

J# 0520026

20 mm 9427 SB #2924

ADMINISTRATIVE	OBTS Number		ARREST / NOTICE TO APPEAR				1. Arrest (No Warrant) 3. Request for Warrant 6. Arrest (Warrant) 4. Request for Capias 2. N.T.A. 5. Juvenile Referral		1	JUVENILE			
	Agency ORI Number 0500200		Agency Name Boca Raton Police Department		Agency Report Number (N.T.A.'s only) 3 2 2020-013630								
CHARGE	Charge Type: Check as many as apply: <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony		<input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		If Weapon Seized Enter Type: None/not Applicable		Multiple Clearance Indicator				
	Location of Arrest (Including Name of Business) 2003 N OCEAN BLVD				Location of Offense (Business Name, Address) 2003 N OCEAN BLVD 203N, BOCA RATON, FL 33432								
DEFENDANT	Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle						
	12/04/2020	20:15	12/04/2020	20:25	12/04/2020	20:40	NA						
DEFENDANT	Name (Last, First, Middle) HIRSCH, GARY STEVEN				Alias:								
	Race W - White A - American Indian B - Black O - Oriental/Asian	Sex M	Date of Birth 07/07/1951	Height 5'09	Weight 160	Eye Color BROWN	Hair Color SALT &	Complexion LIGHT	Build JM				
DEFENDANT	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)				Marital Status U	Religion N/A	Indication of Alcohol Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk. <input type="checkbox"/>						
	Local Address (Street, Apt. Number) 2003 N OCEAN BLVD 203N, BOCA RATON, FL 33431				(City)	(State)	(Zip)	Phone (954) 815-8268		Residence Type 1. City 3. Florida 2. County 4. Out of State			
DEFENDANT	Permanent Address (Street, Apt. Number) 2003 N OCEAN BLVD 203N, BOCA RATON, FL 33431				(City)	(State)	(Zip)	Phone (954) 815-8268		Address Source FL DL			
	Business Address (Name, Street) 2003 N OCEAN BLVD 203N, BOCA RATON, FL 33431				(City)	(State)	(Zip)	Phone		Occupation			
DEFENDANT	D/L Number State H620297512470 / FL		INS Number		Place of Birth (City, State) PALM BEACH, FL		Citizenship US						
	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				
DEFENDANT	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				
	Name (Last, First, Middle)				Residence Phone				Business Phone				
DEFENDANT	Address (Street, Apt. Number)				(City)	(State)	(Zip)	Business Phone					
	Notified by: (Name)				Date	Time	JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated						
DEFENDANT	Released To: (Name)				Relationship	Date	Time						
	The above address was provided by <input type="checkbox"/> defendant and/or <input type="checkbox"/> defendant's parents. The child and/or parent was told to keep the Juvenile Court Clerk's Office (Phone 355-2526) informed of any change of address.				School Attended		Grade						
DEFENDANT	Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Description of Property		Value of Property						
	Drug Activity: S. Sell N. N/A P. Possess				R. Smuggle D. Deliver E. Use	K. Disperse/ Distribute	M. Manufacture/ Produce/ Cultivate	Z. Other	Drug Type: N. N/A A. Amphetamine		B. Barbiturate C. Cocaine E. Heroin	H. Hallucinogen M. Marijuana O. Opium/Deriv.	P. Parapharmaceutical Equipment S. Synthetic
CHARGE	Charge Description BATTERY				Statute Violation Number 784.03(1A1)		Violation of ORD #						
	Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number		Bond				
CHARGE	Charge Description				Statute Violation Number		Violation of ORD #						
	Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number		Bond				
CHARGE	Charge Description				Statute Violation Number		Violation of ORD #						
	Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number		Bond				
INTAKE	Health / Apparent Physical Condition of Defendant GOOD				Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries								
	Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Posted Bond				<input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> South County Mental Health		<input checked="" type="checkbox"/> T.O.T. County Jail		PROPERTY - Received By: PAYNE, J		Released By:		Released To:
NOTICE TO APPEAR	Transported By: PAYNE, J				Date Transported 12/04/2020	Time Transported 20:41	Other						
	<input type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input checked="" type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.				Location (Court, Room) South County 200 W Atlantic Ave Delray Beach, FL 33444		Court Date and Time 12/12/2021 @ 9:30am						
APPEAR	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		Name Verification (Printed by Arrestee)						
ADMINISTRATIVE	<input type="checkbox"/> Dangerous <input type="checkbox"/> Specially		<input type="checkbox"/> Restricted Arrest <input type="checkbox"/> Other		Name of Arresting Officer (Print) PAYNE, J. S.		I.D.# 815		PAGE 1 OF 1				
	Wilson 8241		Pouch #	Transporting Officer PAYNE, J		I.D.# 815	Agency BRPD		Witness here if subject signed with an "X".				

