

0467023 17mm426

Check if Supplement is Attached

1493

OBTS Number		ARREST / NOTICE TO APPEAR Juvenile Referral Report		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		Juvenile <input checked="" type="checkbox"/>	
Agency ORI Number FLD. 5 0 0 3 0 0		Agency Name BOYNTON BEACH POLICE DEPARTMENT		Agency Report Number (N.T.A.'s only) 3 4 1 1 7 1 0 1 1 9 7 3 4 1 1 1 1					
Charge Type: Check as many as apply. <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony		<input checked="" type="checkbox"/> 3. Misdemeanor <input 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) 133 N. Congress Ave. (Publix)				Location of Offense (Business Name, Address) 133 N. Congress Ave. (Publix)					
Date of Arrest 04.08.17		Time of Arrest 10.55		Booking Date		Booking Time		Jail Date	
Jail Time		Location of Vehicle							
Name (Last, First, Middle) Parina, Salvatore, Matthew				Alias (Name, DOB, Soc. Sec. #, Etc.)					
Race W - White B - Black		Sex M		Date of Birth 09.08.26		Height 6'0"		Weight 175	
Eye Color Brown		Hair Color Brown		Complexion Mel		Build Thin			
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) None				Marital Status Single		Religion None		Indication of: Alcohol Influence Drug Influence Y <input type="checkbox"/> N <input type="checkbox"/> Unk <input checked="" type="checkbox"/>	
Local Address (Street, Apt. Number) 8645 Boynton Bch Blvd Boynton Bch FL		(City) Boynton Beach		(State) FL		(Zip) 33422		Phone (561) 572-6470	
Permanent Address (Street, Apt. Number)		(City)		(State)		(Zip)		Residence Type: 1. City 2. County 3. Florida 4. Out of State	
Business Address (Name, Street) Self employed		(City)		(State)		(Zip)		Address Source Verbal	
D/L Number, State FL 50793820080 FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) Brooklyn, N.Y.		Citizenship U.S.	
Co-Defendant (Last, First, Middle) Taylor, Kaleini, Gahir e		Race B		Sex F		Date of Birth 08/22/92		<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 (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 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 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 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 Domestic Battery		Counts 1		Domestic Violence BY <input type="checkbox"/> N <input type="checkbox"/>		Statute Violation Number 7.05.10.3	
Violation of ORD #		Warrant / Capias Number		Bond					
Drug Activity N		Drug Type N		Amount / Unit N/A		Offense # 17-19734			
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input 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 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 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 type="checkbox"/> N		Statute Violation Number		Violation of ORD #	
Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number	
Bond									
Location (Court, Room Number, Address) South County Courthouse • 200 W. Atlantic Avenue, Delray Beach, FL 33444									
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									
HOLD for other agency		Signature of Arresting Officer X		Name Verification (Printed by Arrestee) (PRINT)		PAGE 1 OF 1			
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other		Name of Arresting Officer (Print) Naterio		I.D. # 982			
Intake Deputy		I.D. #		Pouch #		Transporting Officer Hollis		I.D. # 982	
Agency BBPD		Witness here if subject signed with an "X"							



DOMESTIC VIOLENCE PROBABLE CAUSE AFFIDAVIT
PALM BEACH COUNTY



On the 8th day of April, 2017 at 1000 hours,
Subject: Farina, Salvatore, Matthew DOB: 01/09/1982 Case #: 17-019734
Charge Description: Domestic Battery Statute #: 784.03(1)(A)(1)
Victim: Taylor, Kalein, Gahira DOB: 08/22/92 Race: B Sex: F
Local Address: 8645 W Boynton Beach Blvd , Boynton Beach ,FL, 33472
Personal Contact: _____

Narrative:

