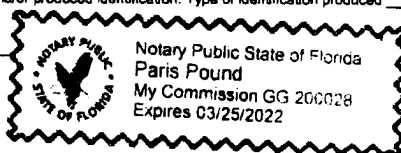
INV. ZEITZ

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 7th day of JULY 20 19 by INV. 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)



SCANNED
JUL 10 2019

SUBJECT DOBSON

ZANE

CASE NUMBER 19090697

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:

Dobson would sway roughly in a side to side front to back pattern throughout the task. Dobson was reminded numerous times to track the pen with his eyes only. He failed to keep his head still while tracking the stimulus.

WALK & TURN:

I explained and demonstrated the instructions for the "Walk & Turn" to Dobson who stated that he understood. During the task, I observed him to sway roughly in a side to side, front to back pattern throughout the demonstration phase. During the task, Dobson would stop walking to steady himself. He missed heel-to-toe steps and stepped off the line. Dobson performed an improper turn. Additionally, he performed the incorrect number of steps on both the initial and return set of steps.

ONE LEG STAND:

I explained and demonstrated the instructions for the "One Leg Stand" to Dobson who stated that he understood. During the task, I observed him to sway roughly in a side to side, front to back pattern throughout the demonstration phase. He continued to sway while balancing on one leg.

FINGER TO NOSE:

I explained and demonstrated the instructions for the "Finger to Nose" task to Dobson who stated that he understood. During the task, I observed him to sway roughly in a side to side, front to back pattern throughout the demonstration phase. Dobson's index finger did not touch the tip of the nose on 5 of 6 attempts. He searched for the tip of his nose using the finger to find their nose prior to touching the tip. Dobson used the hand other than that which was called before self-correcting. The sequence used for this task was L, R, L, R, R, L.

ROMBERG ALPHABET:

I explained and demonstrated the instructions for the "Rhomberg Alphabet" task to Dobson who stated that he understood. During the task, I observed him to sway roughly in a side to side, front to back pattern throughout the demonstration phase. He would sway more than 2 inches.

BREATH TEST RESULTS: REFUSED

STATE OF FLORIDA
COUNTY OF PALM BEACH

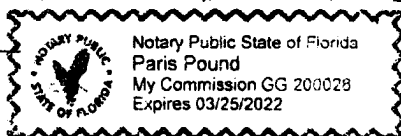
INV. ZEITZ

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 7th day of JULY, 2019 by INV. 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)

SCANNED
JUL 10 2019

Per FL statute 837.012, whoever knowingly makes a false statement under oath shall be guilty of a misdemeanor of the first degree punishable by imprisonment up to 1 year.

R351-737-64-165-



CASE #:	19090697	ZONE:	8-11	SUSPECT:	Zane Dobson	DATE & TIME OF ORIGINAL EVENT/OFFENSE:	7/7/19 1958
EVENT TYPE:	PUT			DEPUTY:	Zane	ID#:	24976

LAST NAME: <u>Bothenberg</u>		FIRST NAME: <u>Ronald</u>		MIDDLE INITIAL: <u>S</u>	RACE: <u>W</u>	SEX: <u>M</u>
DATE OF BIRTH: (MM/DD/YYYY) <u>05/05/1964</u>		YOUR HEIGHT: <u>5'10</u>	YOUR WEIGHT: <u>210</u>	YOUR HAIR COLOR: <u>Brown</u>		YOUR EYE COLOR: <u>Brown</u>
YOUR HOME ADDRESS: <u>1614 Graham Dr.</u>			☐ CHECK IF HOMELESS	CITY: <u>Wellington</u>	STATE: <u>FL</u>	ZIP: <u>33414</u>
YOUR WORK NAME & ADDRESS: <u>CP</u>			☐ CHECK IF UNEMPLOYED OR RETIRED	CITY: <u>CP</u>	STATE: <u>FL</u>	ZIP: <u>FL</u>
WORK PHONE: ☐ CHECK IF NONE <u>561-722-9700</u>		CELL PHONE: ☐ CHECK IF NONE <u>()</u>		HOME PHONE: ☐ CHECK IF NONE <u>()</u>		EMAIL: ☐ CHECK IF NONE

YOUR NAME: Rommel Rothenberg

DO HEREBY VOLUNTARILY MAKE THE FOLLOWING STATEMENT WITHOUT THREAT, COERCION, OFFER OF BENEFIT, OR FAVOR BY ANY PERSONS WHOMSOEVER...

