



TARA S. GREEN, CLAY COUNTY CLERK OF COURT AND COMPTROLLER

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**REQUEST FOR REDACTION OF EXEMPT PERSONAL
INFORMATION INSTRUCTIONS PACKET**

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Please complete every page of the packet and return the original(s) to the Recording Department. If you are married, please print a separate form for your spouse and have them complete it as well. Please make sure to have the second page notarized and all information completed. Page three (3) is where you look up your name in the Official Records on our website www.clayclerk.com. You must list exactly what you are requesting to be redacted (i.e. Deeds, Mortgages, etc.). The name of the document and a Book and Page is all that is required. Please sign and complete the bottom of this page. Pages four (4) and five (5) look alike but are for two separate agencies; please complete both pages. Pages six (6) and seven (7) are for the Supervisor of Elections. Page eight (8) is for the Division of Corporation. Page (9) if for informational purposes only and page ten (10) is for the Florida Department of Highway Safety and Motor Vehicles.

If you have any questions or concerns please feel free to contact the Clay County Clerk's Recording Department at (904) 529-4097 or thrasherm@clayclerk.com.

**REQUEST FOR REDACTION OF EXEMPT PERSONAL
INFORMATION FROM NON-JUDICIAL PUBLIC RECORDS**

I request to have exempt personal information removed from records maintained by the Clay County Clerk of the Circuit Court and Comptroller's Office as a (select all that apply):

- Government agency employee in the category checked below.
- Spouse of a government agency employee in the category checked below.
- Child of a government agency employee in the category checked below.
- Protected individual requesting redaction in the category checked below.

Statutory Basis for Removal:

