

0232321

BGT 1326 2842

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

Juvenile N

OBTS Number	Agency ORI Number FLO 5 0 2 6 0 0		Agency Name PALM BEACH GARDENS POLICE DEPT.		Agency Report Number (N.T.A.'s only) 7 8 - 1 8 - 1 0 0 4 4 6 5 (1)	
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
Location of Arrest (Including Name of Business) GARDENS PKWY / PROSPERITY FARMS RD				Location of Offense (Business Name, Address) GARDENS PKWY / PROSPERITY FARMS RD		
Date of arrest 0 7 2 5 1 8	Time of Arrest 2 2 2 9	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle KAUF'S

Name (Last, First, Middle) MOOGAN, JENNIFER ASHLEY		Alias (Name, DOB, Soc. Sec. #, Etc.)				
Race W - White B - Black	American Indian O - Oriental	Sex M F	Date of Birth 0 4 1 3 8 0	Height 5 0 3	Weight 1 5 0	Eye Color BLUE
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)			Marital Status M	Religion V NK	Complexion FAR	Build MD
Local Address (Street, Apt. Number) 4236 HONEYSUCKLE AVE PALM BEACH GARDENS FL 33410		City	State	Zip	Phone (561) 255 5307	Residence Type: 1. City 2. County 3. Florida 4. Out of State
Permanent Address (Street, Apt. Number) 4236 HONEYSUCKLE AVE PALM BEACH GARDENS FL 33410		City	State	Zip	Phone	Address Source FL DL
Business Address (Name, Street)		City	State	Zip	Phone	Occupation NURSE
D/L Number, State M 25042180 6330	Soc. Sec. Number	INS Number	Place of Birth (City, State) WPB, FL	Citizenship US		

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

Parent Legal Custodian 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 DCF 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 parent. The child and / or parent was told to keep the Juvenile Court Clerk's Office (Phone 355-2526) informed of any change of address. <input type="checkbox"/> Yes, by (Name) <input type="checkbox"/> No: (Reason)			School Attended
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> 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 F. Heroin	H. Hallucinogen M. Marijuana O. Opium/Deriv.	P. Paraphernalia/ Equipment S. Synthetic	U. Unknown Z. Other
CHARGE	Charge Description DUI WITH PROPERTY DAMAGE		Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 3 1 1 6 1 1 9 3 1 (1 3 C 1)		Violation of ORD #		Bond OR		
CHARGE	Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond				
CHARGE	Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond				
CHARGE	Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond				
CHARGE	Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond				

<input type="checkbox"/> Instruction No. 1 Mandatory Appearance in Court	<input type="checkbox"/> Instruction No. 2 You need not appear in Court but must comply with instructions on Reverse Side.	Location (Court, Room Number, Address) 3188 PGA BLVD, PALM BEACH GARDENS
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 SHOULD BE ISSUED.		Court Date and Time Month AUGUST Day 29 TH Year 2010 Time 10:00 P.M.
Signature of Defendant (or Juvenile and Parent / Custodian)		Date Signed

HOLD for other Agency Name:	Signature of Arresting Officer X	Name Verification (Printed by Arrestee) JUL 26 AM 1:13
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal	<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:	(PRINT) JUL 26 AM 1:13
Intake Deputy DS COLLINS	Pouch #	Witness here if subject signed with an "X"
Transporting Officer CASTINEIRA	I.D. # 494	Agency PBG

SCANNED
JUL 29 2018

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 25th DAY OF July 20 18 AT 2131 AM PM
SUBJECT: Jennifer Moogan CASE NUMBER: 18-004465

AGENCY: PALM BEACH GARDENS POLICE DEPT. ARRESTING OFFICER: Ofc. Castineira #494

PERSONAL CONTACT

DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENTS PUTTING DEF. BEHIND WHEEL OF VEHICLE)

The defendant was involved in a traffic crash at Gardens Parkway and Prosperity Farms Road. The vehicle she was driving crashed into a tree. The female was trapped inside the vehicle. Deputies from the Palm Beach County Sheriff's Office were able to pull the defendant who was the only occupant from the vehicle. The defendant admitted to driving the vehicle and being the sole occupant.

OBSERVATION OF DRIVER:

The defendant smelled strongly of alcohol. She had bloodshot, watery, glassy eyes. While speaking her voice was mumbled and slurred, and her speech was slow. While speaking she smelled strongly of alcohol coming from her mouth. I noticed her pupils were dilated in both light and darkness. I noticed while speaking some of her sentences were incomplete thoughts.

DRIVER'S STATEMENTS:

Prior to Miranda stated she had been drinking. She also admitted to driving. Post Miranda she did not wish to answer every question. She stated she was driving and PBSO Deputies pulled her from the car. She stated she was coming from Twisted Trunk which is a local bar, and refused to answer how much she drank.

