

0518349

Rough Arrest Only

### ARREST / NOTICE TO APPEAR Juvenile Referral Report

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

OBTS Number		Agency ORI Number <b>FL0500000</b>		Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>		Agency Report Number <b>06-20-250033</b>	
Charge Type: Check as many as apply.		<input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony		<input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other	
Location of Arrest (Including Name of Business) <b>1675 NW 4<sup>TH</sup> AVE #114, BOCA RATON, FL 33432</b>		Location of Offense (Business Name, Address) <b>1675 NW 4<sup>TH</sup> AVE #114, BOCA RATON, FL 33432</b>		Weapon Seized/Type 1. Yes 2. No		Multiple Clearance Indicator	
Date of Arrest <b>09/03/2020</b>	Time of Arrest <b>0830</b>	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle	
Name (Last, First, Middle) <b>FORD, ALECK</b>				Alias (Name, DOB, Soc. Sec. #, Etc.)			
Race W - White B - Black	I - American Indian O - Oriental/Asian	Sex <b>M</b>	Date of Birth <b>10/18/1983</b>	Height <b>5'10"</b>	Weight <b>220</b>	Eye Color <b>BROWN</b>	Hair Color <b>BALD</b>
Complexion <b>LIGHT</b>		Build <b>AVERAGE</b>		Marital Status <b>SINGLE</b>		Religion <b>UNKNOWN</b>	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)				Indication of Alcohol Influence <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Unk. <input type="checkbox"/>		Drug Influence <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Unk. <input type="checkbox"/>	
Local Address (Street, Apt. Number) <b>1675 NW 4<sup>TH</sup> AVE #114</b>		(City) <b>BOCA RATON</b>	(State) <b>FL</b>	(Zip) <b>33432</b>	Phone ( )	Residence Type 1. City 3. Florida 2. County 4. Out of State <b>1</b>	
Permanent Address (Street, Apt. Number) <b>SAME AS LOCAL</b>		(City)	(State)	(Zip)	Phone ( )	Address Source <b>FL DL</b>	
Business Address (Street, Apt. Number)		(City)	(State)	(Zip)	Phone ( )	Occupation	
D/L Number, State <b>F630-000-83-378-0</b>		Soc. Sec. Number		INS Number		Place of Birth <b>PERU</b>	
Citizenship <b>US</b>		Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth	
<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile		<input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor					
Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile	
<input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor							
<input type="checkbox"/> Parent Name (Last) (First) (Middle)		Residence Phone		SEP 3 10 27			
<input type="checkbox"/> Legal Custodian		Business Phone					
<input type="checkbox"/> Other							
Address (Street, Apt. Number) (City) (State) (Zip)							
Notified by: (Name)		Date	Time	Juvenile Disposition 1. Handled/Processed within Dept. and Released		2. TOT HRS/CYF 3. Incarcerated	
Released To: (Name)		Relationship	FCIC/NCIC	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 informed of any change of address.				School Attended		Grade	
<input type="checkbox"/> Yes, by (Name)		<input type="checkbox"/> No: (Reason)					
Recovery Information							
0. N/A		1. Voluntary		2. Located Not Returned		3. Hospitalized	
4. HRS Custody		5. Law Enforcement Custody		6. Returned to Parent		7. Deceased	
8. Other							
Drug Activity		S. Sell		R. Smuggle		K. Dispense/ Distribute	
N. N/A		B. Buy		D. Deliver		M. Manufacture Produce/ Cultivate	
P. Possess		T. Traffic		E. Use		Z. Other	
Drug Type		N. N/A		A. Amphetamine		B. Barbituate	
C. Cocaine		E. Heroin		H. Hallucinogen		M. Marijuana	
S. Synthetic		P. Paraphernalia/ Equipment		U. Unknown Z. Other			
Charge Description <b>POSSESSION OF SEXUAL PERFORMANCE BY A CHILD</b>		Counts <b>1</b>	Domestic Violence <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Statute Violation Number <b>827.071 (4)</b>		Violation of ORD #
Drug Activity <b>N</b>	Drug Type <b>N</b>	Amount/Unit	Offense # <b>20-250033</b>		Warrant/Capias Number		Bond
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		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"/> Yes <input type="checkbox"/> No		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"/> Yes <input type="checkbox"/> No		Statute Violation Number		Violation of ORD #
Drug Activity	Drug Type	Amount/Unit	Offense #		Warrant/Capias Number		Bond
<input type="checkbox"/> Instruction No. 1 Mandatory Appearance in Court		Location (Court, Room Number, Address)					
<input type="checkbox"/> Instruction No. 2 You need not appear in Court but must Comply with instructions on reverse side.		Court Date and Time Month Day Year Time 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 <b>X Det. K. White</b>		Name Verification (Printed by Arrestee) (PRINT)			
Name:		Name of Arresting Officer (Print) <b>K. WHITE</b>		ID # <b>8718</b>		PAGE	
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest		Intake/Deputy		I.D. #		Witness here is subject signed with an "X".	
<input type="checkbox"/> Subjugal <input type="checkbox"/> Other:		Pouch # <b>1009</b>		Transporting Officer <b>MS GRANT C. THY</b>		Agency <b>PD50</b>	
1 OF 1							

