

22CT18154 NB

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

OBT Number		Agency ORI Number FLO 5 0 2 6 0 0		Agency Name PALM BEACH GARDENS POLICE DEPARTMENT		Agency Report Number 78 - 22-005109	
Charge Type: Check as many as apply.		1. Felony <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/>		3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input checked="" type="checkbox"/>		5. Ordinance <input type="checkbox"/> 6. Other <input type="checkbox"/>	
Location of Arrest (Including Name of Business) Garden Lakes Dr/N Military Trl, Palm Beach Gardens, FL		Location of Offense (Business Name, Address) Garden Lakes Dr/N Military Trl, Palm Beach Gardens, FL, 33410					
Date of Arrest 10/26/2022	Time of Arrest 23:10	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle KAUFF'S TOWING AND RECOVERY 4701 EAST AVENUE, WPB, FL 33407	
Name (Last, First, Middle) Mantovani, Cara, Lyn				Alias (Name, DOB, Soc. Sec. #, Etc.)			
Race W - White I - American Indian B - Black O - Oriental/Asian	Sex W F	Date of Birth 04/10/1978	Height 504	Weight 170	Eye Color BRO	Hair Color BRO	Complexion LIGHT
Scores, Marks, Tattoos, Unique Physical Features (Location, Type, Description) NONE				Marital Status M	Religion UK	Indication of Alcohol Influence Drug Influence <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> UK	
Local Address (Street, Apt. Number) 8237 Needles Dr, PBG, FL		(City)	(State)	(Zip)	Phone (305) 898-3959	Residence Type: 1. City 2. County 3. Florida 4. Out of State 1	
Permanent Address (Street, Apt. Number) 8237 Needles Dr, PBG, FL		(City)	(State)	(Zip)	Phone	Address Source FL DL	
Business Address (Name, Street)		(City)	(State)	(Zip)	Phone	Occupation	
DL Number, State M531-112-78-630-0 FL		Soc. Sec. Number		INS Number	Place of Birth (City, State) MIAMI, 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"/> 2. At Large <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"/> 3. Felony <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile
Parent Name (Last, First, Middle)		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 <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 (Phone 355-2526) informed of any change of address. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)				School Attended		Grade	
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property		Value of Property			
Drug Activity N. N/A P. Possess	S. Sell D. Deliver T. Traffic	R. Smuggle E. Use	K. Dispense/ Distribute	M. Manufacture/ Produce/ Cultivate	Z. Other	Drug Type N. N/A A. Amphetamines	B. Barbiturate C. Cocaine E. Heroin
Charge Description DUI		Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 316.193(1)(A)		Violation of ORD #	
Drug Activity N	Drug Type N	Amount / Unit N/A	Offense # 22-005109	Warrant / Capias Number		Bond OK	
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	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"/> Y <input checked="" type="checkbox"/> N	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"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation of ORD #	
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond	
Location of Court (Room Number, Address) NORTH COUNTY COURTHOUSE, 3188 PGA BOULEVARD, PALM BEACH GARDENS, FL 33410 - PH: (561) 662-6700							
Court Date and Time Month NOVEMBER Day 30 Year 2022 Time 10:00 AM <input checked="" type="checkbox"/> 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 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. <i>[Signature]</i> 10/26/2022 Signature of Defendant (or Juvenile and Parent /Custodian) Date Signed							
HOLD for other Agency Name:		Signature of Arresting Officer <i>[Signature]</i>		Name Verification (Printed by Arrestee) 517			
<input type="checkbox"/> Dangerous <input type="checkbox"/> Releated Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other:		Name of Arresting Officer (Print) MOREA		I.D. # 517		(PRINT)	
Intake Deputy J. DUNN 36162		Transporting Officer MOREA		ID # 517		Agency PBFPD	
Witness here if subject signed with an "X"						PAGE 1 OF 1	

0535578

3231



**PALM BEACH GARDENS POLICE DEPARTMENT
DUI TESTING FACILITY INFORMATION SHEET**



PBSO Case #: 22-123179 PBSO Zone: 3-13

Agency Case #: 22-005109 Crash Case #: _____

Incident Information:

Time of Stop/Crash: 2237 Date of Incident: 10/26/2022 Day: Wednesday

Location of Incident: Garden Lakes Dr/N Military Trl, Palm Beach Gardens, FL, 33410

Arrest Information:

Time of Arrest: 23:10 Date of Arrest: 10/26/2022 Day: Wednesday

Location of Arrest: Garden Lakes Dr/N Military Trl, Palm Beach Gardens, FL

Subject's Name: (L) Mantovani, (F) Cara, (M) Lyn

DOB: 04/10/1978 Race: W Sex: F Height: 504 Weight: 170 Hair BRO Eye BRO

Address: 8237 Needles Dr, PBG, FL Phone: (305) 898-3959

Arresting Officer's Name: MOREA ID#: 517

Agency: PBGPD Division: Road Patrol

Breath Results

- 1) _____ at _____ hrs.
- 2) **REFUSED** _____ hrs.
- 3) _____ at _____ hrs.
- 4) _____ at _____ hrs.