COURT STATE ATTORNEY AGENCY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O. DEFENDANT

DEC 4 PM 10:58

PROBABLE CAUSE AFFIDAVIT

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

1 JUVENILE

OBTS Number	Agency ORI Number FL 0500200		Agency Name BOCA RATON POLICE DEPARTMENT		Agency Report Number 3 2 2020-013630	
Charge Type: Check as many as apply. <input type="checkbox"/> 1. Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other						Special Notes:
Name (Last, First, Middle) HARRIS, GARY W				Aliases	Race W	Sex M
Date of Birth 03/18/1957						
Charge Description 784.03(1A1)			Charge Description			
Charge Description			Charge Description			
Victim's Name (Last, First, Middle) AMMON, CHRISTINE JULIA				Race W	Sex F	Date of Birth 02/01/1991
Local Address (Street, Apt. Number) 905 NE 18TH AVE 104, FT LAUDERDALE, FL 33064			(City)	(State)	(Zip)	Phone (754) 235-8354
Business Address (Name, Street)			(City)	(State)	(Zip)	Address Source FL DL
						Occupation ESCORT
<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 admitting to the below facts.</p> <p><input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the <u>4</u> day of <u>December</u>, <u>2020</u> at <u>19:30</u> (Specifically include facts constituting cause for arrest.)</p> <p>On 12/4/2020 at approximately 1930 hours, I responded to 2003 N Ocean Blvd in reference to a 911 Emergency involving a W/F that claimed she was punched in the face while in a room and wasn't being allowed to leave. Upon arrival, the W/F was outside waiting for us.</p> <p>She identified herself as Christine Ammon and was crying during most of the interview. She claimed that she was an escort hired by Gary Hirsch to come over today. According to her, the arrangement was for her to perform fellatio on Gary and hang out/ do recreational drugs. This was not the first time she had this arrangement with Gary. At approximately 1900 hours, she woke up from a nap to find Gary taking pictures of her nude. Christine took objection to this and told Gary that she would tell all of his neighbors that he was a dirty old pervert. She demanded the \$160 in cash so that she could leave. According to Christine, he refused to pay her and demanded for her to leave immediately. Not wanting to leave without her money, she refused his request, at which time she claimed that he open palm "jabbed" her in the face, causing her to fall down in pain. She quickly got to her phone to call 911. After continued arguing, she was eventually able to leave the apartment and proceed to the entrance where we met. Christine had minor redness to her nose area, but nothing which looked egregious. She provided a sworn verbal statement to Officer Coccia and expressed her desire to prosecute for the battery. Pictures of her face were also taken for evidence.</p> <p>I next spoke to Gary Hirsch who was now waiting down stairs in the lobby. He denied most of Christine's story, claiming that she was just a friend, there was no money arrangement for fellatio, and that it was Christine shooting up drugs in his apartment. It was that drug use which caused him to kick her out of the apartment. He also added that every previous sexual encounter they had in the past was consensual and not a money arrangement. He also denied any accusations of him putting his hands on her during the incident. I asked him to show me the pictures of her on his phone. He obliged and showed</p>						
SWORN AND SUBSCRIBED BEFORE ME			SIGNATURE OF ARRESTING / INVESTIGATING OFFICER			
MCINNIS, BRYAN MICHAEL			PAYNE, JONATHAN SIMON (815)			
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)			NAME OF OFFICER (PLEASE PRINT)			
<u>12/04/2020</u>			<u>12/04/2020</u>			
DATE			DATE			
						PAGE 1 OF 2

PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

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

1 JUVENILE

OBTS Number		
Agency ORI Number FL 0500200	Agency Name BOCA RATON POLICE DEPARTMENT	Agency Report Number 3 2 2020-013630
Charge Type: Check as many as apply	<input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other	Special Notes:

Name (Last, First, Middle) HARRIS, GARY W	Alias	Race W	Sex M	Date of Birth 03/18/1957
---	-------	------------------	-----------------	------------------------------------

multiple pictures of Christine in the bathroom lying on the floor. Various pictures of female genitalia were also present, but he denied those being of her.

Based on my investigation, I was more inclined to believe Christine's accusation and ultimately arrested Gary for Simple Battery, F.S.S. 784.03(1A1). He was transported to Palm Beach County Jail without incident.

NOT A CERTIFIED COPY

ADMINISTRATIVE	SWORN AND SUBSCRIBED BEFORE ME	<i>BM754</i>	SIGNATURE OF ARRESTING / INVESTIGATING OFFICER
	MCINNIS, BRYAN MICHAEL		PAYNE, JONATHAN SIMON (815)
	NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)		NAME OF OFFICER (PLEASE PRINT)
	12/04/2020		12/04/2020
	DATE		DATE



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.	2
	<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: 2020028426	Date: 12/5/2020
	Specialist Name/ID: B Evans / 23649