22CT3270ASB

0529799

3188

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

1 | Juvenile: N

ADMINISTRATION

OBTS Number	Agency ORI Number	Agency Name	Agency Report Number
	FL0500300	BOYNTON BEACH POLICE DEPT.	34-22-002279

Charge Type: Check as many as Apply. ☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

If Weapon Seized Enter Type | Multiple Clearance Indicator

Location of Arrest (Including Name of Business)	Location of Offense (Business Name, Address)
P/L 1500 W Gateway Blvd Boynton Beach, FL	P/L 1500 W Gateway Blvd Boynton Beach, FL

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
02/27/2022	2246					

DEFENDANT

Name (Last, First, Middle): Gangi, Carol, Ann

Alias (Name, DOB, Soc. Sec. #, Etc)

Race (W - White, B - Black, I - American Indian, O - Oriental / Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	11/11/1947	5'01	150	Blue	Blonde	Fair	Small

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)

Marital Status: Single | Religion: Unk | Indication of: Alcohol Influence Y ☒ N ☐ Unk. ☐; Drug Influence Y ☐ N ☒ Unk. ☐

Local Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Residence Type (1. City 2. County 3. Florida 4. Out of State)
1711 SW 20TH ST, Boynton Beach		Florida,	33431	(561)596-0454	1

Permanent Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Address Source
				( ) -	FL DL

Business Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Occupation
				( ) -	Retired

D/L Number, State	INS Number	Place of Birth	Citizenship
G520100479110FL [redacted]		Standford, CT	USA

CO-DEF

Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	1. Arrested 2. At Large 3. Felony 4. Misdemeanor 5. Juvenile
				☐ ☐ ☐ ☐ ☐
Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	1. Arrested 2. At Large 3. Felony 4. Misdemeanor 5. Juvenile
				☐ ☐ ☐ ☐ ☐

JUVENILE

☐ Parent ☐ Legal Custodian ☐ Other | Name (Last) (First) (Middle) | Residence Phone

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/DYS 3. Incarcerated)

Released To: (Name)	Relationship	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 (Phone 561-355-2526) informed of any change of address: ☐ Yes, By: (Name) ☐ No (Reason)

School Attended | Grade

Property Crime? Yes ☐ No ☐ | Description of Property | Value of Property

CODE

Drug Activity: S. Sell, B. Buy, T. Traffic, D. Deliver, E. Use, K. Dispense/Distribute, M. Manufacture Produce/Cultivate, Z. Other, N. N/A, P. Possess

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

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD#
DUI	1	☐ Yes ☒ No	316.193.1A	

Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number	Bond
-	-	-	22-002279		

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD#
		☐ Yes ☐ No		

Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number	Bond
-	-	-			

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD#
		☐ Yes ☐ No		

Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number	Bond
-	-	-			

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD#
		☐ Yes ☐ No		

Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number	Bond

NOTICE TO APPEAR

☐ Instruction No. 1 Mandatory Appearance in Court
☐ Instruction No. 2 You need not appear in Court but must Comply with instruction on reverse side.

Location (Court, Room Number, Address): South County Courthouse, 200 West Atlantic Ave, Delray Beach, FL 33444

Court Date and Time: Month March Day 21 Year 2022 Time 8:30 ☒ A.M. ☐ P.M.

I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO WHICH THE CASE MAY BE TRANSFERRED. 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: 02/27/22

SCANNED FEB 28 2022

ADMIN.

HOLD for other Agency Name: | Signature of Arresting Officer | Name Verification (Printed by Arrestee) (PRINT)

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other.

Name of Arresting Officer (Print)	I.D. #	BU#
L.Nalerio	982	

Intake Deputy	I.D. #	Pouch #	Transporting Officer	I.D. #	Agency	Witness here is subject Signed with an "X".
Dungio			L.Nalerio	982	BBPD	

Page 1 OF 1

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 27th **DAY OF** February **2022 AT** 2217 ☐ **A.M** ☒ **P.M.**