<input type="checkbox"/> Victim of a violent crime [s. 119.071(2)(j)1, F.S.]* <input type="checkbox"/> Victim of an incident of mass violence [s. 119.071(2)(o), F.S.]** <p align="center">ACTIVE/CURRENT OR FORMER:</p> <input type="checkbox"/> Sworn or civilian law enforcement personnel [s. 119.071(4)(d)2.a., F.S.] <input type="checkbox"/> Correctional or probation officer [s. 119.071(4)(d)2.a., F.S.] <input type="checkbox"/> Dept. of Children and Families investigator [s. 119.071(4)(d)2.a., F.S.] <input type="checkbox"/> Dept. of Health investigator of child abuse or neglect [s. 119.071(4)(d)2.a., F.S.] <input type="checkbox"/> Dept. of Revenue or local government child support collection/enforcement personnel [s. 119.071(4)(d)2.a., F.S.] <input type="checkbox"/> Dept. of Financial Services nonsworn investigative personnel [s. 119.071(4)(d)2.b., F.S.] <input type="checkbox"/> Office of Financial Regulation's Bureau of Financial Investigations nonsworn investigative personnel [s. 119.071(4)(d)2.c., F.S.] <input type="checkbox"/> Firefighter [s. 119.071(4)(d)2.d., F.S.] <input type="checkbox"/> Supreme Court Justice, district court of appeal judge, circuit court judge, county court judge [s. 119.071(4)(d)2.e., F.S.] <input type="checkbox"/> State attorney or asst. state attorney [s. 119.071(4)(d)2.f., F.S.] <input type="checkbox"/> Statewide prosecutor or asst. statewide prosecutor [s. 119.071(4)(d)2.f., F.S.] <input type="checkbox"/> Local government agency or water mgmt. district director, asst. director, manager, asst. manager of human resources, labor relations, or employee relations [s. 119.071(4)(d)2.h., F.S.] <input type="checkbox"/> Code enforcement officer [s. 119.071(4)(d)2.i., F.S.] <input type="checkbox"/> Guardian ad litem [s. 119.071(4)(d)2.j., F.S.] <input type="checkbox"/> Dept. of Juvenile Justice juvenile probation officer or supervisor; detention superintendent or asst.; juvenile justice detention officer, residential officer, counselor, or supervisor; human services counselor or senior counselor administrator; rehabilitation therapist; social services counselor [s. 119.071(4)(d)2.k., F.S.] <input type="checkbox"/> Public defender or asst. public defender [s.119.071(4)(d)2.l., F.S.] <input type="checkbox"/> Criminal conflict or civil regional counsel or assistant [s. 119.071(4)(d)2.l., F.S.] <input type="checkbox"/> Dept. of Business and Professional Regulation investigator or inspector [s. 119.071(4)(d)2.m., F.S.] <input type="checkbox"/> Dept. of Health personnel involved in social security disability eligibility, investigation or prosecution of complaints, and inspection [s. 119.071(4)(d)2.o., F.S.] <input type="checkbox"/> Impaired practitioner consultants retained by an agency or their employee with duties determining a person's skill to practice licensed professions [s. 119.071(4)(d)2.p., F.S.]	<input type="checkbox"/> Emergency medical technician or paramedic [s. 119.071(4)(d)2.q., F.S.] <input type="checkbox"/> Agency office inspector general or internal audit personnel with auditing or potential criminal investigation/disciplinary duties [s. 119.071(4)(d)2.r., F.S.] <input type="checkbox"/> Addiction treatment facility director, manager, supervisor, nurse, or clinical employee [s. 119.071(4)(d)2.s., F.S.]** <input type="checkbox"/> Child advocacy center director, manager, supervisor, or clinical employee [s. 119.071(4)(d)2.t., F.S.] <input type="checkbox"/> Child Protection Team member as described in s. 39.303 with investigatory or multidisciplinary case review team duties [s. 119.071(4)(d)2.t., F.S.] <input type="checkbox"/> Domestic violence advocate or staff [s. 119.071(4)(d)2.u., F.S.] <input type="checkbox"/> Dept. of Agriculture and Consumer Services inspector or investigator [s. 119.071(4)(d)2.v., F.S.] <input type="checkbox"/> Florida Gaming Control Commission commissioner [s. 119.071(4)(d)2.x., F.S.] <input type="checkbox"/> U.S. attorney, asst. attorney, Court of Appeal judge, district judge, or magistrate [s. 119.071(5)(i)1., F.S.]** <input type="checkbox"/> Military personnel authorized to access secret information or servicemember of a special operations force as defined in s. 943.10(22) [s. 119.071(5)(k), F.S.]** <input type="checkbox"/> Public guardian or employee with fiduciary responsibility [s. 744.21031, F.S.] <p align="center">CURRENT:</p> <input type="checkbox"/> Judicial assistant [s. 119.071(4)(d)2.e., F.S.] <input type="checkbox"/> General or special magistrate [s. 119.071(4)(d)2.g, F.S.] <input type="checkbox"/> Judge of compensation claims or administrative law judge of DOAH [s. 119.071(4)(d)2.g, F.S.] <input type="checkbox"/> Child support enforcement hearing officer [s. 119.071(4)(d)2.g, F.S.] <input type="checkbox"/> County tax collector [s.119.071(4)(d)2.n., F.S.] <input type="checkbox"/> County or city attorney or asst. or deputy county or city attorney who does not qualify as a candidate for election to public office [s. 119.071(4)(d)2.w., F.S.] <input type="checkbox"/> Clerk of the Circuit Court, deputy Clerk, or Clerk personnel [s. 119.071(4)(d)2.y., F.S.] <p>*Attach official verification of crime (i.e. police report or injunction). Five-year renewable exemption. **Names of spouse/children for marked individuals are not exempt.</p> <p>NOTE: Grantor, grantee, or party names cannot be removed from Official Records unless they contain the street address.</p>
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REQUESTOR CONTACT INFORMATION

Printed Name: _____

Telephone Number: _____

Email Address: _____

INFORMATION TO BE REDACTED

Address where I (or qualifying spouse or child) **reside** (physical, mailing, or street address):

The following additional address information for address where I reside: legal property description (consider title implications), parcel identification number, plot identification number, neighborhood name and lot number, GPS coordinates, other description property information that may reveal home address:

Telephone Number(s) _____

Last Four of Social Security Number (**do not list full SSN**) _____

Date of Birth: _____

Name of Spouse and/or Children to be redacted***: _____

Place(s) of Employment/Location: _____

Name and Location of School/Daycare Facility of Child: _____

Personal Assets (*crime victim*): _____

WARNING: There may be consequences to redacting information on a public record, which is a risk undertaken by the requestor. Only the documents identified by the requestor will be redacted. Once redaction is requested and completed, future redactions require an additional redaction request. **However, grantor, grantee, or party names cannot be removed, unless the street address is included in the name, such as in a trust or LLC. (s. 28.2221(2)(b), F.S.)