--BAT Use--

BAT Notified:	<u>YES</u>
Arrival Time at BAT:	<u>2341</u>
Subject Arrest Time:	<u>23:10</u>

Breath Test Operator: 8656
PBSO

D.U.I. PROBABLE CAUSE AFFIDAVIT

On the 26 day of OCTOBER 2022 at 2310 AM PM

Subject: Mantovani, Cara, Lyn Case Number: 22-005109

Agency: PALM BEACH GARDENS POLICE DEPARTMENT Arresting Officer: MOREA 517

PERSONAL CONTACT

DRIVING PATTERN: (Actual Physical Control; Physical Evidence or Statements Putting Defendant Behind Wheel of Vehicle)

I was conducting stationary speed enforcement at Elm Ave/N Military Trl in Palm Beach Gardens, FL using my STALKER II MDR RADAR (AS015788 / KC179836). I observed a vehicle traveling southbound towards me at a high rate of speed. My radar obtained a speed reading of 61 MPH. I got behind the vehicle, a white Porsche utility bearing FL Tag: LCAK78. While behind the vehicle, I observed the vehicle fail to maintain its lane, driving over the white line and almost striking the curb. I initiated a traffic stop on this vehicle which came to a final stop at Garden Lakes Dr/N Military Trl. I contacted the driver and sole occupant of the vehicle identified to me via FL driver's license as, Cara Mantovani (W/F, DOB: 04/10/1978).

OBSERVATION OF DRIVER:

The driver appeared to be nervous, had red eyes and slow to respond.

DRIVER STATEMENTS:

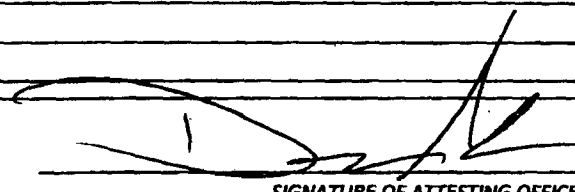
The driver stated she was on her way home from DAS Beer Garden in Jupiter. The driver stated she had been drinking and started drinking at around 5pm. The driver's speed was blurred. The driver kept asking the same questions.

ODORS: strong odor of alcohol emanating from her breath

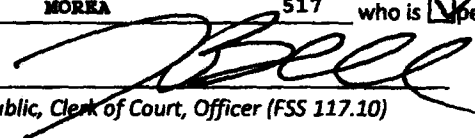
GENERAL OBSERVATIONS


SPEECH: slurred
ATTITUDE: not cooperative
CLOTHING: pink blouse / wedge heels
MEDICAL/OTHER: N/A

STATE OF FLORIDA
COUNTY OF PALM BEACH


SIGNATURE OF ATTESTING OFFICER

The forgoing instrument was sworn to or affirmed and subscribed before me this 27 day of October 20 22 by MOREA 517 who is personally known to me or produced.


Notary Public, Clerk of Court, Officer (FSS 117.10)

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

STAMP

D.U.I. PROBABLE CAUSE AFFIDAVIT Cont.

Subject: Mantovani, Cara, Lyn

Case Number: 22-005109

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- LEFT EYE**
- Lack of Smooth Pursuit
 - Distinct & Sust. Nystag. at Max. Deviation
 - Onset of Nystagmus Prior to 45 Degrees

- RIGHT EYE**
- Lack of Smooth Pursuit
 - Distinct & Sust. Nystag. at Max. Deviation
 - Onset of Nystagmus Prior to 45 Degrees

Other Observations:

REFUSED

Walk and Turn

REFUSED

One Leg Stand

REFUSED

Rhomberg


REFUSED

Finger to Nose

REFUSED

BREATH RESULTS: 1) N/A @ _____ 2) N/A @ _____ 3) _____ @ _____

STATE OF FLORIDA
COUNTY OF PALM BEACH


SIGNATURE OF ATTESTING OFFICER

The forgoing instrument was sworn to or affirmed and subscribed before me this 27 day of October 20 22 by MOREA 517 who is personally known to me or produced


Notary Public, Clerk of Court, Officer (FSS 117.10)

 JOSHUA BELL
MY COMMISSION #66346006
EXPIRES: JUN 18, 2023
Bonded through 1st State Insurance

STAMP

STATE OF FLORIDA
AFFIDAVIT OF REFUSAL TO SUBMIT TO
BREATH TEST (Commercial Driver's License)

I, MOREA, a duly certified Law Enforcement or Correctional Officer, am a
(Name of Officer reading Implied Consent Warning)

member of PALM BEACH GARDENS POLICE DEPARTMENT, and I do swear
(Name of Law Enforcement Agency)

or affirm that on or about the 26th day of October, 20 22, at 23:10 P.M. A.M.

