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CLERK OF THE CIRCUIT COURT AND COMPTROLLER
CITRUS COUNTY, FLORIDA

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PUBLIC RECORDS EXEMPTION REQUEST: FLORIDA STATUTE SECTION 119.071
Effective: July 1, 2018

In accordance with Florida Statute 119.07, the inspection, examination, and duplication of certain records is exempt from public record classification when one, or more, of the following criteria is met.

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(s):

Victim of violent crime [FS 119.071(2)(h)1]

Victim of an incident of mass violence [FS 119.071(2)(o)]

Sworn or civilian law enforcement officer, incl. 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.]

Nonsworn investigative personnel of the Florida Department of Financial Services [FS 119.071(4)(d)2.b.]

Nonsworn investigative personnel of the Office of Financial Regulation's Bureau of Financial Investigations [F.S. 119.071(4)(d)2.a.(V)]

Firefighter [FS 119.071(4)(d)2.c.]

Justice or judge [FS 119.071(4)(d)2.d.]

State attorney and ASAs [FS 119.071(4)(d)2.e.]

Statewide prosecutor and asst statewide prosecutors [FS 119.071(4)(d)2.e.]

General or Special Magistrate [FS 119.071(4)(d)2.e.]

Judge of Compensation Claims, Administrative Law Judge [FS 119.071(4)(d)2.e.]

Child Support Hearing Officer [FS 119.071(4)(d)2.e]
 Human resources manager/assistant manager [FS 119.071(4)(d)2.g.]
 Labor or employee relations manager/assistant manager [FS 119.071(4)(d)2.g.]
 Code enforcement officer [FS 119.071(4)(d)2.h.]
 Guardian ad litem [FS 119.071(4)(d)2.i.]
 Juvenile probation/detention officer, house parent, therapy provider, counselor and their supervisors [FS 119.071(4)(d)2.j.]
 Public Defender and APDs [FS 119.071(4)(d)2.k.]
 Criminal conflict counsel and civil regional counsel [FS 119.071(4)(d)2.k.]
 Dept of Business Regulation investigators and inspectors [FS 119.071(4)(d)2.k.]
 Tax collectors (current only) [FS 119.071(4)(d)2.l.]
 Dept of Health personnel involved in eligibility, investigation, prosecution, and inspection [FS 119.071(4)(d)2.m.]
 Impaired practitioner consultants retained by an agency [F.S. 119.071(4)(d)2.n.]
 Emergency medical technician or paramedic [FS 119.071(4)(d)2.o.]

Employees in an agency's office of inspector general or internal audit department whose duties include auditing or investigating potential criminal or disciplinary activities [FS 119.071(4)(d)2.p.]
 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]
 Substance Abuse Service Providers [FS 119.071(d)(4)
 Guardians/Employees with Fiduciary Responsibility [FS 744.21031] [FS119.071(1)] [s.24(a) Article I of the Florida Constitution]
 Child Advocacy Center and Child Protection Team Personnel [FS 119.071(d)(4)
 Public Meetings/School Safety [FS 943.082(6)] [FS 943.687(8)] [FS1006.12(4)]

If you have indicated that you meet one, or more, of the criteria listed above, the following information is exempt from public record:

- Home address and telephone number(s)
- Spouse and children's home address and telephone number(s)
- Spouse and children's place of employment
- Names and location of schools and day care of employee's children
- Photographs of employee, spouse and children

The following items are exempt from public record regardless of your classification:

- Copy of Social Security Card or Social Security Number
- Bank Account information
- Debit and/or Credit Card numbers

REQUESTOR CONTACT INFORMATION

Printed Name: _____

Telephone Number(s): _____

Email Address: _____

INFORMATION TO BE REDACTED

Home address(es) (including city, state, and zip code) _____

Telephone Number(s): Home: _____ Cell: _____ Work: _____

Social Security Number(s) found at (*DO NOT LIST THE SOCIAL SECURITY NUMBER):

(insert document(s) name location) _____

Date of Birth: _____

Place(s) of Employment/Location: _____

Employer(s) Telephone #: _____

Name and Location of School(s) / Daycare(s) of child(ren) : _____

Personal assets (crime victim): _____

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 Citrus County Clerk of the Circuit Court and Comptroller's Office and its staff for any direct or indirect claims or 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).

DOCUMENTS TO BE REDACTED

The following section is to be completed during or after a visit to the Citrus County Clerk of the Circuit Court and Comptroller's Office at www.citrusclerk.org, or to the Citrus County Courthouse located at 110 N Apopka Ave, Inverness, FL 34450.

As a result of my review of the Official Records of the Citrus County Clerk of the Circuit Court and Comptroller's Office, I hereby agree that the Citrus County Clerk of the Circuit Court and Comptroller's Office 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.

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

Documents Other Than Official Records: _____

Signature: _____ **Date:** _____

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

Job Title of Eligible Government Employee

Employing agency