PUBLIC RECORD: This form is itself a public record. If a copy of it is requested, all exempt information contained in this form will be redacted.

Documents Other than Official Records: _____

RELEASE FOR TITLE SEARCHES: an unredacted version of these documents may be provided to title insurers, agents or agencies and attorneys conducting title searches as authorized in s. 28.2221(6)(b), F.S.. Notice of any title search releases will be sent to the most recent address on the recorded documents or the redaction request provided by the requestor.

COURTESY NOTICE – RELEASE OF PRIOR REDACTIONS

If you have previously requested protection of a home address that is no longer your residence, you are required by Florida law to submit a written, notarized request to release the removed information. Please ask the Clerk of Court and Comptroller’s Office or recorder for the release form. Releases for other Florida counties must be submitted directly to that county.

AGREEMENT

I understand that this form itself is a public record. If a copy of it is requested, all exempt information contained herein will be redacted.

I agree to indemnify and hold harmless the Clay County Clerk of Court and Comptroller’s Office and its staff for any direct or indirect claims of damages that may arise in connection with this request for confidentiality. Further, I agree to personally identify those documents of record pertaining to me, my spouse, or my child(ren).

I understand that this packet will be forwarded to the Office’s of – **The Tax Collector, Property Appraiser, Supervisor of Elections and the Clay County Utility Authority.**

Signature of Individual: _____ Date: _____

STATE OF FLORIDA
COUNTY OF CLAY

Sworn to (or affirmed) and signed before me this _____ day of _____,
20____, by _____.

_____ Personally known to me or _____ who has produced _____
as identification.

(SEAL)

Signature of Notary Public/Deputy Clerk

Print, Type, or Stamp Name of Notary Public

**Request for Address Blocking
To the Clay County Property Appraiser's Office**

**PROPERTY I OWN IN CLAY COUNTY, FOR WHICH I HAVE
BEEN GRANTED HOMESTEAD EXEMPTION**

PARCEL ID# _____

NAME: _____

ADDRESS: _____

CITY, STATE ZIP: _____

PARCEL ID# _____

NAME: _____

ADDRESS: _____

CITY, STATE ZIP: _____

PARCEL ID# _____

NAME: _____

ADDRESS: _____

CITY, STATE ZIP: _____

**The Property Appraiser cannot be held responsible for blocking addresses or parcels not
listed above.**

**Request for Address Blocking
To the Clay County Tax Collector's Office**

**PROPERTY I OWN IN CLAY COUNTY, FOR WHICH I HAVE
BEEN GRANTED HOMESTEAD EXEMPTION**

PARCEL ID# _____

NAME: _____

ADDRESS: _____

CITY, STATE ZIP: _____

PARCEL ID# _____

NAME: _____

ADDRESS: _____

CITY, STATE ZIP: _____

PARCEL ID# _____

NAME: _____

ADDRESS: _____

CITY, STATE ZIP: _____

**The Tax Collector cannot be held responsible for blocking addresses or parcels not listed
above.**



FLORIDA DEPARTMENT OF STATE

PUBLIC RECORDS EXEMPTION REQUEST (REV. 08/2024)

Florida law allows certain persons to request that an agency not publicly disclose specific identification and/or location information contained in any of its agency records. Please refer to sections 119.071(2)(j), (4)(d), and (5)(i), 265.605, and 267.17, Fla. Stat., or other applicable statute for scope of protection which **may** include home address, phone numbers, photos, name of spouse and/or children, and their place of employment, and/or school or daycare care facility, and date of birth.

To request the exemption for information contained within records of the Department of State, please complete the form and return to: Secretary of State, c/o Public Records Custodian Director, R.A. Gray Building, 500 S. Bronough St., Tallahassee, FL 32399. For more information, contact 850-245-6536.

To request the claim for exemption extend to your spouse and/or children (not applicable for donor* or victim* exemptions) please submit a separate sheet with the name, date of birth, and relationship for purposes of identifying them in any public records within the custody of the Department. (If you have attached supplemental pages check here)

If you **have** any records with the **Division of Corporations** that include exempt information please check here and complete the Addendum for Exemption of Public Disclosure. Otherwise, there is no need to complete the Addendum for Exemption of Public Disclosure.

