



SHARON R. BOCK
Clerk & Comptroller
Palm Beach County

**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 Clerk & Comptroller, Palm Beach County.

Exempt information held under FS 119.071 or FS 493.6122 or FS 741.465 as (select all that apply):

- Current/former government agency employee in the category checked below
- Spouse of a current/former government agency employee in the category checked below
- Child of a current/former government agency employee in the category checked below

Check the appropriate item:

- Victim of violent crime [FS 119.071(2)(h)1]
- Victim of an incident of mass violence [FS 119.071(2)(o)]
- Child advocacy center director, manager, supervisor, clinical employee of [FS 119.071(4)(d)2.t.] (eff. 7/1/18)
- Law enforcement officers or civilian staff, correctional and correctional probation officers [FS 119.071(4)(d)2.a.]
- Dept of Children and Family investigator [FS 119.071(4)(d)2.a.]
- Dept of Health investigator of child abuse or neglect [FS 119.071(4)(d)2.a.]
- Dept of Revenue or local government child support collection/enforcement personnel [FS 119.071(4)(d)2.a.]
- Florida Department of Financial Services investigative personnel [FS 119.071(4)(d)2.b.]
- Office of Financial Regulation's Bureau of Financial Investigations investigative personnel [F.S. 119.071(4)(d)2.c.]
- Firefighter [FS 119.071(4)(d)2.d.]
- Justice or judge [FS 119.071(4)(d)2.e.]
- State attorney and ASAs [FS 119.071(4)(d)2.f.]
- Statewide prosecutor and asst. statewide prosecutors [FS 119.071(4)(d)2.f.]
- General or Special Magistrate [FS 119.071(4)(d)2.g.]
- Judge of Compensation Claims, Administrative Law Judge [FS 119.071(4)(d)2.g.]
- Child Support Hearing Officer [FS 119.071(4)(d)2.g.]
- Local Govt. or Water Mgt. District Human resources manager/assistant manager [FS 119.071(4)(d)2.h.]
- Local Govt. or Water Mgt. District Labor or employee relations manager/assistant manager [FS 119.071(4)(d)2.h.]
- Code enforcement officer [FS 119.071(4)(d)2.i.]
- Guardian ad litem [FS 119.071(4)(d)2.j.]
- Juvenile probation/detention officer, house parent, therapy provider, counselor and their supervisors [FS 119.071(4)(d)2.k.]
- Public Defender and APDs [FS 119.071(4)(d)2.l.]
- Criminal conflict counsel and civil regional counsel [FS 119.071(4)(d)2.l.]
- Dept of Business Regulation investigators and inspectors [FS 119.071(4)(d)2.m.]
- Tax collectors (current only) [FS 119.071(4)(d)2.n.]
- Dept of Health personnel involved in eligibility, investigation, prosecution, and inspection [FS 119.071(4)(d)2.o.]
- Impaired practitioner consultants retained by an agency [F.S. 119.071(4)(d)2.p.]
- Emergency medical technician or paramedic [FS 119.071(4)(d)2.q.]
- Agency inspector general office or internal audit department employees with auditing or potential criminal investigating or disciplinary duties [FS 119.071(4)(d)2.r.]
- Addiction treatment facility director, manager, supervisor, nurse, or clinical employee [FS 119.071(4)(d)2.s.] (eff. 7/1/18)
- U.S. Attorney and AUSAs [FS 119.071(5)(i)1.]
- U.S. Judge or U.S. Magistrate [FS 119.071(5)(i)1.]
- Member of US Armed Forces, reserve, or National Guard, who served after 9/11/01 [FS 119.071(5)(k)1.]
- Private Investigative, Private Security, and Repossession Services- Class "C", "CC", "E", "EE" Security Licensee [FS 493.6122]
- Victim of Domestic Violence participating in the Address Confidentiality Program [FS 741.465]
- Public Guardians and employees with fiduciary responsibilities [FS 744.21031] (eff. 7/1/18)

REQUESTOR CONTACT INFORMATION

Printed Name: _____

Telephone Number: _____ Email address: _____

INFORMATION TO BE REDACTED

Address where I **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) _____

Social Security Number (**do not list SSN**) / Date of Birth: _____

Place(s) of Employment/Location: _____

Photo of Requestor (*per comparable attached photo*)

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.

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 TO BE REDACTED

The following section is to be completed during or after a visit to the Clerk & Comptroller, Palm Beach County at www.mypalmbeachclerk.com or 205 N. Dixie Hwy., Room 4.2500, West Palm Beach, FL 33401.

As a result of my review of the Official Records of the Clerk & Comptroller, Palm Beach County, I hereby agree that the Clerk & Comptroller, Palm Beach County staff has my permission to modify a copy of the following documents in accordance with FS 119.071. I understand that only the modified copy will be made available to the public, unless otherwise ordered by a court of competent jurisdiction. A separate release can be provided to authorize release of an unredacted document to a named person or entity.

Instrument Number	Book	Page	Document Title
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Documents Other Than Official Records: _____

NOTE: Other governmental agencies may wish to contact you in regard to actions that pertain to, or affect, your property or property rights. The Clerk & Comptroller, Palm Beach County requires your permission before forwarding your mailing address to these governmental agencies:

YES I authorize the Clerk & Comptroller, Palm Beach County to release my mailing address to other governmental agencies.

NO I do not authorize the Clerk & Comptroller, Palm Beach County to release my mailing address to other governmental agencies with the exception of the Property Appraiser and Tax Collector for the purpose of mailing tax statements.

Signature: _____ **Date:** _____

Name of Eligible Government Employee (if not requestor): _____

Job Title of Eligible Government Employee

Employing agency