22CT6407NB

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

ADMINISTRATIVE

OBTS Number

Agency ORI Number: FLO 5 0 2 6 0 0
Agency Name: PALM BEACH GARDENS POLICE DEPARTMENT
Agency Report Number: 78 - 22002028

Charge Type: Check as many as apply. ☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other
Weapon Seized / Type: 2 (1. Yes 2. No)
Multiple Clearance Indicator:

Location of Arrest (Including Name of Business): CENTRAL BLVD/SOUTHAMPTON DR, PBG, FL 33418
Location of Offense (Business Name, Address): 12300-BLOCK CENTRAL BLVD, PBG, FL 33418

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle KAUFF'S TOWING AND RECOVERY
04/21/2022	23:11					4701 EAST AVENUE, WPB, FL 33407

DEFENDANT

Name (Last, First, Middle): GOODMAN JR, GARY, TYRONE
Alias (Name, DOB, Soc. Sec. #, Etc.)

Race (W - White I - American Indian B - Black O- Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	10/13/1975	6'3	240	HAZ	BRO	LGT	LARGE

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description):
Marital Status: SINGLE
Religion: NOT STATED
Indication of: Alcohol Influence Y ☑ N ☐ Unk. ☐; Drug Influence Y ☐ N ☐ Unk. ☑

Local Address (Street, Apt. Number): 1010 QUAYE LAKE CIR #304, (City) WELLINGTON, (State) FL (Zip) 33411
Phone: (954) 598-3261
Residence Type: 1. City 2. County 3. Florida 4. Out of State: 2

Permanent Address (Street, Apt. Number): 1010 QUAYE LAKE CIR #304, (City) WELLINGTON, (State) FL (Zip) 33411
Phone:
Address Source: VERBAL

Business Address (Name, Street): (City) (State) (Zip)
Phone:
Occupation:

D/L Number, State: G355298753730 FL
Soc. Sec. Number: [redacted]
INS Number:
Place of Birth (City, State): ATLANTA, GA
Citizenship: US

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): MOC
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 provided by ☐ defendant and / or ☐ defendant's parents The child and / or parent was told to keep the Juvenile Court Clerk (Phone 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: N. N/A P. Possess S. Sell B. Buy T. Traffic R. Smuggle D. Deliver E. Use K. Dispense/ 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. Paraphernalia/ Equipment S. Synthetics U. Unknown Z. Other

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
DRIVING UNDER THE INFLUENCE	1	☐Y ☒N	316.193(1)(A)	

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

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

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

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

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

SCANNED APR 22 2022

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

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

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

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

NOTICE TO APPEAR

Location (Court, Room Number, Address): NORTH COUNTY COURTHOUSE, 3188 PGA BOULEVARD, PALM BEACH GARDENS, FL 33410 - PH: (561) 662-6700

Court Date and Time: Month MAY Day 25 Year 2022 Time 10:00 AM ☒ PM ☐

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 A[redacted] REQUIRED BY THIS NOTICE TO APPEAR, THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED

04/21/2022
Signature of Defendant (or Juvenile and Parent /Custodian) | Date Signed

ADMIN

HOLD for other Agency Name:
☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:
Intake Deputy | I.D. # | Pouch #

Signature of Arresting Officer: 514
Name of Arresting Officer (Print): OFC. A.FLINK | I.D. # 514
Transporting Officer: OFC. A. FLINK | ID # 514 | Agency PBGPD

Name Verification (Printed by Arrestee) (PRINT)
APR 22 AM 11:51
Witness here if subject signed with an -X"

PAGE 1 OF 1

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A.'s ONLY)

PROBABLE CAUSE AFFIDAVIT

OSTS Number | 1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias | 1 | JUVENILE

ADMIN

Agency ORI Number	Agency Name	Agency Report Number
FL FL0502600	Palm Beach Gardens Police Department	7 | 8 | 22-002028

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

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
GOODMAN, GARY TYRONE J		W	M	10/13/1975

CHARGES

Charge Description	Charge Description
316.193(1)(A) DUI - NORMAL FACULTIES IMPAIRED	
Charge Description	Charge Description

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
State Of Florida			

Local Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Address Source
Business Address (Name, Street)	**(City)**	**(State)**	**(Zip)**	**Phone**	**Occupation**

PROBABLE CAUSE STATEMENT

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 . . .