You will **only** be contacted if the information you provide is insufficient to identify you distinctly from someone else similarly named in the records or if the information provided is insufficient to demonstrate the applicability of a public records exemption.

I attest that I am an individual covered under Section 119.071, F.S., as, check the appropriate item (only one):

- | | | |
|--|----|---|
| <input type="checkbox"/> current | or | <input type="checkbox"/> former |
| <input type="checkbox"/> spouse of a current | or | <input type="checkbox"/> spouse of a former |
| <input type="checkbox"/> child of a current | or | <input type="checkbox"/> child of a former |

and I hereby request the exemption (check applicable exemption category):

- | | |
|--|---|
| <input type="checkbox"/> Addiction treatment facility, licensed pursuant to Chapter 397, F.S., directors, managers, supervisors, nurses, and clinical employees (s. 119.071(4)(d)2.s) | <input type="checkbox"/> Dept. of Revenue personnel or local government personnel whose duties relate to revenue collection and enforcement or child support enforcement. (s. 119.071(4)(d)2.a) |
| <input type="checkbox"/> Child advocacy center, meeting the standards set forth in Chapter 39, F.S., directors, managers, supervisors, and clinical employees and members of a Child Protection Team as set forth in s. 39.303, F.S. (s. 119.071(4)(d)2.t) | <input type="checkbox"/> Domestic violence centers, certified under Chapter 39, F.S., staff and domestic violence advocates as defined in s. 90.5036(1)(b), F.S. (s. 119.071(4)(d)2.u) |
| <input type="checkbox"/> Code Enforcement Officer (s. 119.071(4)(d)2.i) | <input type="checkbox"/> Emergency medical technicians or paramedics certified under Chapter 401, F.S (s. 119.071(4)(d)2.q) |
| <input type="checkbox"/> County Tax Collector (s. 119.071(4)(d)2.n) | <input type="checkbox"/> Firefighter certified in compliance with s. 633.408, F.S. (s. 119.071(4)(d)2.d) |
| <input type="checkbox"/> Dept. of Agriculture and Consumer Services inspectors and investigators (s. 119.071(4)(d)2.v.) | <input type="checkbox"/> Guardian ad litem (s. 119.071(4)(d)2.j) |
| <input type="checkbox"/> Dept. of Business and Professional Regulation-investigators and inspectors (s. 119.071(4)(d)2.m) | <input type="checkbox"/> Human resource, labor relations, or employee relations director, assistant director, manager or assistant manager of any local government agency or water management district (s. 119.071(4)(d)2.h) |
| <input type="checkbox"/> Dept. of Children and Family Services personnel whose duties involve investigation of abuse, neglect, exploitation, fraud, theft, or other criminal activities (s. 119.071(4)(d)2.a) | <input type="checkbox"/> Impaired practitioner consultants whose duties result in a determination of a person's skill and safety to practice a licensed profession (s. 119.071(4)(d)2.p) |
| <input type="checkbox"/> Dept. of Financial Services investigative personnel whose duties include the investigation of fraud, theft, workers' compensation coverage requirements and compliance, other related criminal activities, or state regulatory requirement violations (s. 119.071(4)(d)2.b) | <input type="checkbox"/> Inspector general employees or internal audit department employees whose duties include auditing or investigating waste, fraud, abuse, theft, exploitation, or other activities that could lead to criminal prosecution or administrative discipline (s. 119.071(4)(d)2.r) |
| <input type="checkbox"/> Dept. of Health personnel whose duties support the investigations of child abuse or neglect, determination of benefits, or the investigation, inspection, or prosecution of health care practitioners (s. 119.071(4)(d)2.a) | <input type="checkbox"/> Judge - district court of appeal, circuit court and county court, or justice of the Florida Supreme Court (s. 119.071(4)(d)2.e) |
| <input type="checkbox"/> Dept. of Health personnel whose duties include, or result in, the determination or adjudication of eligibility for social security disability benefits, the investigation or prosecution of complaints filed against health care practitioners, or the inspection of health care practitioners or health care facilities licensed by the Department of Health (s. 119.071(4)(d)2.o) | <input type="checkbox"/> Current judicial assistant (court employee assigned to the following class codes: 8140, 8150, 8310, and 8320) (s. 119.071(4)(d)2.e) |
| | <input type="checkbox"/> Judicial or quasi-judicial officer (general and special magistrate, judge of compensation claims, administrative law judge of the Division of Administrative Hearings, and child support enforcement hearing officer) (s. 119.071(4)(d)2.g) |

