

JFF: 050030

21CT 6165

#3759

OBTS Number		ARREST / NOTICE TO APPEAR Juvenile Referral Report		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1		N	
Agency ORI Number FL 0500300		Agency Name BOYNTON BEACH POLICE DEPT.		Agency Report Number 34-21-019249							
Charge Type: Check as many as Apply.		<input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony		<input type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		If Weapon Seized Enter Type		Multiple Clearance Indicator	
Location of Arrest (Including Name of Business) 2200 N Congress Ave, Boynton Beach, FL				Location of Offense (Business Name, Address) 2200 N Congress Ave, Boynton Beach, FL							
Date of Arrest 04/14/2021		Time of Arrest 2326		Booking Date		Booking Time		Jail Date		Jail Time	
Name (Last, First, Middle) Kane, Paul, Colton				Alias (Name, DOB, Soc. Sec. #, Etc)							
W - White B - Black		I - American Indian O - Oriental / Asian		Race W		Sex M		Date of Birth 02-10-1995		Height 5'11	
Weight 180		Eye Color Hazel		Hair Color Black		Complexion Fair		Build Medium			
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)				Marital Status Single		Religion Unk		Indication of: Alcohol Influence Drug Influence		Y N Unk <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Local Address (Street, Apt. Number) 318 Live Oak Ln, Boynton Beach		(City) Florida		(State) 33462		Phone (561)267-9769		Residence Type 1. City 3. Florida 2. County 4. Out of State		1	
Permanent Address (Street, Apt. Number)		(City)		(State)		(Zip)		Phone		Address Source FL DL	
Business Address (Street, Apt. Number)		(City)		(State)		(Zip)		Phone		Occupation Administration	
DL Number, State K500-683-95-050-0 FL		Soc. Sec. Number		INS Number		Place of Birth Key West, FL		Citizenship USA			
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large		<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile	
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large		<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile	
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> 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 <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 561-356-2526) informed of any change of address.		School Attended		Grade					
<input type="checkbox"/> Yes, By: (Name)		<input type="checkbox"/> No, (Reason)		Property Crime? Yes <input type="checkbox"/> No <input type="checkbox"/>		Description of Property		Value of Property			
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. Synthetic		U. Unknown Z. Other			
Charge Description DUI		Counts 1		Domestic Violence <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Statute Violation Number 316.193.3C1		Violation of ORD#			
Drug Activity		Drug Type		Amount/Unit		Offense # 21-019249		Warrant/Capias Number		Bond	
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Yes <input type="checkbox"/> No		Statute Violation Number		Violation of ORD#			
Drug Activity		Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond	
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Yes <input type="checkbox"/> No		Statute Violation Number		Violation of ORD#			
Drug Activity		Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond	
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Yes <input type="checkbox"/> No		Statute Violation Number		Violation of ORD#			
Drug Activity		Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond	
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 May Day 3 Year 2021 Time 8:30		<input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M.			
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 Name:		Signature of Arresting Officer		Name of Arresting Officer (Print) L. Nalerio		I.D. # 982		Name Verification (Printed by Arrestee) (PRINT) BU#116516		Page 1 OF 1	
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other		Intake Deputy I.D. #		Pouch #		Transporting Officer L. Nalerio		I.D. # 982	
Agency BBPD		Witness here is subject Signed with an "X"									

APR 15 2021

APR 15 2021 7:00 PM

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 14th DAY OF April 2021 AT 2250 ☐ A.M. ☒ P.M.

