0538477 23LT3648 PH 906

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

ADMINISTRATION

OBTS Number

Agency ORI Number: 0500200
Agency Name: Boca Raton Police Department
Agency Report Number (N.T.A.'s only): 3 | 2 | 2023-002670

Charge Type: Check as many as apply. ☐ 1. Felony ☐ 2. Traffic Felony ☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other
If Weapon Seized: Enter Type: UNARMED
Multiple Clearance Indicator

Location of Arrest (Including Name of Business): SAME, 50 SE MIZNER BLVD, BOCA RATON, FL 33432
Location of Offense (Business Name, Address): 50 SE MIZNER BLVD, BOCA RATON, FL 33432

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
02/24/2023	15:50	2/24/23				Emerald Towing

DEFENDANT

Name (Last, First, Middle): GINTER, VAN LEONARD
Alias (Name, DOB, Soc. Sec. #, Etc.): Alias:

Race (W - White, B - Black, I - American Indian, O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	05/24/1949	6'03	230	HAZEL	GRAY	LIGHT	Medium

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description):
Marital Status: M
Religion: CATHOLIC
Indication of: Alcohol Influence ☒ Yes ☐ No ☐ Unk. ☐ Drug Influence

Local Address (Street, Apt. Number) (City) (State) (Zip): 327 E ROYAL PALM RD # 201, BOCA RATON, FL 33432
Phone:
Residence Type: 1. City 3. Florida 2. County 4. Out of State: 1

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 327 E ROYAL PALM RD # 201, BOCA RATON, FL 33432
Phone:
Address Source: DEFENDENT

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

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
G536872491840 / FL	[redacted]		NEW YORK, NY, United	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:
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

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: ☐ No:

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. Disperses/ 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

Charge Description	Statute Violation Number	Violation of ORD #
DUI (INJURY TO PERSON OR PROPERTY)	316.193(3C1).	

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/	[illegible]	1	☐ Y ☒ N		OR

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

INTAKE

Health / Apparent Physical Condition of Defendant:
Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries
Explain:

Check which applies: ☐ Released O.R. ☐ Released to Parent/Guardian ☐ T.O.T. County Jail ☐ Posted Bond ☐ South County Mental Health
PROPERTY - Received By | Released By | Released To

Transported By | Date Transported | Time Transported | Other

NOTICE TO APPEAR

☐ INSTRUCTION NO. 1 - Mandatory appearance in court
☒ 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: 3/23/2023 0830 am

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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.

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

No Photo Available

ADMIN

HOLD for Other Agency: NO DETAINER
☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other
Issued Deputy's I.D.: DS MACK 3880 | Pouch #

Signature of Arresting Officer:
Name of Arresting Officer (Print): FELIX, R. M. | I.D. #: 835
Transporting Officer: Howard | I.D. #: Cole | Agency: BRPD

Name Verification (Printed by Arrestee) (PRINT):
Witness here if subject signed with an "X".

PAGE 1 OF 1

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[redacted]

PROBABLE CAUSE AFFIDAVIT

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

CRIMINAL

Agency ORI Number	Agency Name	Agency Report Number
FL FL0500200	BOCA RATON POLICE DEPARTMENT	3 | 2 | 2023-002670

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
GINTER, VAN LEONARD		W	M	05/24/1949

CHARGES

Charge Description	Charge Description
316.193(3C1) DUI- PROPERTY DAMAGE/ INJURY TO PROPERTY	

VICTIM

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

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 resonable 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 24 day of February, 2023 at 15:50 (Specifically include facts constituting cause for arrest.)

MVR availble

On 02/24/2023, I responded to 50 SE Mizner Blvd, in reference to a traffic crash investigation. Upon my arrival, I met with CSO Boylston, who was handling the crash investigation. CSO Boylston informed me that V1, a 2000 Mercedes SUV Florida baring FL plate VGG1 had collided with a stopped (V2) 2018 Cadillac 4 door bearing Fl tag# ESKT11 in the east bound lanes of SE Mizner Blvd. See CSO Boylston for report for further information.

I then spoke with D2 who stated that while traveling east on E Royal Palm Rd, he was stopped in traffic and V1 Side-swiped his vehicle. D2 stated that he observed Van Ginter as a sole occupant and driver of V1, he observed D1 stumble out of the vehicle and have to be assisted in getting back up. D2 noted that he smelled a strong odor of alcohol. D2 provided a sworn statement which was captured on MVR.

