J# 353352 22MM6160MB P#357

Arrest / Notice to Appear
Juvenile Referral Report

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

ADMINISTRATIVE

OBTS Number:	Agency ORI Number: FL 0502700	Agency Name: PALM SPRINGS POLICE DEPARTMENT	Agency Report Number: 82- 2022-017188

☑ Marsy's Law CVI FL. Const. Art.1 § 16(b)

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

Weapon Seized / Type: | Multiple Clearance Indicator:

Location of Arrest (Including Business Name): JFK Medical Center, 5301 S. Congress Ave, Atlantis, FL 33462

Location of Offense (Business Name, Address): 10th Ave N and Davis Rd

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
7/27/22	0946					

DEFENDANT

Name (Last, First, Middle): Gabourel, Breanna D. | Alias:

Race: W – White I – American Indian B – Black O – Oriental/Asian: W | Sex: F

Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
06/24/1998	4'11	120	Bro	Bro	Light	Small

Scars, Marks, Tattoos, Unique Physical features (Location, Type, Description): Tattoos on left rib cage and right ankel

Marital Status: single | Religion: none | Indication Of: Alcohol Influence / Drug Influence

Local Address (Street, Apt, Number) (City) (State) (Zip): 1645 Renaissance Cmns, Apt 520, Boynton Beach, FL 33426 | Phone: 561-398-4967 | Residence Type: 1 City 2 County 3 Florida 4 Out of State: 2

Permanent Address (Street, Apt, Number) (City) (State) (Zip): Same as above | Phone: | Address Source: FL DL

Business Address (Street, Apt, Number) (City) (State) (Zip): | Phone: | Occupation: Hospitality

D/L Number, State	Social Security Number	INS Number	Place of Birth (City, State)	Citizenship
G164064987240	[redacted]		WPB, FL	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 ☐ Other ☐ Legal Custodian | Name (Last, First, Middle): | Residence Phone:

Local 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 355-2526) informed of any change of address. ☐ Yes by: (name) ☐ No: | School Attended | Grade

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

CODE

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

Drug Type: B. Barbiturate H. Hallucinogen P. Paraphernalia/Equipment U. Unknown N. N/A C. Cocaine M. Marijuana Z. Other A. Amphetamine E. Heroin O. Opium/Deriv S. Synthetic

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
Domestic Battery	1	Yes	784.03(1)(a)(1)	

Drug Activity	Drug Type	Amount / Unit	Offense Number	Warrant / Capias Number	Bond
N	N	0	2022-017188		

CHARGE

Charge Description: | Counts: | Domestic Violence: | Statute Violation Number: | Violation of ORD #:

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

CHARGE

Charge Description: | Counts: | Domestic Violence: | Statute Violation Number: | Violation of ORD #:

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

CHARGE

Charge Description: | Counts: | Domestic Violence: | Statute Violation Number: | Violation of ORD #:

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

NOTICE TO

☐ Instruction No. 1 Mandatory Appearance in Court

☐ Instruction No. 2 You need not appear in Court but must comply with instructions on Reverse side.

Location (Court, Room Number, Address): CJC - 3228 Gun Club Rd. WPB, FL 33406

Court Date and Time Month: Day: Year: Time: ☐ A.M. ☐ 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

ADMIN.

HOLD for other agency Name: No Holds

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Signature of Arresting Officer: | Name Verification (Printed by Arrestee) (PRINT)

Name of arresting Officer (Print): McDeavitt | I.D.#: 151

Intake Deputy: | I.D.#: 5057 | Pouch #: | Transporting Officer: McDeavitt | I.D.#: 151 | Agency: PSPD

Witness here if subject signed with X | Page 1 of 1

F4261 DISTRIBUTION: 1 COURT COPY, 2 - STATE ATTORNEY, 1 - AGENCY, 1 - JAIL, 1 - DEFENDANT(NTA'S ONLY) PDF FORM 10/2012

PROBABLE CAUSE AFFIDAVIT

ADMIN.

OBTS Number		1. Arrest 3. Request for Warrant 2. N.T.A. 4. Request for Capias	1	Juvenile ☐
Agency ORI Number FL 0502700	Agency Name PALM SPRINGS POLICE DEPARTMENT	Agency Report Number 82- 2022-017188		
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
Gabourel, Breanna D.				06/24/1998

CHARGES

Charge Description	Charge Description
Domestic Battery	
Charge Description	Charge Description

VICTIM

[redacted]

The undersigned certifies and swears that he/she has just and reasonable grounds, and does believe the above named Defendant committed the following violation of law. The person taken into custody....

☐ Committed the below acts in my presence.

☒ was observed by Victim who told Ofc. McDeavitt that he/she saw the arrested person commit the acts below.

☒ Confessed to Ofc. McDeavitt admitting to the below acts.

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

On the 27th day of July 2022 at 0917 ☒ A.M. ☐ P.M. (Specifically include facts constituting cause for arrest.)

☑ Marsy's Law CVI FL. Const. Art.I § 16(b)

(PROBABLE CAUSE STATEMENT)

On 07/27/22 at approximately 0917 hours, I responded to a domestic battery at 10th Ave N and Davis Rd, Palm Springs, FL 33461. Dispatch advised, the incident occurred in a vehicle while traveling through our city, the caller stated, [redacted] punched him while she was driving. The caller advised dispatch, the driver (defendant) of the vehicle finally stopped the vehicle at JFK medical center located at, 5301 S. Congress Ave, Atlantis FL 33462. Ofc. Lambe responded to the scene as a backup unit.

I arrived at JFK Medical center mentioned above and made contact with the victim. The victim was positively identified by FL driver license as [redacted] the defendant was positively identified by FL driver license as Breanna D. Gabourel (DOB: 06/24/1998). [redacted] who was later identified as [redacted] was not present during the physical altercation.