Turning down striding, people were changing a tire off on the right side of the road and we hit mirror to mirror with an oncoming white Ford pickup. We both stopped, the guy had a few nasty words to say and smelled of Alcohol and then took off after I told him to stay because I was calling the police.

PAGE 1 OF 1

I SWEAR AND AFFIRM THIS AND/OR THE ATTACHED STATEMENTS ARE CORRECT AND TRUE. YOUR SIGNATURE: X 	☐ DEPUTY SHERIFF ☐ NOTARY PUBLIC FSS: 117.10 SWORN TO AND SUBSCRIBED BEFORE ME TODAY: DATE: 7/17/19 TIME: 3:49 SIGNATURE:  ALINID: 8953
---	---

IF YOU DO NOT WISH TO PROSECUTE, COMPLETE THE ABOVE STATEMENT, READ THIS DISCLAIMER AND INITIAL BELOW: I AM OF LEGAL AGE AND I AM THE REPORTED VICTIM OF A CRIME UNDER FLORIDA LAW. I HEREBY STATE THAT I **WILL NOT** COOPERATE ANY FURTHER WITH THE INVESTIGATION OF THE ALLEGED CRIME. I FURTHER RELEASE THE PALM BEACH COUNTY SHERIFF'S OFFICE OF ANY PRESENT OR FUTURE RESPONSIBILITY AS TO MY CASE. I ACKNOWLEDGE THAT I UNDERSTAND MY RIGHTS AS A CRIME VICTIM, PARTICULARLY REGARDING VICTIM COMPENSATION ELIGIBILITY, WHICH INCLUDES SUCH BENEFITS AS REIMBURSEMENT FOR: DISABILITIES, LOST WAGES, LOSS OF SUPPORT, MEDICAL, DENTAL, MENTAL HEALTH COUNSELING AND FUNERAL EXPENSES. I AM AWARE I MAY BE GIVING UP THESE

WITNESS LIST

CASE NUMBER: 19090697

ARRESTING OFFICER: INV. 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: RONALD ROTHENBERG

ADDRESS: 1614 GRANTHAM DR. WELLINGTON, FL. 33414

PHONE NUMBERS (HOME) 561-722-9200 (WORK) _____

CAN TESTIFY TO: _____

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) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

SCANNED
JUL 10 2019

TESTING FACILITY TASK REPORT

AGENCY: PBSO

SUBJECT: DOBSON, ZANE G CASE NUMBER: 19-090697

DATE: 07/07/19 VIDEO TAPE NUMBER: N/A

BEGINNING TIME: 21:37 ENDING TIME: 21:40

BREATH TESTS RESULTS: 1) R TIME 21:38 A.M./PM 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: P. POUND #24631

MAINTENANCE TECHNICIAN: J. KARLECKE #6461

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: CALM, TALKATIVE

CLOTHING: TAN SHORTS, LIGHT BLUE SHIRT, BROWN SNEAKERS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER: EYES GLASSY AND BLOODSHOT

COMMENTS: ARRIVED AT CENTER A/O BEGIN THE 20
MINUTE OBSERVATION PERIOD AT 21:15 HRS.

A. REFUSED TO TAKE TEST.

A/O. READ I/C

A. STATED HE UNDERSTOOD I/C AND WOULD REFUSE
TEST AGAIN.

A/O. READ RIGHTS

A. STATED HE UNDERSTOOD RIGHTS.

A/O. ATTEMPTED QTA

A. REFUSED QUESTIONS.

REFUSED

REFUSED

SCANNED

SUBJECT: BO DOBSON, ZANE G

CASE NUMBER: 19-090697

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) _____

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.

SUSPECT'S SIGNATURE: (X) _____

READ ON CAMERA

SUBJECT: DOBSON, ZANE G CASE NUMBER: 19-090697

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: _____

WHITE - STATE ATTY.

YELLOW - DHSMV

PINK - CENTRAL RECORDS

GOLD - JAIL

SCANNED
JUL 10 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	☐		Other:	
	☐		Other:	

REVIEW COMPLETED BY

Booking Number: 2019022179

Date: 07/08/2019

Specialist Name/ID: AM/31562

SCANNED

JUL 10 2019