☒ committed the below acts in my presence.

☐ confessed to _____ admitting to the below facts.

☐ was observed by _____ who told _____ that he/she saw the arrested person committ the below acts.

☒ was found to have committed the below acts, resulting from my (described) investigation.

On the 21 day of April, 2022 at 23:00 (Specifically include facts constituting cause for arrest.)

On 04/21/2022 at approximately 2300 hours, this Officer was conducting speed measurement enforcement in the area of the 12300-block of Central Blvd, PBG, FL, when a vehicle was observed traveling at an increased rate of speed south bound in the outside through lane. Body worn camera and in car video were used in the investigation.

This Officer`s initial visual estimation of the vehicle, was 60 MPH in a posted 45 MPH zone. Using RADAR Stalker DSR2X (DB001317), rear antenna (KR027120) this Officer received a steady tone and reading of 62 MPH. The RADAR calibration was last checked on 11/19/2021 and was due on 05/19/2022. Prior to this tour of duty on this date, this Officer ensured the RADAR was in working order, to confirm the accuracy of the unit. At the end of this tour of duty, this Officer did the same. This Officer received RADAR/LIDAR certification on 05/31/2008, in Cannon AFB, NM. This Officer entered the lane behind the vehicle, a Ford pick-up truck (22BMBL/FL) and observed the vehicle increase in speed. This Officer visually estimated the vehicle to now be at approximately 70 MPH still in a posted 45 MPH zone. Using the same radar now forward antenna (KC086606) the vehicle speed stayed steady at 68 MPH. As this Officer was preparing to initiate a traffic stop on same, this Officer observed the vehicle leave the roadway. The two passenger side tires both drove along the grassy shoulder then back onto the roadway. This Officer initiated a traffic stop on same in the area of Central Blvd and Southampton Dr, PBG, FL.

This Officer made contact with the driver and sole occupant, identified via Florida Driver License photo, Gary Goodman Jr (OF) while he still in actual physical control of the vehicle. Goodman had glassy watery eyes, low heavy eyelids, a slur in his speech and the obvious odor of an unknown alcoholic beverage emanating from his breath at conversational distance. Goodman said he was coming from "a friends house just hanging out". Goodman admitted to consuming one beer on this night.

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S. 117.10)

JOSHUA BELL
MY COMMISSION #GG346008
EXPIRES: JUN 18, 2023
Bonded through 1st State Insurance

04/22/2022
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

FLINK, ANDREW S (514)
NAME OF OFFICER (PLEASE PRINT)

04/22/2022
DATE

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

ADMIN

OBTS Number

PROBABLE CAUSE AFFIDAVIT SUPPLEMENT

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

1

JUVENILE

Agency ORI Number	Agency Name	Agency Report Number
FL FL0502600	Palm Beach Gardens Police Department	7 | 8 | 22-002028

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

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
GOODMAN, GARY TYRONE J		W	M	10/13/1975

PROBABLE CAUSE STATEMENT

Based on this Officers observations, Goodman was asked to exit the vehicle, to participate in Standardized Field Sobriety Exercises, to which he complied. Goodman said he did not have any medical conditions which would affect the exercises performed.

The first exercise conducted, was the Horizontal Gaze Nystagmus. The stimulus used, was a Toxoptix X3 with an illuminated red light. This Officer observed lack of smooth pursuit in both eyes and sustained involuntary jerking in both eyes at maximum deviation.

The second exercise conducted, was the Walk and Turn. The line used was a strip of yellow tape placed upon the pavement by this Officer. During the instructions, Goodman lost his balance and exited the starting position. Goodman also started the exercise prior to being told to do so. During the first attempt, Goodman raised his arms more than six inches from his sides. Goodman conducted an improper turnaround, by way of coming off the line and turning around. During the return set of steps, Goodman again raised his arms more than six inches from his sides.

The third and final exercise conducted, was the One-Leg Stand. During the exercise, Goodman raised his right foot. Goodman swayed and raised his arms more than six inches from his sides. While counting, Goodman did skip the count of five.