When I first spoke with [redacted] he stated Breanna and him were arguing. The arguing escalated and Breanna punched him in the left side of his chest. I asked [redacted] to lift his shirt up, where I observed a red swollen mark on the left side of his chest. I made contact with Breanna who was still in the vehicle, I asked her to exit the vehicle. I instructed Breanna to face away from me and place her hand to the rear. I handcuffed Breanna to the rear, checked for proper spacing and double locked, then placing Breanna in the rear of my marked patrol vehicle (PS196).

I conducted a recorded statement with Breanna and read her Miranda warning, which she understood her rights and spoke to me. Breanna stated the following:
Her and [redacted] just dropped [redacted] off at daycare and they were arguing about [redacted] using her car last night. Breanna thinks [redacted] is using her vehicle for illegal activities and does not want him to use her vehicle anymore. Breanna advised, her and [redacted] always arguing about things, but today he pushed buttons and made her angry. Breanna admitting to slapping [redacted] in left side of the chest while she was driving, but denied punching him.

Ofc. Lambe conducted a recorded statement with [redacted] and he stated the following:
Him and Breanna were arguing about her taking him home because [redacted] did not want her to bring him home. [redacted] and Breanna dropped of [redacted] at daycare before the incident occured. [redacted] said, around 10th Ave N and Davis Rd. Breanna punched him in the chest one time while she was driving the vehicle. [redacted] advised, multiple times he did not want Breanna to go to jail.

Based on the investigation, injury, and statements Breanna is charged and arrested for Domestic Battery pursuant to F.S.S 784.03(1)(a)(1). I transported Breanna to the Palm Beach County Jail.

STATE OF FLORIDA
COUNTY OF PALM BEACH

151
Signature of Arresting/Investigating Officer

The foregoing instrument was sworn to or affirmed and subscribed before me this 27th day of July 2022 by Ofc. McDeavitt #151

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced: Known

Signature of Notary Public/Clerk of Courts/Police Officer

PALM SPRINGS POLICE DEPARTMENT

DOMESTIC VIOLENCE SUPPLEMENTAL PROBABLE CAUSE

(submit this form with the original Probable Cause affidavit)

Case #: 2022-017188 Date: 07/27/22 ☑ Marsy's Law CVI
FL. Const. Art.1 § 16(b)

Suspect: Breanna D Gabourel DOB: 06/24/22 Race: W Sex: F

Victim: [redacted]

Victim and defendant relationship: [redacted] Live Together: ☐ Yes ☑ No

Victim Statement:	☑ Yes	☐ No	If yes, ☐ written ☑ recorded ☐ oral
Defendant Statement:	☑ Yes	☐ No	If yes, ☐ written ☑ recorded ☐ oral
Weapons used?	☐ Yes	☑ No	
Drugs/Alcohol Involved?	☐ Yes	☑ No	
Prior History of Domestic Violence?	☐ Yes	☑ No	
Victim Pregnant?	☐ Yes	☑ No	Name/DOB of Children
Do Children Live in The Home?	☐ Yes	☐ No	N/A
DCF Notified?	☐ Yes	☑ No	
Act Committed in Front of Minors?	☐ Yes	☑ No	
Medical:			
Were Injuries Observed?	☑ Yes	☐ No	
Was Treatment Provided?	☐ Yes	☑ No	
Treated at Scene?	☐ Yes	☑ No	EMS/Run #
Treated at Hospital?	☐ Yes	☑ No	

Hospital: Physician(s):

Violation of No Contact Order?: ☐ Yes ☑ No

If so, Agency: Case Number:

VICTIM EMERGENCY CONTACT INFORMATION

[redacted]

Officer Name/ID: McDeavitt #151

VICTIM NOTIFICATION FORM

This form must be completed when one of the following crime(s) has been commited:

- **Homicide** (Ch. 782)
- **Attempted Murder**
- **Stalking** (F.S. 784.048)
- **Sexual Offense** (Ch. 794)
- **Attempted Sexual Offense**
- **Domestic Violence** - **(This includes any assault, aggravated assault, battery, aggravated battery, sexual assault, sexual battery, stalking, aggravated stalking or any criminal offense resulting in physical injury or death of one family member or household member by another, who is or was residing in the same single dwelling.)**

Upon completion, this form must accompany the booking paperwork. If applying for a warrant, attach this form to the filing packet.

1. Incident Report #: 2022-017188 Agency: Palm Springs
   Offense: Domestic Violence
   Suspect/Offender: Breanna D Gabarel
   D.O.B. 06/24/1998 Race: White Sex: Female

2. Warrant #(s): _____

3.a. [redacted]

b. [redacted]

NOTE: PURSUANT TO F.S. 119.07, THE CONTENTS OF THIS FORM MAY BE SUBJECT TO CONFIDENTIALITY.

Victim/Relation Notification Waiver and Confidential Information Request.

(check applicable boxes)

☐ **Waiver:** **I choose not to be notified when the arrestee is released from custody.**

☐ **Confidential:** **I request the information on this form be kept confidential (applicable only to sexual battery, stalking, child abuse, harassment or domestic violence cases).**

Signature of person waiving notification: _____

Printed name of person waiving notification: _____

Deputy's Name: _____ I.D.# _____ Date: _____

White/Corrections or State Attorney (Warrant Application) **Yellow/Warrants Section** **Pink/Central Records**

SUSPECT/OFFENDER: _____ **(FOR WARRANTS USE ONLY)** COURT CASE/WARRANT#: _____

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: 2022019345	**Date:** 7/28/2022
	Specialist Name/ID: Pinkneya/7796