I then observed Ginter on the sidewalk un-able to keep his balance. I walked over to him and informed him that the crash investigation was complete, and I was now conducting a DUI investigation. I read Ginter his constitutional rights from a pre-printed BRPD issued card. It should be noted that Ginter kept closing his eyes and was having a hard time keeping his balance. While speaking with Ginter I observed that his eyes were red and glassy, and he had an overwhelmingly strong odor of an unknown alcoholic beverage emanating from his breath. Ginter stated that he didn`t remember what happened and how he got to the scene. I then asked Ginter if he was willing to perform FST`s on the side of the road to dispel my alarm of a possible DUI and he stated yes. Upon Ginter trying to walk on the sidewalk, he could not sustain his balance and had to be assisted by Officer`s Phillips and Vick on the scene.

Upon given direction on the first task, which was the Horizontal Gaze Nystagmus, I

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

CARUSO, MARK RICHARD
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

02/24/2023
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

FELIX, REYSON ARIEL (835)
NAME OF OFFICER (PLEASE PRINT)

02/24/2023
DATE

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

PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

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

ORI Number	Agency Name	Agency Report Number
FL FL0500200	BOCA RATON POLICE DEPARTMENT	3 | 2 | 2023-002670

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

Special Notes:

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
GINTER, VAN LEONARD		W	M	05/24/1949

PROBABLE CAUSE STATEMENT

observe Ginter was having difficulties standing by himself. Due to his inability to stand upright on his own I ended the tasks for his own safety. Based on my investigation, and the totality of the circumstances, I found probable cause to believe that, at the time of the crash, Ginter was operating a vehicle within the state of Florida while impaired by alcohol and/or chemical or controlled substances. Ginter was placed under arrest for DUI per F.S.S. 316.193(3c1).

Ginter was transported to BRPD booking for post arrest processing and the administration of a breath test. Officer Coon (ID794) (Breath Test Operator) responded to BRPD booking and assisted with the BAT room procedures. Following a 20-minute observation, Ginter was asked to provide a sample of his breath for the purpose of determining the alcohol content. On the first test, Ginter provided one sample of .248 and second sample was .254. See DUI Influence Report for further.
Vehicle was towed by Emerald from the scene.

Ginter was transported to Boca Raton Regional Hospital for medical clearance and later turned over to PBSO at Palm Beach County Jail.

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

CARUSO, MARK RICHARD
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

02/24/2023
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

FELIX, REYSON ARIEL (835)
NAME OF OFFICER (PLEASE PRINT)

02/24/2023
DATE

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

202300 2670

GINTER, VAN L.

1517

1533

DUI INFLUENCE REPORT

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BOCA RATON POLICE SERVICES DEPARTMENT
100 NW 2nd Avenue
Boca Raton, FL 33432

BOCA RATON POLICE SERVICES DEPARTMENT

DUI INFLUENCE REPORT – PART I

On the _____ day of _____, at _____ AM/PM:

Subject: _____ Case Number: _____

PERSONAL CONTACT

Driving Pattern: _____

_____

_____

_____

_____

_____

Observation of Driver: _____

_____

_____

_____

_____

_____

Driver's Statement: _____

_____

_____

_____

Odors: _____

_____

GENERAL OBSERVATIONS

Speech: _____

Attitude: _____

Clothing: _____

Medical Problems: _____

Medications: _____

Other: _____

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Horizontal Gaze Nystagmus:

☐ Left eye does not follow smoothly
☐ Left eye jerks at 45 degrees angle or less
☐ Distinct jerking left eye maximum deviation
☐ Right eye does not follow smoothly
☐ Right eye jerks at 45 degrees angle or less
☐ Distinct jerking right eye maximum deviation

Can not do, Why? _____

Walk and turn: _____

_____

_____

_____

_____

_____

Can not do, Why? _____

One leg stand: _____

_____

_____

_____

_____

_____

Can not do, Why? _____

Finger to nose: _____

_____

_____

_____

_____

_____

Can not do, Why? _____

Alphabet (speech pattern): _____

Can not do, Why? _____

Breath/Blood test results: _____

State of Florida, County of Palm Beach,
Sworn and subscribed before me this _____ (date) by _____.

_____ _____
Notary/Clerk of Court/ Officer (FSS 117.10) Date

_____ _____
Signature of Arresting Officer Name of Officer (print)

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ARRESTING OFFICER: OFC. FELIX

Name: OFC. FELIX Phone # 5613686201 Work # _____

Address: 100 NW 2ND AVE, BOCA RATON, FL, 33432

Can testify to: DUI INVESTIGATION

Name: OFC. PHILLIPS Phone # 5613686201 Work # _____

Address: 100 NW 2ND AVE, BOCA RATON, FL, 33432

Can testify to: SCENE SAFETY

Name: OFC. VICK Phone # 5613686201 Work # _____

Address: 100 NW 2ND AVE, BOCA RATON, FL, 33432

Can testify to: SCENE SAFETY

Name: OFC LOSN Phone # 5613686201 Work # _____

Address: 100 NW 2ND AVE, BOCA RATON, FL, 33432

Can testify to: BREATH TEST

Name: OFC. VALDES Phone # 5613686201 Work # _____

Address: 100 NW 2ND AVE, BOCA RATON, FL, 33432

Can testify to: SCENE SAFETY

Name: CSO BOYLSTON Phone # 5613686201 Work # _____

Address: 100 NW 2ND AVE, BOCA RATON, FL, 33432

Can testify to: CRASH INVESTIGATION

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

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BOCA RATON POLICE SERVICES DEPARTMENT