- Juvenile probation officer, juvenile probation supervisor, detention superintendent, assistant detention superintendent, senior juvenile detention officer, juvenile detention officer supervisor, juvenile detention officer, house parent I and II, house parent supervisor, group treatment leader, group treatment leader supervisor, rehabilitation therapist, and social services counselor of the Dept. of Juvenile Justice (s. 119.071(4)(d)2.k)
- Law enforcement personnel including correctional officers and correctional probation officers (s. 119.071(4)(d)2.a)
- Office of Financial Regulation, Bureau of Financial Investigations, investigative personnel whose duties include the investigation of fraud, theft, other related criminal activities, or state regulatory requirement violations (s. 119.071(4)(d)2.c.)
- Prosecutor (state attorney, assistant state attorney, statewide prosecutor, assistant statewide prosecutor) (s. 119.071(4)(d)2.f)
- Public defenders and criminal conflict and civil regional counsel (includes assistant public defenders, assistant criminal conflict and assistant civil regional counsel) (s. 119.071(4)(d)2.l)
- Commissioner of the Florida Gaming Control Commission (s. 119.071(4)(d)2.x)

- U.S. attorney or assistant attorney, U.S. appellate judge, U.S. district court judge and U.S. magistrate (By signature below, person certifies that reasonable efforts made to protect information from being publicly accessible by other means) (S. 119.071(5)(i))
- Current county attorney, assistant county attorney, deputy county attorney, city attorney, assistant city attorney, or deputy city attorney (s. 119.071(4)(d)2.w)
- Current clerk of circuit court, deputy clerk of circuit court, or clerk of circuit court personnel (s. 119.071(4)(d)2.y)
- Person employed by the United States Department of Defense who is authorized to access information that is deemed "secret" or "top secret" by the Federal Government or who is a servicemember of a special operations force (s. 119.071(5)(k))
- Victim* of sexual battery, aggravated child abuse, aggravated stalking, harassment, aggravated battery or domestic violence [Attach official verification that crime occurred. 5-year exemption. Contact Attorney General's Office (850-414-3300) about eligibility for separate Address Confidentiality Program.] See s. 741.465, Fla. Stat]
- Other (must list applicable statute _____)

Printed Name: _____ Date of Birth: _____ Phone Number: _____

Home Address: _____

Signature: _____ Date: _____

Pursuant to Section 119.071(4)(d)3., F.S., your request must be notarized. The requestor hereby swears or affirms, under penalty of perjury, that the information contained in the foregoing public record exemption form is true and correct.

REQUIRED NOTARIZATION SECTION

STATE OF FLORIDA

COUNTY OF _____

The foregoing Public Records Exemption Request was sworn to (or affirmed) and subscribed before me by means of

physical presence or online notarization, this _____ day of _____, 20_____, by

_____, who is:

_____ personally known to me OR

_____ produced the following identification: _____

Signature of Notary Public - State of Florida

Print, Type, or Stamp Commissioned Name of Notary Public

**ADDENDUM FOR EXEMPTION OF PUBLIC DISCLOSURE
ONLY FOR DIVISION OF CORPORATIONS RECORDS**

Before the Florida Department of State, Division of Corporations can act on your request it needs the following additional information from you:

1. Complete home address to be redacted: _____

2. Are you now or have you ever been listed on the Division of Corporations' records as a Registered Agent?

Yes No

If you answered "Yes" to this question and the address to be redacted is the Registered Agent address, you must provide **an alternate Florida Street Address that can replace the one we currently have in our records.**

3. Is your home address the principal place of business address for a corporation, limited liability company, or limited partnership, for which you wish to have redacted?