Based on this Officers observations and the totality of the circumstances, Goodman was placed under arrest at 2311 hours. At PBSO BAT, while conducting the 20 minute observation period, Goodman uttered to this Officer he had recently taken a Tramadol and indicated he was aware of the reaction with alcohol, saying "I shouldnt have mixed". Also during the 20 minute observation, it was determined Goodman had smokeless tobacco in his mouth. Goodman was told to spit out the tobacco and rinsed his mouth with water. The second 20 minute observation was started after this occurred. This Officer requested Goodman to provide a breath sample for the purpose of determining its alcohol content, to which he asked what would happen if he did not do so. This Officer read Florida Implied Consent to Goodman, to which he acknowledged and agreed to do the test. At 0025 hours, he blew .054 and at 0028 hours, he blew .055. This Officer then requested Goodman to provide a urine sample for the purpose of detecting the presence of chemical or controlled substance, to which he reluctantly agreed to do so. At 0035 hours, Goodman provided a urine sample.

Based on the results of the investigation and all the facts present, this Officer has probable cause to prove Gary Goodman Jr operated a motor vehicle, in the state of Florida, while under the influence of a combination of substances to the extent his normal faculties were impaired, in violation of FSS 316.193(1)(A).

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

JOSHUA BELL
MY COMMISSION #GG346008
EXPIRES: JUN 18, 2023
Bonded through 1st State Insurance

04/22/2022
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

FLINK, ANDREW S (514)
NAME OF OFFICER (PLEASE PRINT)

04/22/2022
DATE

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

SUBJECT: Goodman Jr, Gary Tyrone 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? _____

WHERE WERE YOU GOING? _____

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? _____
- 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? _____

INTERVIEWER: OFC. A. Flink #514

SUBJECT: Goodman Jr, Gary Tyrone 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 Ofc Fink of the PBGPD.

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) Refused on camera

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) Read on camera

PALM BEACH COUNTY
SHERIFF'S OFFICE
RIC L. BRADSHAW, SHERIFF

TOXICOLOGY ANALYSIS REQUEST

This Form Must Be Included With the Property Receipt and Accompany the Evidence Submitted for Toxicology Analysis
PRINT LEGIBLY OR TYPE

Agency: PALM BEACH GARDENS POLICE DEPARTMENT Case #: 22002028

Officer: OFC. A.FLINK ID#: 514 Email: aflink@pbgfl.com

Specimen Collected By: OFC. ANDREW FLINK Date: April 22, 2022 Time: 0035

Specimen Collected From: GOODMAN JR, GARY, TYRONE Age: 56 Sex: M Hgt: 6'3 Wgt: 240

Specimen Type: ☐ Blood ☑ Urine ☐ Beverage ☐ Other-Describe _____

Type of Case: ☐ Traffic Crash ☐ Fatality ☑ DWI/DUI ☐ Other Date: 4/21/22 Time: 2311

Potential Felony? ☐ Yes ☑ No

Was any medication administered by medical personnel prior to sample being drawn: ☐ Yes ☑ No

If yes, name of Medication(s): N/A

Subject Arrested: ☑ Yes ☐ No

Breath Test Performed? ☑ Yes ☐ No Results: .054 .055 - -

Tests requested: ☐ Blood Alcohol ☐ Blood Drug Screen ☑ Urine Drug Screen

NOTE: Blood Alcohol analysis is performed on all DUI blood specimens. Requested Blood Drug Screen may not be performed based on the laboratory protocol. If you have any questions, please contact the Toxicology Unit at 561-688-4814 or toxicologyrequest@pbso.org.

DRE exam performed: ☐ Yes ☑ No DRE Officer: N/A Agency: _____

DRE Opinion: _____ DRE Email: _____

Drug History and Signs of Impairment (Please list any drugs, medications, or prescriptions the subject may have taken or were in his/her possession.)

GOODMAN TAKES TRAMADOL AND XERELTO

GOODMAN WAS SPEEDING AND UNABLE TO KEEP HIS VEHICLE ON THE ROADWAY

Goodman had glassy watery eyes, low heavy eyelids, a slur in his speech and the obvious odor of an unknown alcoholic beverage emanating from his breath at conversational distance.

Goodman exhibited multiple indicators during roadside exercises.