AND BOND

0518349 50-2020-CF-007252-AMB

Rough Arrest Only

ADMINISTRATION		ARREST / NOTICE TO APPEAR Juvenile Referral Report				1. Arrest 3. Request for Warrant 2. N.T.A. 4. Request for Capias		1 Juvenile			
OBTS Number		Agency ORI Number <b>FL0500000</b>		Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>		Agency Report Number <b>06-20-250033</b>					
Charge Type: Check as many as apply.		<input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony		<input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Weapon Seized/Type 1. Yes 2. No			
Location of Arrest (Including Name of Business) <b>1675 NW 4<sup>TH</sup> AVE #114, BOCA RATON, FL 33432</b>		Location of Offense (Business Name, Address) <b>1675 NW 4<sup>TH</sup> AVE #114, BOCA RATON, FL 33432</b>		Date of Arrest <b>09/03/2020</b>		Time of Arrest <b>0830</b>		Booking Date			
Name (Last, First, Middle) <b>FORD, ALECK</b>		Sex <b>M</b>		Date of Birth <b>10/18/1983</b>		Height <b>5'10"</b>		Weight <b>220</b>			
Race W - White I - American Indian B - Black O - Oriental/Asian <b>W</b>		Eye Color <b>BROWN</b>		Hair Color <b>BALD</b>		Complexion <b>LIGHT</b>		Build <b>AVERAGE</b>			
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		Marital Status <b>SINGLE</b>		Religion <b>UNKNOWN</b>		Indication of: Alcohol Influence <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> Unk. Drug Influence <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> Unk.					
Local Address (Street, Apt. Number) <b>1675 NW 4<sup>TH</sup> AVE #114</b>		(City) <b>BOCA RATON</b>		(State) <b>FL</b>		(Zip) <b>33432</b>		Phone ( )			
Permanent Address (Street, Apt. Number) <b>SAME AS LOCAL</b>		(City)		(State)		(Zip)		Phone ( )			
Business Address (Street, Apt. Number)		(City)		(State)		(Zip)		Phone ( )			
D/L Number, State <b>F630-000-83-378-0</b>		Soc. Sec. Number		INS Number		Place of Birth <b>PERU</b>		Citizenship <b>US</b>			
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor			
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor			
<input type="checkbox"/> Parent Name (Last) (First) (Middle)		Residence Phone		<input type="checkbox"/> Legal Custodian		<input type="checkbox"/> Other					
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/CYF 3. Incarcerated			
Released To: (Name)		Relationship		FCIC/NCIC		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 informed of any change of address: <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)		School Attended		Grade							
Recovery Information 0. N/A 1. Voluntary 2. Located Not Returned 3. Hospitalized 4. HRS Custody 5. Law Enforcement Custody 6. Returned to Parent 7. Deceased 8. Other		Drug Activity S. Sell R. Smuggle K. Dispense/ Distribute M. Manufacture/ Produce/ Cultivate Z. Other N. N/A B. Buy D. Deliver P. Possess T. Traffic E. Use		Drug Type N. N/A A. Amphetamine B. Barbituate C. Cocaine E. Heroin H. Hallucinogen M. Marijuana O. Opium/Deriv.		P. Paraphernalia/ Equipment S. Synthetic U. Unknown Z. Other					
Charge Description <b>Possession of 10 or more files of child pornography</b>		Counts <b>10</b>		Domestic Violence <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Statute Violation Number <b>775.0847(2)</b>		Violation of ORD #			
Drug Activity <b>N</b>		Drug Type <b>N</b>		Amount/Unit		Offense # <b>20-250033</b>		Warrant/Capias Number			
Charge Description <b>Tampering with evidence</b>		Counts <b>1</b>		Domestic Violence <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Statute Violation Number <b>918.13 (1)(a)</b>		Violation of ORD #			
Drug Activity <b>N</b>		Drug Type <b>N</b>		Amount/Unit		Offense # <b>20-250033</b>		Warrant/Capias Number			
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Yes <input type="checkbox"/> No		Statute Violation Number		Violation of ORD #			
Drug Activity		Drug Type		Amount/Unit		Offense #		Warrant/Capias Number			
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Yes <input type="checkbox"/> No		Statute Violation Number		Violation of ORD #			
Drug Activity		Drug Type		Amount/Unit		Offense #		Warrant/Capias Number			
Instruction No. 1 Mandatory Appearance in Court		Instruction No. 2 You need not appear in Court but must Comply with instructions on reverse side.		Location (Court, Room Number, Address)		Court Date and Time Month Day Year Time 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 Name: <input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other:		Signature of Arresting Officer <b>X K. White</b> Name of Arresting Officer (Print) <b>K. WHITE</b>		Name Verification (Printed by Arrestee) (PRINT)		I.D. # <b>8718</b>		PAGE <b>1 of 1</b>			
Intake Deputy <b>Smith SD</b>		I.D. #		Pouch #		Transporting Officer <b>Grant C</b>		I.D. # <b>7149</b>			