CASE #: 21-019249

DEFENDANT: Kane, Paul, Colton

PERSONAL CONTACT/DRIVING PATTERN/OBSERVATION OF DRIVER:

On 4/15/21 at approximately 2250 hours I responded to 2200 N Congress Ave (Parking lot of Ross) in reference to a motor vehicle accident. Upon arrival I made contact with the driver of V2 Gee Kim, who advised that V1 driver Paul Kane, side swiped V2 as, Kane was driving north through the parking lot. Kim advised that when Kane parked the vehicle, and exited the driver side door, Kane almost lost balance to the point where he fell. Furthermore, Kim advised that he could smell alcohol coming from Kanes' mouth. Kim advised to BBPD dispatch that he believed that V1 driver was "drunk". I stood by with Kane while Ofc. Winland conducted the crash investigation. While observing, Kane, I saw that he was unsteady on his feet and while standing still, he was swaying heavily back and forth. While Kane spoke to me, I could smell a unknown alcoholic odor coming from his mouth. The more that Kane spoke to me, the more the smell intensified. Kane's speech was also slow. Kane told me that he only had one beer while he was at the Miller Ales house. Kane told me that he was at Millers Ale house by himself. Once Winland finished the crash investigation, I advised Kane that I could be conducting a DUI investigation; I advised Kane of his Miranda Rights; which he agreed to cooperate.

I asked Kane how much he had to drink and he told me 1 beer at first. Kane then switched his answer and told me that he had two beers. Based on my observations, swaying, unbalance, smell of breath, I requested Kane to submit to Standardized Field Sobriety Exercises. Kane agreed to participate in SFST'S. Kane told me that he Sclerosis but had no further information. Kane is not on any medication and does not have issues with his eyes sight that is not corrected by glasses.

HORIZONTAL GAZE NYSTAGMUS:

- | | |
|---|--|
| <input checked="" type="checkbox"/> Left eye does not follow smoothly | <input checked="" type="checkbox"/> Right eye does not follow smoothly |
| <input type="checkbox"/> Left eye prior to 45 degrees | <input type="checkbox"/> Right eye prior to 45 degrees |
| <input checked="" type="checkbox"/> Distinct jerking in left eye at maximum deviation | <input checked="" type="checkbox"/> Distinct jerking in right eye at maximum deviation |
| <input type="checkbox"/> Vertical Nystagmus in left eye | <input type="checkbox"/> Vertical Nystagmus in right eye |

WALK AND TURN:

The second exercise was the Walk and Turn. The task was demonstrated and explained to Kane and Kane advised that he understood it. Kane had trouble with balance while in ready position. Kane lost balance twice in the starting position. Kane did no count like instructed. Kane used his arms for balance. Kane did not conduct heel and toe touching steps like instructed. Kane stepped off the line and lost balance. Kane did not conduct a proper turn like instructed.

ONE LEG STAND:

The third exercise was the One Leg Stand. The task was demonstrated and explained and Kane advised that he understood it. Kane did not count. Kane used his arms for balance. Kane lost balance and put his foot down. Kane was unable to complete the exercise like instructed.

FINGER TO NOSE:

The fourth exercise was the Finger to Nose. Kane missed his nose several times. Kane was swaying. Kane did not bring his finger back down automatically like instructed.

ROMBERG/ALPHABET:

The fifth exercise was the alphabet; Kane completed this exercise like instructed.

Based on the initial indicators that I observed on scene, during the encounter and the indicators that I observed during the SFST exercises, I placed Kane under arrest for DUI (316.193.3C1).

I then transported Kane to PBCJ BAT. I arrived at the facility at 2349 hours and I started my 20 minutes observation at 2350 . Upon completion I requested Kane to provide a sample of his breath to determine the alcohol content, Kane blew a .055 at 0017 and a .057 at 0021 on 4/15/21. Based on the impairment showing from SFST'S, I asked Kane for a urine sample; Which he provided. It should be noted that the time lapse from first being on scene and when Kane provided breath test; was approximately an hour or more. When Kane was searched incident to arrest, a Ale house receipt showed that Kane bought four shots and two pints of beer. Kane did tell me that he was drinking alone at the Ale house. Kane completed Q&A'S (submitted) Urine sample was submitted into BBPD EVIDENCE for further processing.