DRIVER Cara Lyn Mantovani
FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL # M531-112-78-630-0, state of FL, was placed under lawful arrest for

the offense of DUI by MOREA and
(Name of Arresting Officer)

issued citation # AGETQ7E.

That on or about the 27 day of OCTOBER, 20 22, at 0010 P.M. A.M.

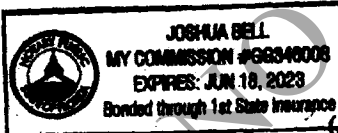
in PALM BEACH County,

I requested that the driver submit to a BREATH test for the purpose of determining its alcohol content. I informed the driver that the refusal to submit to such test would result in the suspension of his or her driving privilege for a period of one (1) year for a first refusal, or for a period of eighteen (18) months if his or her driving privilege had been previously suspended, or if he or she had been previously fined under s. 327.35215, F.S., for refusing to submit to a breath, urine, or blood test. I also informed the driver that he or she commits a misdemeanor by refusing to submit to a lawful test as requested above if his or her driving privilege has been previously suspended, or if he or she has been previously fined under s. 327.35215, F.S., for refusal to submit to a lawful test of his or her breath, urine, or blood. Additionally, I informed the driver that if he or she holds a Commercial Driver's License (CDL), or was operating a commercial motor vehicle, refusal will result in the disqualification of the CDL for a period of one (1) year in the case of a first refusal or permanently if he or she has previously been disqualified as a result of a refusal to submit to any such lawful test. Nonetheless, the driver refused to submit to the test requested.

[Signature]
Signature of Law Enforcement Officer or Correctional Officer

THE AFFIDAVIT MUST BE NOTARIZED OR ATTESTED TO (s. 117.10, F.S.)

The foregoing instrument was sworn and subscribed before me:



(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before me
this 27 day of October, 20 22,
by MOREA, who is
personally known to me or who has produced
[Signature] as identification.

Notary Public [Signature]

Signature of Attesting Officer

Title _____
Date _____

Note: Mail or hand deliver to the designated Bureau of Administrative Reviews office, Department of Highway Safety and Motor Vehicles, with the driver's license, the appropriate copy of the UTC, and the probable cause affidavit.

DUI WITNESS LIST

22-005109

Arresting Officer: MOREA 517 Email: _____
Agency Address: 10500 N Military Trail, Palm Beach Gardens, FL 33410 Phone: (561) 799-4445
Can Testify To: Facts of Case

Backup Officers: Ofc. Trudeau #493
Agency Address: 10500 N Military Trail, Palm Beach Gardens, FL 33410 Phone: (561) 799-4445
Can Testify To: Traffic stop/arrest

Crash Investigator: _____ Email: _____
Agency Address: _____ Phone: _____

Breathalyzer Technician: _____ ID: _____ Agency: PBSO

DRE: _____ ID# _____ Agency Case #: _____
Agency Address: _____ Phone: _____ Email: _____

Name: Ofc. Slaughter #500 Involvement: _____
Address: 10500 N Military Trl, PBG, FL Phone: (561) 799-4445
Can Testify To: search Wheel Witness