DUI INFLUENCE REPORT – PART II

To be filled out at testing facility

Agency Case # 2023002670

I. INTRODUCTION (Instrument Operator faces video camera)

A. The day is FRIDAY (day), FEBRUARY (month), 24 (date), 2023 (year).

B. The time is now approximately 1555 AM/(PM).

C. The following is in reference to case number 2023002670.

D. Present at this time is OFC. FELIX, OFC. COON (Officer's Name) of the Boca Raton Police Department.

E. Officer FELIX, have you arrested VAN GINTER (Defendant's name) in violation of Florida State Statute 316.193?

F. Did this violation occur within the City of Boca Raton, Palm Beach County, Florida? YES

G. (Mr)/Mrs./Ms. GINTER, I am required to inform you these proceedings are being video recorded.

Operator Note: *Video record breath request, breath sample, and interview.*

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II. AT THIS TIME THE ARRESTING OFFICER WILL REQUEST A BREATH SAMPLE.

Note: Read only the paragraph applicable to the type of test you are requesting.

A. I am now requesting that you submit to a lawful test of your **BREATH** for the purpose of determining its alcohol content.

B. I am now requesting that you submit to a lawful test of your **URINE** for the purpose of determining the presence of chemical or controlled substances.

C. I am now requesting that you submit to a lawful test of your **BLOOD** for the purpose of determining its alcohol content and the presence of chemical or controlled substances.

IMPLIED CONSENT WARNINGS

Note: Read only if the subject does not comply with your request.

I am OFC. FELIX of the BOCA RATON PD.

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 Signature: SEE VIDEO

Note: Also read for CDL holders:

IN ADDITION, your refusal to submit will result in the loss of your commercial privileges for one year from today. If this is your SECOND REFUSAL, you will be permanently disqualified from operating a commercial motor vehicle.

Note: After reading the implied consent warning, the arresting officer must request a breath sample again.

(IF REFUSAL THEN)

At this time Mr./Mrs./Ms. GINER has refused to submit to a breath test.

The date is FEBRUARY 24 2023, and the time is _____ AM/PM.
(month) (day) (year)

A refusal form will be completed by the arresting officer.

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BOCA RATON POLICE SERVICES DEPARTMENT

JUVENILE CONSTITUTIONAL WARNINGS

Rights of suspects prior to custodial questioning.
Identify yourself and state:

I am required to warn you before you make any statement that you have the following Constitutional rights:

) You have the right to remain silent and not answer any questions. *Tell me in your own words what you think this means.*
(You do not have to talk to me or answer any questions about this offense. You can be quiet if you want.)

) Any statement you make must be freely and voluntarily given. *Tell me in your own words what you think this means.*
(If you do talk to me it has to be because you want to and not because anyone is forcing you to speak.)

) You have a right to the presence and representation of a lawyer of your choice before you make any statement and during any questioning. *Tell me in your own words what you think this means.*
(You can talk to a lawyer before we ask you any questions and you can have him/her with you now, during our questioning.)

) If you cannot afford a lawyer, you are entitled to the presence and representation of a court appointed lawyer before you make any statement and during any questioning. *Tell me in your own words what you think this means*
(If you do not have money for a lawyer and you want one, a lawyer will be given to you for free.)

) If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent. *Tell me in your own words what you think this means.*
(If you decide to talk to me then change your mind, you can stop answering my questions at any time.)

) I can make no threats or promises to induce you to make a statement. This must be of your own free will. *Tell me in your own words what you think this means*
(I am not allowed to threaten you or make you any promises to get you to talk to me. If you decide to talk, it must be because you want to.)

) Any statement can be and will be used against you in a court of law. *Tell me in your own words what you think this means*
(Anything you say to me can and will be told to the judge or a jury in court. A judge is a person who decides if you have done something wrong. Sometimes a group of people called a jury decide this, but the Judge is the person who decides what punishment you get.)