Yes No

If you answered "Yes" to this question and the address to be redacted is the **principal place of business address for a corporation, limited liability company, or limited partnership,** you must provide **an alternate Street Address that can replace the one we currently have in our records.**

4. Are you now or have you ever been listed on the Division of Corporations records as:

- | | | |
|---|------------------------------|-----------------------------|
| a. An officer or director of a corporation? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| b. A managing member or manager of a limited liability company? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| c. A general partner in a limited partnership? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| d. An owner of a fictitious name? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| e. A partner in a general partnership? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| f. A notary? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| g. An owner of a trademark registration? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If you answered "Yes" to one or more of the above questions, you must provide an alternative address to replace the one we currently have in our records. This address may be a P.O. Box; however, if the address being replaced is for a Registered Agent or a principal place of business, please see numbers 2 or 3 above or call the Division of Corporations at 850-245-6999 for further information.

5. Have you ever had a judgment lien filed against you that would have been filed in this office after October 1, 2001?

Yes No

Name/Names of entity, registration, or notary. Please provide corporate document number or, if applicable, your Notary ID number, if known:

Alternate address to replace the one current on our records. See requirements listed above.

Florida Department of Highway Safety and Motor Vehicles
**Public Official, Law Enforcement Agency Personnel and Others Request to
Withhold Personal Information**

Please submit this form to: Florida Highway Safety and Motor Vehicles
2900 Apalachee Pkwy, Mail Stop 28
Tallahassee, FL 32399
or email to: PublicOfficialBlock@flhsmv.gov

Please return your request with documentation indicating your eligibility and statutory basis for exemption.

This request form and corresponding privacy protection applies to current and former sworn or civilian law enforcement personnel, public officials (active or former), and other identified individuals, their spouses, and children, who are eligible as outlined in Section 119.071 and 744.21031 Florida Statutes.

Those who are eligible can request that the Florida Highway Safety and Motor Vehicles (FLHSMV) withhold personal information contained in their driver/identification, vehicle/vessel records maintained by this department. FLHSMV maintains both a residential address and mailing address for each individual. This privacy protection applies only to the residential address but not the mailing address. If you do not provide FLHSMV with a separate mailing address, your residential address will be listed as your mailing address. Mailing addresses are routinely released for official business regarding motor vehicle or driver license information. Therefore, if you wish to ensure your residential address is blocked and not displayed on your driver license/identification card, you may make an appointment with your local driver license issuance office to provide a separate mailing address and obtain a replacement driver license/identification card.

Please **PRINT** the personal information requested below. The information required to complete this form is located on the Florida driver license or identification card of the requester. In all cases, the date of birth must match the date of birth on the Florida driver license or identification card record. Complete additional forms or attach additional sheet(s) as needed to include eligible family members. We must have a statement of eligibility and documentation that indicates eligibility.

Florida Department of Highway Safety and Motor Vehicles
**Public Official, Law Enforcement Agency Personnel and Others Request to
 Withhold Personal Information**

Section 1: Personal Information for Individual Submitting Request				
Name as It Appears on Driver License (First, Full Middle/Maiden, & Last Name)				Date of Birth
FL DL/ID Number	Street Address	City	State	Zip Code
Statutory Basis for Exemption				

Section 2: Family Member/Members (Spouse/Child) Information	
FL DL/ID Number	Date of Birth
FL DL/ID Number	Date of Birth
FL DL/ID Number	Date of Birth

Section 3: Affirmation			
Under penalty of perjury, I affirm that I qualify for the exemption claimed above pursuant to section 119.071, Florida Statutes.			
Print/Type/Stamp Requestor's Name		Signature of Requestor	
STATE OF _____, COUNTY OF _____ Sworn to (or affirmed) and subscribed before me this _____ day of _____, 20_____, by _____. <input type="checkbox"/> Personally Known OR <input type="checkbox"/> Produced Identification Type of Identification Produced: _____			
Notary Public (Print Name)	Notary Public Signature	My Commission Expires:	Stamp or Seal

Florida Department of Highway Safety and Motor Vehicles
**Public Official, Law Enforcement Agency Personnel and Others Request to
Withhold Personal Information**

Please refer to section 119.071, Florida Statutes for specific information regarding each exemption. Also, please note that the spouses and children of the personnel described below are afforded certain protections pursuant to Section 119.071.