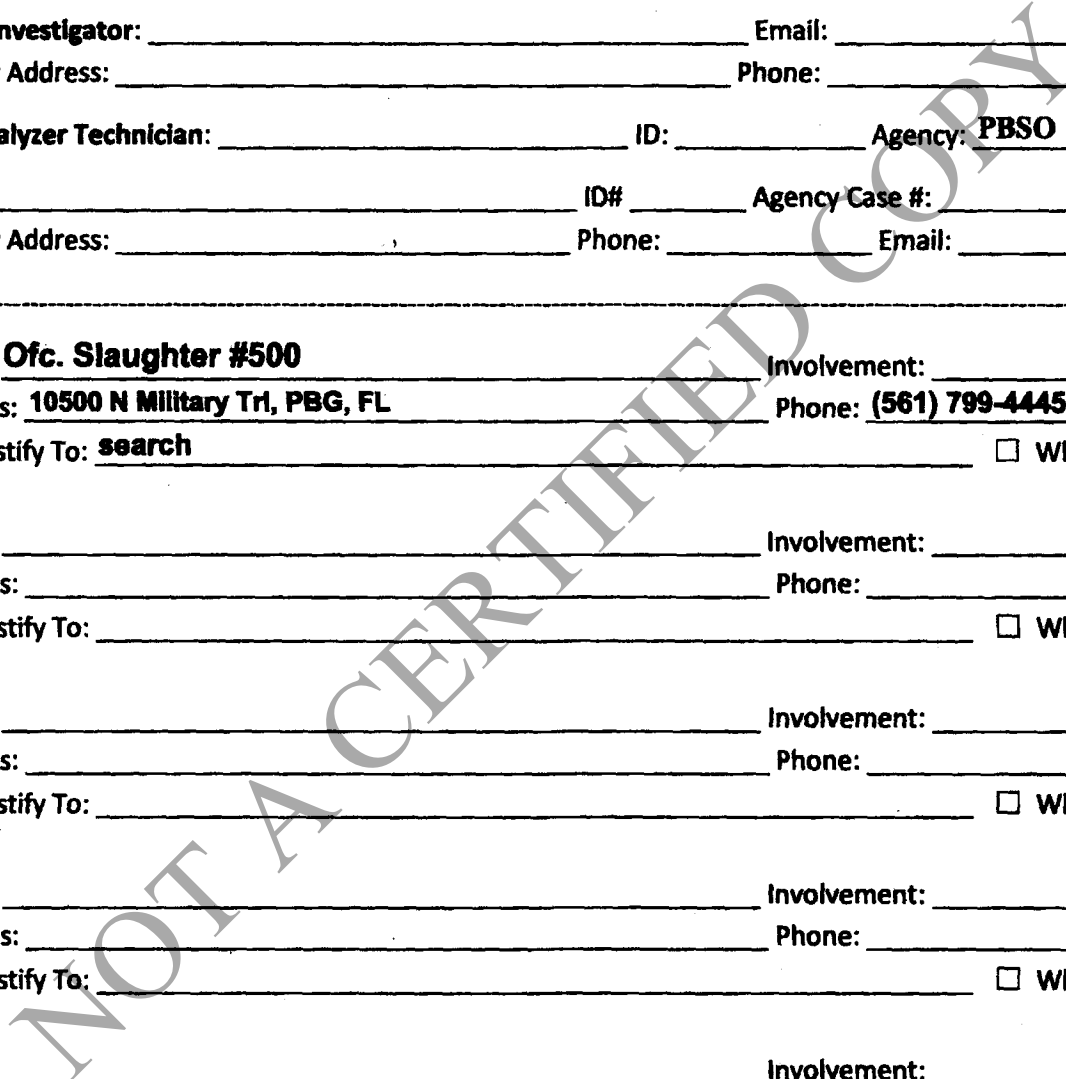
Name: _____ Involvement: _____
Address: _____ Phone: _____
Can Testify To: _____ Wheel Witness

Name: _____ Involvement: _____
Address: _____ Phone: _____
Can Testify To: _____ Wheel Witness

Name: _____ Involvement: _____
Address: _____ Phone: _____
Can Testify To: _____ Wheel Witness

Name: _____ Involvement: _____
Address: _____ Phone: _____
Can Testify To: _____ Wheel Witness

Name: _____ Involvement: _____
Address: _____ Phone: _____
Can Testify To: _____ Wheel Witness



TESTING FACILITY TASK REPORT

AGENCY: PBG
SUBJECT: MANTOVANI, CARA LYN
CASE NUMBER: 22-123179
DATE: Oct 27, 2022
VIDEO DVD NUMBER: N/A
BEGINNING TIME: 0003
ENDING TIME: 0011

BREATH TESTS RESULTS: 1) R TIME 0010 A.M. P.M. 2) XX TIME XX A.M. P.M.
3) XX TIME XX A.M. P.M. 4) XX TIME XX A.M. P.M.

REFUSED

RELATIONSHIP: POSROA J BELL #8656
MAINTENANCE TECHNICIAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH:
ATTITUDE: TALKATIVE, ARGUMENTATIVE
CLOTHING: PINK DRESS, BLACK/BROWN WEDGES
MEDICAL CONDITIONS: NONE
MEDICATIONS: NONE

OTHER:

EYES: GLASSY

COMMENTS:

A/O ARRIVED AT DUI TESTING FACILITY AND BEGAN THE 20 MINUTE OBSERVATION AT 2341 HOURS
SUBJECT STATED SHE WOULD NOT TAKE BREATH TEST
A/O READ I.C AND EXPLAINED
SUBJECT WOULD NOT STATE WHETHER OR NOT SHE UNDERSTOOD I.C
SUBJECT STATED SHE WOULD NOT DO ANYTHING WITHOUT SPEAKING TO A LAWYER FIRST
A/O CALLED A REFUSAL AT 0010 HOURS
A/O READ RIGHTS
SUBJECT STATED SHE UNDERSTOOD HER RIGHTS
SUBJECT ASKED FOR A LAWYER BEFORE QUESTIONING

REFUSED



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: 2022028106	Date: 10/27/2022
	Specialist Name/ID: Chantel Daniels/30347