) Do you understand these rights as I have read them to you, and do you wish to speak to me?

gned: _____ Date: _____ Time: _____

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BOCA RATON POLICE SERVICES DEPARTMENT

TESTING FACILITY TASK REPORT

SUBJECT: GINGER, VAN

CASE #: 2023002670 DATE: 02/24/23

BREATH TEST RESULTS

1) TIME 1601 AM/PM 2) TIME 1604 AM/PM

3) TIME _____ AM/PM 4) TIME _____ AM/PM

BREATH OPERATOR: OFC. COON

MAINTENANCE TECHNICIAN: OFC. CRAWFORD

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED, SLOW, INCOHERANT

ATTITUDE: JOLLY, COOPERATIVE

CLOTHING: WHITE SHIRT, BLUE SHORTS

MEDICAL CONDITION: _____

OTHER: HIP SURGERY 2 YEARS AGO

COMMENTS: _____

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Identify yourself and state:

I am required to warn you before you make any statement that you have the following Constitutional rights:

(1) You have the right to remain silent and not answer any questions.
(2) Any statement you make must be freely and voluntarily given.
(3) You have a right to the presence and representation 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 and representation of a court appointed lawyer before you make any statement 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 be and will be used against you in a court of law.
(8) Do you understand these rights as I have read them to you, and do you wish to speak to me?

Signed: SEE VIDEO Date: _____ Time: _____

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QUESTIONS AND ANSWERS

Were you operating a motor vehicle at the time of the accident/stop? YES

Where were you going? HOME

What street or highway were you on? NO

Direction of travel? NORTH

Where did you start driving from? Golf Tournament

What city (county) were you stopped in? BOCA RATON

What time did you start? 4:00 AM/PM What time is it now? _____

What is today's date? _____ What day of the week is it? NO

When did you last eat? 5:00 PM TODAY What did you eat? TUNA SALAD

What have you been doing the past three hours prior to this stop/accident? PLAYING GOLF

How much do you weigh? 185 Have you been drinking? YES What were you drinking? WINE

How much? COUPLE GLASSES Where? Golf Tournament With whom were you drinking? group of people

When did you have your first drink? DON'T RECALL AM/PM When did you stop drinking? 4:00 PM AM/PM

How did you consume your last two drinks? GLASS

Are you under the influence of alcohol now? ☐ Yes ☑ No

Can you feel the effects of alcohol? ☑ Yes ☐ No

Have you consumed alcohol since the accident? ☐ Yes ☑ No

Can you feel the effects of alcohol? ☑ Yes ☐ No

Have you consumed alcohol since the accident? ☐ Yes ☑ No How much? _____

What? _____ Where? _____

What line of work are you in? Retired

When did you last work? 25 years ago

Do you have any physical defects or injuries? ☑ Yes ☐ No If yes, explain:

hip Replacement

Are you sick or injured? ☐ Yes ☑ No If yes, explain:

_____

Do you limp? ☐ Yes ☑ No Did you get a bump on the head? ☐ Yes ☑ No

Were you in an accident today? NO

Have you taken any drugs or smoked marijuana today? NO

What? _____ When? _____

Have you seen a doctor or dentist today? ☐ Yes ☑ No Who? _____

Are you taking any prescription medications? ☑ Yes ☐ No What? Heart Medication When? MORNING

Do you have: Epilepsy? ☐ Yes ☑ No Inner ear trouble? ☐ Yes ☑ No

Glass eye? ☐ Yes ☑ No Ear infection? ☐ Yes ☑ No

False teeth? ☐ Yes ☑ No Diabetes? ☐ Yes ☑ No

Any problems not correctable by glasses or contact lenses? NO

Do you take insulin? ☐ Yes ☑ No If yes, when was your last injection? _____

Have you ever had a driver's license in any other state? CALIFORNIA, GEORGIA, FL

I am now ending this video recording. The time is now approximately 1616 AM/PM.

The date is FEBRUARY (month), 24 (day), 2023 (year).

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FLORIDA DEPARTMENT OF LAW ENFORCEMENT
ALCOHOL TESTING PROGRAM
BREATH ALCOHOL TEST AFFIDAVIT

Instrument Type: Intoxilyzer 8000
Instrument Registered To: BOCA RATON PD
Instrument Serial Number: 80-006622 Software: 8100.27
Date of Test: 02/24/2023

Date of Last Agency Inspection: 02/20/2023
Observation Period Began: 15:33
Subject's Name: VAN L GINTER DOB: 05/24/1949 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	15:59
Air Blank	0.000	15:59
Control Test	0.079	16:00
Air Blank	0.000	16:00
Subject Sample #1	0.248	16:01
Air Blank	0.000	16:02
Air Blank	0.000	16:04
Subject Sample #2	0.254	16:04
Air Blank	0.000	16:05
Control Test	0.079	16:06
Air Blank	0.000	16:06
Diagnostics Check	OK	16:06

Cylinder Lot: 02422080A1
Exp: 02/05/2024

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 REBECCA L COON, 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: _____ #794 Date: 02/24/23
Signature

Sworn to (or affirmed) before me this 24 day of FEBRUARY, 2023

_____ OFC. R. FELIX
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

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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:	

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REVIEW COMPLETED BY

Booking Number: 2023005242	**Date:** 2/25/2023
	Specialist Name/ID: Chantel Daniels/30347