CASE #: 22-002279 **DEFENDANT:** Gangi, Carol, Ann

PERSONAL CONTACT/DRIVING PATTERN/OBSERVATION OF DRIVER: On 2/27/22 at approximately 2217 hours, I responded to the parking lot of 1500 W Gateway Blvd in reference to a suspicious vehicle that was occupied by W/F Carol Gangi. The White Hyundai Sonata bearing FL tag DEHI82 was being operated by Gangi as she was trying to back out of her parking space at the above location. As Boynton Beach Police marked unit was driving by, Gangi was backing and almost struck the side of the BBPD marked unit. At the same time, Manager of Hurricane's Ryan Steindler walked out at the same time and stated that Gangi was causing a disturbance at the establishment. Steindler wished to have Gangi trespassed from the establishment. In the mean time, a welfare check was made on Gangi. Gangi exited the vehicle and stumbled as she exited the driver seat. Gangi stated that she had been involved in a verbal argument with someone at Hurricanes and that she was trying to drive home. While I spoke to Gangi, I could smell a strong odor of an unknown alcoholic beverage coming from her mouth. The smell intensified every time she spoke. Gangi also had slurred speech and I could observe her swaying while she was standing and talking to me. I asked Gangi for her driver license and she went into her vehicle and sat down to retrieve the driver license. I asked Gangi if she consumed alcoholic beverages, which she stated that she consumed two glasses of wine. Based on my interaction and observations of Gangi, I advised her that I was conducting a DUI investigation. Gangi stated she would participate in Standardized Field Sobriety Exercises. Gangi told me that she had an ankle issue from years ago and that she couldn't walk perfectly. Gangi told me that she was not in pain. Gangi did not have any other injuries that she told me about.

Pen Task: Gangi stated that she understood the instructions. Gangi moved her head several times. Gangi was swaying. Gangi stepped off the line during instructional phase.

HORIZONTAL GAZE NYSTAGMUS:

- ☐ Left eye does not follow smoothly
- ☐ Left eye prior to 45 degrees
- ☐ Distinct jerking in left eye at
- ☐ Right eye does not follow smoothly
- ☐ Right eye prior to 45 degrees
- ☐ Distinct jerking in right eye at

maximum deviation
☐ Vertical Nystagmus in left eye

maximum deviation
☐ Vertical Nystagmus in right eye

WALK AND TURN:
Gangi had trouble with her balance. Exercise was skipped.

ONE LEG STAND: Exercise was skipped.

FINGER TO NOSE:
Gangi stated that she understood the instructions. Gangi started the exercise early. Gangi was swaying. Gangi did not follow directions and went ahead during the exercise. Gangi opened her eyes and did not tilt her head the whole time. Gangi stopped the exercise prior to me telling her to do so.

ROMBERG/ALPHABET:
Gangi stated that she understood the instructions. Gangi was swaying. Gangi counted to P and stopped. Gangi recited it in a fast manner.

Finger Count: Gangi stated the understood the instructions.Gangi started prior to me telling her to do so. Gangi counted incorrectly on every attempt. Gangi mixed her fingers. Gangi did not follow instructions.

Based on the above, I placed Gangi under arrest for Suspicion of DUI. I transported Gangi to PBCJ BAT where I started the twenty minute observation. After, Gangi provided a breath sample of .085 and .079. Gangi cooperated with Questions and Answers. Gangi was later TOT PBCJ. Gangi's vehicle was left securely parked in the parking lot. Gangi was trespassed from Hurricane's my the manager Ryan.

The following instrument was sworn to before me this 27th day of February 2022

By: Ofc.Nalerio

Notary Public State of Florida
Thomas H Leahey
My Commission GG 347108
Expires 06/20/2023

Notary/Police Officer (F.S.S. 117.10)

Signature of Arresting Officer

TESTING FACILITY TASK REPORT

AGENCY: BBPD

SUBJECT: Gangl, Carol A

CASE NUMBER: 22-041052

DATE: Feb 27, 2022

VIDEO DVD NUMBER: n/a

BEGINNING TIME: 2329

ENDING TIME: 2347

BREATH TESTS RESULTS: 1) .085 TIME 2335 A.M.☐ P.M.☒ 2) .079 TIME 2338 A.M.☐ P.M.☒

3) n/a TIME 0 A.M.☐ P.M.☐ 4) n/a TIME 0 A.M.☐ P.M.☐

BREATH OPERATOR: Thomas H Leahey #19183

MAINTENANCE TECHNICAN: Jason Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: thick