OBTS Number		<b>PROBABLE CAUSE AFFIDAVIT</b>				1	Juvenile	N
		1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias						
Agency ORI Number <b>FLO 5 0 0 0 0 0</b>		Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>			Agency Report Number <b>06 -20-250033</b>			
Charge Type: <input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance Check as many: <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other					Special Notes:			
Defendant's Name (Last, First, Middle) <b>FORD, ALECK</b>					Race <b>W</b>	Sex <b>M</b>	Date of Birth <b>10/18/1983</b>	
Charge Description <b>POSSESSION OF 10 OR MORE FILES OF CHILD PORNOGRAPHY</b>				Charge Description				
Charge Description <b>TAMPERING WITH EVIDENCE</b>				Charge Description				
Victim's Name (Last, First, Middle) <b>STATE</b>					Race	Sex	Date of Birth	
Victim's Local Address (Street, Apt. Number)			(City)	(State)	(Zip)	Phone	Address Source	
Victim's Business Address (Name, Street)			(City)	(State)	(Zip)	Phone	Occupation	
<p>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:</p> <p><input type="checkbox"/> committed the below acts in my presence <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts</p> <p><input type="checkbox"/> confessed to _____ admitting to the below facts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the 3<sup>RD</sup> day of September, 2020 at 08:30 <input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest).</p>								

**NARRATIVE:**

I am part of a National Task Force known as the South Florida Internet Crimes Against Children (ICAC). This task force investigates internet crimes against children, child exploitation, and related cases.

On 03/05/2020, I located internet protocol (IP) address 66.176.185.226 in a database maintained by law enforcement, and utilized by federal and state law enforcement agencies in child exploitation investigations nationwide. This database maintains a log of IP addresses that have been previously involved in the possession and distribution of videos/images involving the sexual conduct of a child via peer-to-peer networks. The subject who was sharing the files was using a username of "John2".

Millions of computer users throughout the world use peer-to-peer (P2P) file sharing networks to share files containing music, graphics, movies and text. These networks have also become a popular way to download and distribute child pornography. P2P file sharing programs allow groups of computers using the same file sharing network and protocols to connect directly to each other to share files. A person interested in sharing child pornography with others in the P2P network, needs only place those files in his/her "shared" folder(s). Those child pornography files are then available to all users of the P2P network for download regardless of their physical location.

I viewed a sample of the videos from the user at the above IP address. This file depicted child pornography as defined by Florida Statute.

**VIDEO FILE NAME:** [JulyJailbait] - [jjclubumn7vkhyyuw.onion] - LolitaLover - My slave - season 04 part 04 - bdsm pthc 2019.mp4.

OBTS Number		PROBABLE CAUSE AFFIDAVIT				1	N
		1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias				Juvenile	
Agency ORI Number <b>FLO 5 0 0 0 0 0</b>		Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>			Agency Report Number <b>06 -20-250033</b>		
Charge Type: <input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance Check as many: <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other					Special Notes:		
Defendant's Name (Last, First, Middle) <b>FORD, ALECK</b>					Race <b>W</b>	Sex <b>M</b>	Date of Birth <b>10/18/1983</b>
Charge Description <b>POSSESSION OF CHILD PORNOGRAPHY W/ INTENT TO PROMOTE</b>				Charge Description			
Charge Description				Charge Description			
Victim's Name (Last, First, Middle) <b>STATE</b>					Race	Sex	Date of Birth
Victim's Local Address (Street, Apt. Number)			(City)	(State)	(Zip)	Phone	Address Source
Victim's 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:							
<input type="checkbox"/> committed the below acts in my presence		<input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts					
<input type="checkbox"/> confessed to _____ admitting to the below facts.		<input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.					
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Millions of computer users throughout the world use peer-to-peer (P2P) file sharing networks to share files containing music, graphics, movies and text. These networks have also become a popular way to download and distribute child pornography. P2P file sharing programs allow groups of computers using the same file sharing network and protocols to connect directly to each other to share files. A person interested in sharing child pornography with others in the P2P network, needs only place those files in his/her "shared" folder(s). Those child pornography files are then available to all users of the P2P network for download regardless of their physical location.