PALM BEACH GARDENS POLICE DEPARTMENT
DUI TESTING FACILITY INFORMATION SHEET

PBSO Case #: 22-059574 PBSO Zone: 3-13

Agency Case #: 22002028 Crash Case #: _____

Incident Information:

Time of Stop/Crash: 2300 Date of Incident: 04/21/2022 Day: THURSDAY

Location of Incident: 12300-BLOCK CENTRAL BLVD, PBG, FL 33418

Arrest Information:

Time of Arrest: 23:11 Date of Arrest: 04/21/2022 Day: THURSDAY

Location of Arrest: CENTRAL BLVD/SOUTHAMPTON DR, PBG, FL 33418

Subject's Name: (L) GOODMAN JR, (F) GARY, (M) TYRONE

DOB: 10/13/1975 Race: W Sex: M Height: 6'3 Weight: 240 Hair BRO Eye HAZ

Address: 870 QUAYE LAKE CIR UNIT 10, WELLINGTON, FL 33411 Phone: (954) 598-3261

Arresting Officer's Name: OFC. A.FLINK ID#: 514

Agency: PBGPD Division: TRAFFIC - DUI

Breath Results

1) .054 at 00:25 hrs.
2) .055 at 00:28 hrs.
3) - at - hrs.
4) - at - hrs.

URINE

---BAT Use---

BAT Notified: YES

Arrival Time at BAT: 23:55

Subject Arrest Time: 23:11

Breath Test Operator: BELL, JOSH 8656
PBSO

TESTING FACILITY TASK REPORT

AGENCY: PBG

SUBJECT: GOODMAN JR, GARY TYRONE

CASE NUMBER: 22-059574

DATE: Apr 22, 2022

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 0020

ENDING TIME: 0032

BREATH TESTS RESULTS: 1) .054 TIME 0025 A.M. ☒ P.M. ☐ 2) .055 TIME 0028 A.M. ☒ P.M. ☐

3) XX TIME XX A.M. ☐ P.M. ☐ 4) XX TIME XX A.M. ☐ P.M. ☐

BREATH OPERATOR: JOSHUA J BELL #8656

MAINTENANCE TECHNICAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SOUTHERN ACCENT

ATTITUDE: TALKATIVE, INQUISITIVE, COOPERATIVE

CLOTHING: GREY POLO SHIRT, TAN SHORTS, BROWN SHOES

MEDICAL CONDITIONS: PROTEIN DEFICIENCY

MEDICATIONS: XARELTO, TRAMADOL

OTHER:

EYES: BLOODSHOT, GLASSY

COMMENTS:

A/O ARRIVED AT DUI TESTING FACILITY AND BEGAN THE 20 MINUTE OBSERVATION AT 2355 HOURS

SUBJECT ASKED IF HE HAD TO TAKE BREATH TEST

A/O READ I.C
SUBJECT STATED HE UNDERSTOOD I.C
SUBJECT STATED HE WOULD TAKE BREATH TEST

TECH READ BREATH TEST RESULTS
SUBJECT STATED HE UNDERSTOOD BREATH TEST RESULTS

A/O REQUESTED A URINE SAMPLE
SUBJECT STATED HE WOULD PROVIDE A URINE SAMPLE

A/O READ RIGHTS
SUBJECT STATED HE UNDERSTOOD HIS RIGHTS

Q AND A NOT CONDUCTED

SUBJECT PROVIDED A URINE SAMPLE AT 0035 HOURS

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: 80-006029 Software: 8100.27
Date of Test: 04/22/2022

Date of Last Agency Inspection: 03/25/2022
Observation Period Began: 23:55
Subject's Name: GARY T GOODMAN JR DOB: 10/13/1975 Sex: M

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	00:23
Air Blank	0.000	00:23
Control Test	0.082	00:24
Air Blank	0.000	00:24
Subject Sample #1	0.054	00:25
Air Blank	0.000	00:25
Air Blank	0.000	00:27
Subject Sample #2	0.055	00:28
Air Blank	0.000	00:28
Control Test	0.082	00:29
Air Blank	0.000	00:29
Diagnostics Check	OK	00:29

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 JOSHUA J BELL, 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: _____ Date: 04/22/22
Signature

Sworn to (or affirmed) before me this 22 day of April, 2022

_____ OFC. A. FLINK #514
Signature of Notary Public-State of Florida 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: 2022010533	**Date:** 04/22/2022
	Specialist Name/ID: T Howard/7185