On 4/8/2017 at approximately 959 hours I responded to 133 N congress Ave in reference to a Assault in progress. While en route dispatch advised that a bystander witnessed the altercation taking place, and stated that she saw the male beating a female up. Upon arrival, I observed both individuals that were involved yelling at each other in the parking lot of Publix. Making contact with the agitated female half, later identified as Taylor Kalein Gahira, revealed that she was involved in an altercation dispute with her boyfriend, who was later identified as Farina Salvatore Matthew. It should be noted that Farina and Taylor both reside together. Both parties were separated on scene. A nearby witness stated on a sworn written statement that as she drove into the Publix parking lot, she observed the subject who was later identified as Farina "brutally strike" the women while they were seated in their vehicle, which was a Beige 1995 Cadillac Deville bearing FL tag Y87SFD. The witness advised that Taylor was on her back with her legs up as Farina just continued to strike her repeatedly with a closed fist on her upper body, while they were both in the vehicle.

I made contact with another witness that was on scene who stated that Farina did in fact punch Taylor, but prior to Farina punching her, Taylor poured hot coffee on him. Taylor was also witnessed throwing a cell phone on the floor, which was later known that it belonged to Farina. The witness completed a sworn written statement.

While making contact with Taylor she was initially uncooperative about the whole situation, but did advise that she did not mean to pour the coffee on Farina. Taylor added that they were arguing about customers and the argument escalated. Taylor refused medical attention on scene. Taylor did not have any injuries but pictures were taken of her person. Taylor completed a statement in regards to this case and completed an Exemption from public records disclosure sheet. A Domestic Violence Pamphlet was given to Taylor. Contact was then made with Farina. Farina advised in a statement that while discussing customers an argument ensued. As Farina was driving, Taylor slapped the coffee out of his hand and poured all over his person. I observed Farinas' clothing to be wet while speaking to us. Farina stated that he kept driving as Taylor kept screaming at him. Farina then pulled over in the Publix parking lot where Taylor then broke his cellphone. Pictures of the cell phone and Farina were taken. Based on the fact that Taylor and Farina were both mutually combative towards each other, a primary aggressor could not be determined. I find Probable Cause to charge Farina with (1) count of Domestic Battery pursuant to F.S.S 784.03(1)(A)(1) against Taylor.

Defendant's Statement: None

Victim's Statement: Written

Observation Of Victim (Physical and Emotional): _____

Agitated, Emotinal (Both)

Relationship Between Victim and Suspect: _____

In a relationship. (living together)

Photographs: Scene: ☒ Yes ☐ No
Victim: ☒ Yes ☐ No
911 Call: ☒ Yes ☐ No Caller: _____
Tape Requested: ☒ Yes ☐ No
Weapon Used: ☐ Yes ☐ No Type: _____
Witnesses: ☒ Yes ☐ No
Injuries: ☐ Yes ☒ No
Medical Treatment: ☐ Yes ☒ No
At Scene ☐ Yes ☒ No Paramedics: _____
At Hospital ☐ Yes ☒ No Physician(s): _____
Hospital: _____

Act Committed In Presence Of Minor(s): ☐ Yes ☒ No

Name: _____ Age: _____

Name: _____ Age: _____

F.D.C.F. Notified: ☐ Yes ☒ No

Victim Pregnant: ☐ Yes ☒ No

Violation Of Restraining Order: ☐ Yes ☒ No Case #: _____

Prior History Of Domestic Violence: ☐ Yes ☒ No

Alcohol Or Drugs Involved: ☐ Yes ☒ No ☐ Unknown

Victim Contact Information:

Phone Home: N/A Work: N/A

Employer: Unemployed

Relative Name: Georgina M Taylor Phone: 561-294-8171

Address: 612 S A ST LAKE WORTH

City/State: Lake Worth ,FL ,33460

State Of Florida

County Of Palm Beach

Appeared before me, Ofc. Nalerio 982 , (print name) personally known to me, who, being first duly sworn, says that the facts above, based upon my investigation, are true.

Signature Of Arresting Officer

Sworn to and subscribed to me before this 8th day of April , 2017

Notary/Clerk Of Court/Officer (F.S.S. 117 10)