ODORS:

Strong odor of alcohol

GENERAL OBSERVATIONS

SPEECH: Mumbled, Slurred, and Slow

ATTITUDE: Crying, Hysterical

CLOTHING: Jean Shorts, Blue Shirt

MEDICAL/OTHER: None Stated

STATE OF FLORIDA
COUNTY OF PALM BEACH

[Signature] 494
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 25 day of JULY 20 18 by Ofc. CASTINEIRA

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

Ofc. [Signature] 494

Notary Public, Clerk of Court, Officer (F.S.S. 117.10)

SCANNED
JUL 29 2018

SUBJECT: Jennifer Moogan

CASE NUMBER: 18-004465

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- | | |
|---|---|
| <input type="checkbox"/> LT EYE-LACK OF SMOOTH PURSUIT | <input type="checkbox"/> RT EYE-LACK OF SMOOTH PURSUIT |
| <input type="checkbox"/> LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX DEVIATION | <input type="checkbox"/> RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX DEVIATION |
| <input type="checkbox"/> LT EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES | <input type="checkbox"/> RT EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES |

Other Observations:

Field Sobriety Exercises refused, Taylor Warnings were read and she still refused Field Sobriety Exercises

WALK & TURN:

Field Sobriety Exercises refused, Taylor Warnings were read and she still refused Field Sobriety Exercises

ONE LEG STAND:

Field Sobriety Exercises refused, Taylor Warnings were read and she still refused Field Sobriety Exercises

FINGER TO NOSE:

Field Sobriety Exercises refused, Taylor Warnings were read and she still refused Field Sobriety Exercises

ROMBERG/ALPHABET:

Field Sobriety Exercises refused, Taylor Warnings were read and she still refused Field Sobriety Exercises

BREATH TEST RESULTS: Refused

STATE OF FLORIDA
COUNTY OF PALM BEACH

[Signature] 494
(Signature of Arresting/Investigative Officer)

The foregoing instrument was notarized or sworn before me this 25 day of JULY, 20 18 by OFF. CASTINEIRA

who personally known to me and/or produced identification. Type of identification produced _____

OFF. [Signature] 492
Notary Public, Clerk of Court, Officer (F.S.S. 117.10)

SCANNED
JUL 29 2018

STATE OF FLORIDA
DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES
AFFIDAVIT OF
REFUSAL TO SUBMIT TO BREATH, URINE, OR BLOOD TEST

I, Officer J. Castineira, a duly certified Law Enforcement Officer or Correctional
(Person reading Implied Consent Warning)

Officer, am a member of Palm Beach Gardens Police Department, and I do swear
(Name of enforcement agency)

or affirm that on or about the 25th day of July, 20 18, at 2131 P.M. A.M.
(Circle One)

NAME Jennifer Ashley Moogan
(Type or Print) FIRST MIDDLE OR MAIDEN LAST

DL # M250421806330, state of Florida, was placed under lawful arrest for

the offense of DUI by Officer J. Castineira and
(Name of Arresting Officer)
issued Citation # A56GWSE.

That on or about the 25th day of July, 20 18, at 2240 P.M. A.M.
(Circle One)

in Palm Beach County, [PLEASE CHECK THE BOX OR BOXES THAT APPLY] I did request said
person to submit to a breath, urine, or blood test to determine the content of alcohol in his or her blood or breath or the presence of
chemical or controlled substances therein. I did inform said person that any refusal to submit to such test or tests would result in the suspension of his or
her privilege to operate a motor vehicle for a period of one (1) year for a first refusal, or for a period of eighteen (18) months if the driving privilege of
such person had been suspended previously for refusing to submit to such test or tests. I did inform said person that he or she commits a misdemeanor, if
said person refuses to submit to a lawful test as requested above, and his or her driving privilege has been previously suspended for a prior refusal to
submit to a lawful test of his or her breath, urine, or blood. In cases involving a Commercial Motor Vehicle, I did inform the driver that this refusal will
result in the disqualification of the driver's Commercial Driver's License/privilege 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 such test.

Said person did at that time and place refuse to submit to such test or tests.

[Signature]
Signature of Law Enforcement Officer or
Correctional Officer

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

The foregoing instrument was sworn and subscribed before me:

ofc. [Signature]
Signature of Attesting Officer

(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before
me this day of , 20 ,
by

Title POLICE OFFICER
Date 7/25/18

who is personally known to me or who has produced
 as identification.

Notary Public

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. If no DUI arrest is made, attach HSMV 78005 (Notice of
Commercial Driver's License/Privilege Disqualification).

HSMV 78054 (REV. 08/08) S

SCANNED
JUL 29 2018



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

REVIEW COMPLETED BY

Booking Number: 2018024805	Date: 7/26/2018
	Specialist Name/ID: M. Tooks #8557

SCANNED
JUL 29 2018