- Current or former sworn or civilian law enforcement personnel, including correctional and correctional probation officers, personnel of Department of Children and Families whose duties include the investigation of abuse, neglect, exploitation, fraud, theft, or other criminal activities, personnel of the Department of Health whose duties are to support the investigation of child abuse or neglect, and personnel of the Department of Revenue or local governments whose responsibilities include revenue collection and enforcement or child support enforcement.
- Current or former non-sworn investigative personnel of the Department of Financial Services whose duties include the investigation of fraud, theft, workers' compensation coverage requirements and compliance, other related criminal activities, or state regulatory requirement violations.
- Current or former non-sworn investigative personnel of the Office of Financial Regulation, Bureau of Financial Investigations whose duties include the investigation of fraud, theft, other related criminal activities, or state regulatory requirement violations.
- Current or former certified firefighters.
- Current or former justices of the Supreme Court, district court of appeal judges, circuit court judges, county court judges and of current judicial assistants.
- Current or former state attorneys, assistant state attorneys, statewide prosecutors, and assistant statewide prosecutors.
- Current or former general magistrates, special magistrates, judges of compensation claims, administrative law judges of the Division of Administrative Hearings, and child support enforcement hearing officers.

Florida Department of Highway Safety and Motor Vehicles
**Public Official, Law Enforcement Agency Personnel and Others Request to
Withhold Personal Information**

- Current or former human resource, labor relations, or employee relations directors, assistant directors, managers, or assistant managers of any local government agency or water management district whose duties include hiring and firing employees, labor contract negotiation, administration, or other personnel-related duties.
- Current or former code enforcement officers.
- Current or former guardian ad litem, as defined in s. 39.820.
- Current or former juvenile probation officers, juvenile probation supervisors, detention superintendents, assistant detention superintendents, juvenile justice detention officers I and II, juvenile justice detention officer supervisors, juvenile justice residential officers, juvenile justice residential officer supervisors I and II, juvenile justice counselors, juvenile justice counselor supervisors, human services counselor administrators, senior human services counselor administrators, rehabilitation therapists, and social services counselors of the Department of Juvenile Justice.
- Current or former public defenders, assistant public defenders, criminal conflict and civil regional counsel, and assistant criminal conflict and assistant regional counsel.
- Current and former investigators or inspectors of the Department of Business and Professional Regulation or Department of Agriculture and Consumer Services.
- Current county tax collectors.
- Current or former personnel of the Department of Health whose duties include, or result in, the determination or adjudication of eligibility for social security disability benefits, the investigation or prosecution of complaints filed against health care practitioners, or the inspection of health care practitioners or health care facilities license by the Department of Health.

Florida Department of Highway Safety and Motor Vehicles
**Public Official, Law Enforcement Agency Personnel and Others Request to
Withhold Personal Information**

- Current or former impaired practitioner consultants retained by an agency or current or former employees of an impaired practitioner consultant whose duties result in a determination of a person's skill and safety to practice a licensed profession.
- Current or former emergency medical technicians or paramedics certified under chapter 401, F.S.
- Current or former personnel employed in an agency's office of inspector general or internal audit department whose duties include auditing or investigating waste, fraud, abuse, theft, exploitation or other activities that could lead to criminal prosecution or administrative discipline.
- Current or former directors, managers, supervisors, nurses, and clinical employees of government owned addiction treatment facilities.
- Current or former directors, managers, supervisors, and clinical employees of a child advocacy center and members of a child protection team whose duties include supporting the investigation of child abuse or sexual abuse, child abandonment, child neglect, and child exploitation or to provide services as part of a multidisciplinary case review team.
- Current or former staff and domestic violence advocates, defined in s. 90.5036(i), of domestic violence centers certified by the Department of Children and Families under Chapter 39.
- Current or former United States attorneys, assistant United States attorneys, United States Courts of Appeal judges, United States district judges, and United States magistrate judges.
- Current or former public guardians and employees with fiduciary responsibility, as defined in s. 744.21031, F. S.
- Current Clerks of the Circuit Court, Deputy Clerks and personnel of the Clerks of the Circuit Court.

Florida Department of Highway Safety and Motor Vehicles
**Public Official, Law Enforcement Agency Personnel and Others Request to
Withhold Personal Information**

- Current county/city attorneys, assistant attorneys, and deputy attorneys. (Exception does not apply if the attorney qualifies as a candidate for election to public office).
- Current and former military personnel employed by the U.S. Dept. of Defense who are authorized to access information deemed “secret” or “top secret” by the Federal Government or who are service members of a special operations force as defined in s. 943.10 (22).
- Current or former commissioners of the Florida Gaming Control Commission.