The following instrument was sworn to before me this 14 day of April 2021

By: Nalerio


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

 982
Signature of Arresting Officer





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

PBSO CASE # 21-055600 PBSO ZONE 6-32
AGENCY CASE # 21-019249 CRASH CASE # Same
TIME OF STOP/CRASH 2250 DATE 4-14-21 DAY Wed
SUBJECT'S NAME Paul Kane RACE W SEX M
HGT 5'11 WGT 180 DOB 2-10-95
LOCATION 2200 N Congress Ave, Boynton Beach, FL
ARRESTING OFFICER'S NAME & ID Nalerio #982 AGENCY BBPD
DIVISION: Patrol NOTIFIED BY COMMO Y
ARRIVAL AT FACILITY 23:50
BREATH RESULTS: Arrest Time 2326
1. .055
2. .057
3. Urine
4. _____
TESTING OFFICER'S ID 16877

TESTING FACILITY TASK REPORT

AGENCY: BBPD

SUBJECT: Kane, Paul C. CASE NUMBER: 21-055600

DATE: Apr 15, 2021 VIDEO DVD NUMBER: N/A

BEGINNING TIME: 00:11 ENDING TIME: 00:30

BREATH TESTS RESULTS: 1) .055 TIME 00:17 A.M. ☒ P.M. ☐ 2) .057 TIME 00:21 A.M. ☒ P.M. ☐
3) N/A TIME A.M. ☐ P.M. ☐ 4) N/A TIME A.M. ☐ P.M. ☐

BREATH OPERATOR: R. Ragin # 16877

MAINTENANCE TECHNICIAN: Jason Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: Mumbled

ATTITUDE: Slow, cooperative, fidgety

CLOTHING: Gray pants, black t-shirt, black flip-flops

MEDICAL CONDITIONS: None

MEDICATIONS: None

OTHER:

Eyes sleepy and red.
Stated in Q&A he had 2 beers.

COMMENTS:

Arrived at center A/O started 20 minute observation period at 23:50 hrs.

Subject agreed to take test. Once Tech started putting info in the instrument subject stated no.

A/O read I/C and subject acknowledged he understood I/C and would perform breath test.

Tech read test results.

Subject acknowledged he understood test results.

A/O requested to provide urine at 00:23 hrs.

A/O read I/C.

Subject stated he understood I/C and agreed to provide urine again at 00:25 .

A/O read rights.

Subject stated he understood rights.

A/O attempted Q&A.

Subject answer questions.

Urine provide @ 00:34

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: 80-006240 Software: 8100.27
Date of Test: 04/15/2021

Date of Last Agency Inspection: 04/09/2021
Observation Period Began: 23:50
Subject's Name: PAUL C KANE

DOB: 02/10/1995 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		00:16
	Air Blank	0.000	00:16
	Control Test	0.080	00:16
	Air Blank	0.000	00:17
	Subject Sample #1	0.055	00:17
	Air Blank	0.000	00:18
	Air Blank	0.000	00:20
	Subject Sample #2	0.057	00:21
	Air Blank	0.000	00:21
	Control Test	0.080	00:22
	Air Blank	0.000	00:22
	Diagnostics Check OK		00:22

Cylinder Lot: 22620080A2
Exp: 10/05/2022

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 RENEE M RAGIN, 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: [Signature] Date: 04/15/21

Sworn to (or affirmed) before me this 15 day of April, 2021

[Signature] 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.

CASE #: 21-019249

DEFENDANT: Kane, Paul, Colton

Arresting Officer: Nalerio

Address: 2100 High Ridge Rd, Boynton Beach

Phone Numbers: Home: Work: (561) 742-6100

Name: GEE YOUNG KIM

Address: 3860 MAX PL APT 205, Boynton Beach

Phone Numbers: Home: 561-777-9220 Work:

Can testify to: Wheel Witness

Name:

Address:

Phone Numbers: Home: Work:

Can testify to:

Name:

Address:

Phone Numbers: Home: Work:

Can testify to:

Name:

Address:

Phone Numbers: Home: Work:

Can testify to:

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Can testify to:

Name:

Address:

Phone Numbers: Home: Work:

Can testify to:



**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	<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"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2021009087	Date: 4/15/2021
	Specialist Name/ID: M. Tookes #8557