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**VIDEO FILE NAME:** [JulyJailbait] - [jjclubumn7vkhyuw.onion] - LolitaLover - My slave - season 04 part 04 - bdsm pthc 2019.mp4.

This color video depicts a white female, approximately 10-13 years of age who is nude and her wrists and ankles are strapped down. The child is also blindfolded and there is a device around her face that his holding her mouth in the open position. The child has clothespins on both of her nipples and an adult white male can be seen striking the child on the nipples and vagina with a whip and rubbing his hand on her body.

## NARRATIVE CONTINUATION

This color video depicts a white female, approximately 10-13 years of age who is nude and her wrists and ankles are strapped down. The child is also blindfolded and there is a device around her face that is holding her mouth in the open position. The child has clothespins on both of her nipples and an adult white male can be seen striking the child on the nipples and vagina with a whip and rubbing his hand on her body.

A search of a publicly available online database indicated that the target IP address 66.176.185.226 was registered to Comcast Internet Services. On 03/05/2020, I had a subpoena issued to Comcast for the IP address 66.176.185.226 and requested the subscriber information and IP logs from 01/04/2020 through 02/23/2020, which specifically corresponded to the dates and times that this IP was seen as having been available for sharing the files.

Comcast responded to the subpoena and reported the account as active under the following subscriber:

Subscriber Name: Aleck Ford  
Service Address: 1675 NW 4<sup>th</sup> Avenue, Apt. 114, Boca Raton, FL 33432

Comcast provided an IP History/Current IP list, which lists IP address 66.176.185.226 leased to this subscriber since 09/11/2019.

Through investigation, it was learned that Aleck Ford is an elementary school teacher in Palm Beach County.

On August 31, 2020, the Honorable Judge John Kastrenakes granted a business Search Warrant for address 1675 NW 4<sup>TH</sup> Avenue #114, Boca Raton, FL 33432.

On September 3, 2020, the search warrant was executed and contact was made with Aleck Ford. PBSO TAC Units who executed the warrant advised me that it took approximately 5 minutes for Ford to answer the door. Ford was told that we had a Search Warrant for the property. Post Miranda, I asked Ford if the phone number he provided was a cell phone and he said that it was. I then asked Ford if the phone was password protected at which time he invoked his rights and refused to answer any further questions.

During the search of the apartment, detectives found multiple devices, including an Acer laptop. Detectives also found a USB drive in the toilet. The USB drive was retrieved and will be analyzed at a later time.

An on-scene forensic triage of the Acer laptop revealed a file directory for "John2". This is the same username that was used on the peer-to-peer file -sharing program. Also on the Acer laptop I observed multiple files deemed to be child erotica in addition to file names indicative of child pornography.

Based on my investigation, Aleck Ford did possess with the intent to promote 1 video containing the sexual abuse of a child violating FSS 827.071(4). According to Florida State Statute, to "promote" means to procure, manufacture, issue, sell, give, provide, lend, mail, deliver, transfer, transmute, publish, distribute, circulate, disseminate, present, exhibit, or advertise or to offer or agree to do the same". Ford was arrested and transported to Palm Beach County Jail without incident.

## NARRATIVE CONTINUATION

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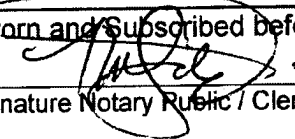

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Sworn and Subscribed before me: <i>Det. A. Woolf #18341</i>	<i>Det. K. White</i>
Signature Notary Public / Clerk of Court / Officer	Signature of Arresting / Investigating Officer
DETECTIVE ALEX WOOLF #18341	DETECTIVE KELLI WHITE #8718
Name of Notary Public / Clerk of Court / Officer	Name of Officer (Please Print)
<i>9/3/20</i>	<i>9/3/20</i>
Date	Date

## NARRATIVE CONTINUATION

Additional forensic analysis was later conducted on the USB drive that was found in the toilet. The USB drive was found to contain operating system files, the Emule file-sharing program, and over 30 images depicting the sexual exploitation of a child in violation of FSS 775.0847(2). Since it appears that Ford attempted to damage the USB drive by putting it in the toilet, he is also being charged with Tampering with Evidence in violation of FSS 918.13(1)(a).

Sworn and Subscribed before me: 	
Signature Notary Public / Clerk of Court / Officer	Signature of Arresting / Investigating Officer
DETECTIVE TERESA GRIMALDI #24094	DETECTIVE KELLI WHITE #8718
Name of Notary Public / Clerk of Court / Officer	Name of Officer (Please Print)
9/3/2020	9/3/20
Date	Date

NOT A CERTIFIED COPY



**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.	5-6
	<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"/>	Other:		
	<input type="checkbox"/>	Other:		

REVIEW COMPLETED BY

Booking Number: 2020020872	Date: 09/04/2020
	Specialist Name/ID: T Howard/7185