ATTITUDE: talkative, repetitive

CLOTHING: blue jeans, blue floral shirt, blue sandals

MEDICAL CONDITIONS: high blood pressure, cholesterol/depression

MEDICATIONS: names unknown of the pills - taken them this am

OTHER:

eyes are glassy & bloodshot
odor of unknown alcoholic beverage on breath
subject stated she drank 2 glasses of wine at restaurant - Q&A

COMMENTS:

arrived at center A/O conducted 20 minute observation period at 2307 hrs

subject agreed to perform breath test

subject provided adequate breath samples

A/O read rights & subject understood rights

tech read breath test results & subject understood breath test results

A/O conducted Q&A

subject answered questions

SUBJECT: _____ CASE NUMBER: _____

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? N

WHERE WERE YOU GOING? N

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? N
- 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? CT

INTERVIEWER: _____

SUBJECT: _____ CASE NUMBER: _____

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)_____

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)_____

WHITE - STATE ATTY. YELLOW - DHSMV PINK - CENTRAL RECORDS GOLD - JAIL

PBSO #0129B REV. 06/11

PALM BEACH COUNTY SHERIFF'S OFFICE
DUI TESTING FACILITY
INFORMATION SHEET

PBSO CASE # 22-041052 PBSO ZONE 6-32

AGENCY CASE # 22-002279 CRASH CASE # _____

TIME OF STOP/CRASH 2217 DATE 2-27-22 DAY Sunday

SUBJECT'S NAME Gangi, Carol, Ann RACE W SEX F

HGT 501 WGT 150 DOB 11-11-1947

LOCATION 1500 W Gateway Blvd, Boynton Beach, FL

ARRESTING OFFICER'S NAME & ID Nalerio 982 AGENCY BBPD

DIVISION: Patrol

NOTIFIED BY COMMO Yes

ARRIVAL AT FACILITY 2307

Arrest Time 2246

BREATH RESULTS:

1. .085
2. .079
3. n/a
4. n/a

TESTING OFFICER'S ID 19183

FLORIDA DEPARTMENT OF LAW ENFORCEMENT
ALCOHOL TESTING PROGRAM
BREATH ALCOHOL TEST AFFIDAVIT

Instrument Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH CO SO
Instrument Serial Number: 80-006478 Software: 8100.27
Date of Test: 02/27/2022

Date of Last Agency Inspection: 02/04/2022
Observation Period Began: 23:07
Subject's Name: CAROL A GANGI DOB: 11/11/1947 Sex: F

The subject was observed for at least twenty-minutes prior to the administration of the breath test to ensure that the subject did not take anything orally and did not regurgitate.

Results:

Test	g/210L	Time
Diagnostics Check	OK	23:32
Air Blank	0.000	23:32
Control Test	0.079	23:32
Air Blank	0.000	23:33
Subject Sample #1	0.085	23:35
Air Blank	0.000	23:36
Air Blank	0.000	23:37
Subject Sample #2	0.079	23:38
Air Blank	0.000	23:39
Control Test	0.075	23:39
Air Blank	0.000	23:40
Diagnostics Check	OK	23:40

Cylinder Lot: 19021080A2
Exp: 09/05/2023

State of Florida, County of Palm Beach

Personally appeared before me the undersigned authority, who (✓) is personally known to me or (__) produced _____ as identification, and who after being placed under oath, states:

I THOMAS H LEAHEY, hold a valid Breath Test Operator permit issued by the Florida Department of Law Enforcement, I administered the above breath test to the subject named above in accordance with Chapter 11D-8, Florida Administrative Code, and this form is a true and accurate report of that breath test.

Breath Test Operator: T Leahey Date: 02/27/2022
Signature

Sworn to (or affirmed) before me this 27 day of February, 2022

Signature of Notary Public-State of Florida

OFC L Valerio #982
Printed Name of Notary Public-State of Florida

Note: Pursuant to section 117.10, Florida Statutes, law enforcement officers, correctional officers, traffic accident investigation officers and traffic infraction enforcement officers are notaries public when engaged in the performance of official duties. In accordance with section 316.1934(5), F.S., this completed form is admissible without further authentication and is presumptive proof of the results herein. To be used in accordance with Section 316.1934(5), F.S., and in administrative proceedings pursuant to 322.2615, F.S.

FDLE/ATP FORM 38 - MARCH 2004, Ref. 11D-8.007

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: 2022005444	**Date:** 02/28/2022
	Specialist Name/ID: T Howard/7185