

JH 0527970 JIMM 9297 3098

OBTS Number		<b>ARREST / NOTICE TO APPEAR</b>		1. Arrest 3. Request for Warrant		J Juvenile	
Agency ORI Number FL0500600		Agency Name PALM BEACH POLICE DEPARTMENT		Agency Report Number 76 21-1369		2. N.T.A. 4. Request for Capias	
Charge Type: Check as many as apply.		3. Misdemeanor		5. Ordinance		Weapon Seized/Type	
1. Felony		4. Traffic Misdemeanor		6. Other		Yes No	
Location of Arrest (Including Name of Business)		Location of Offense (Business Name, Address)		Type:		Multiple Clearance Indicator	
980 N Lake Way, Palm Beach		980 N Lake Way				UNK	
Date of Arrest 12/19/2021		Time of Arrest 2214		Booking Date		Booking Time	
Jail Date		Jail Time		Location of Vehicle			
Name (Last, First, Middle) Haruvi, Abe				Alias (Name, DOB, Soc. Sec. #, Etc.)			
Race W - White 1 - American Indian		Sex M		Date of Birth 2/26/1985		Height 510	
B - Black 2 - Oriental/Asian						Weight 190	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		Marital Status Married		Religion Jewish		Complexion Light	
None						Build Med	
Local Address (Street, Apt. Number)		(City)		(State)		(Zip)	
980 N Lake Way		Palm Beach		Florida		33484	
Permanent Address (Street, Apt. Number)		(City)		(State)		(Zip)	
980 N Lake Way		Palm Beach		Florida		33484	
Business Address (Street, Apt. Number)		(City)		(State)		(Zip)	
DL Number, State U610-00055-066-0		INS Number		Place of Birth (City/State) Israel		Citizenship USA	
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth	
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth	
Parent Legal Custodian Other		Name (Last)		(First)		(Middle)	
Address (Street, Apt. Number)		(City)		(State)		(Zip)	
Notified by: (Name)		Date		Time		Residence Phone	
Released To: (Name)		Relationship		FCIC/NCIC		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 informed of any change of address:		Yes, by: (Name)		No: (Reason)		School Attended	
						Grade	
Property Crime?		Description of Property		Value of Property			
Yes No							
Recovery Information							
0. N/A 1. Voluntary 2. Located Not Returned 3. Hospitalized 4. HRS Custody 5. Law Enforcement Custody 6. Returned to Parent 7. Deceased 8. Other							
Charge Description		Counts		Domestic Violence		Statute Violation Number	
704.03(1) DV Violence		1		Yes No		704.03(1)(A)	
Drug Activity		Drug Type		Amount/Unit		Offense #	
N/A		N/A				21-1369	
Charge Description		Counts		Domestic Violence		Statute Violation Number	
N/A				Yes No			
Charge Description		Counts		Domestic Violence		Statute Violation Number	
N/A				Yes No			
Charge Description		Counts		Domestic Violence		Statute Violation Number	
N/A				Yes No			
Instruction No. 1 Mandatory Appearance in Court		Location (Court, Room Number, Address)		Court Date and Time		Date Signed	
Instruction No. 2 You need not appear in Court but must Comply with instructions on reverse side.							
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)		Signature of Arresting Officer		Name Verification (Printed by Arrestee)		Date Signed	
		X		SCANNED			
Name		Name of Arresting Officer (Print)		I.D. #		PAGE	
DANGEROUS Suicidal		SPANGLER		0215		DEC 10 2021	
Resisted Arrest Other		Transporting Officer		I.D. #		AGENCY	
		SPANGLER		0215		PBPD	
Witness here if subject signed with an "X".		Witness here if subject signed with an "X".		Witness here if subject signed with an "X".		PAGE	
						1 OF 1	

NO BOND

VICTIM NOTIFICATION REQUIRED

PALESTINE COUNTY OFFICE

SPANGLER 0215

PROBABLE CAUSE AFFIDAVIT

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

1

JUVENILE

OBTS Number		Agency ORI Number <b>FL 0500600</b>		Agency Name <b>PALM BEACH POLICE DEPARTMENT</b>		Agency Report Number <b>7   6   21-001369</b>					
Charge Type: Check as many as apply.		Special Notes:		Race		Sex		Date of Birth			
<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				<b>W</b>		<b>M</b>		<b>02/26/1955</b>			
Name (Last, First, Middle) <b>HARUVI, ABE</b>		Aliases		Victim's Name (Last, First, Middle) <b>STEPHENSON, GIOVANA A F R</b>		Race <b>W</b>		Sex <b>F</b>		Date of Birth <b>06/28/1965</b>	
Charge Description <b>784.03(1) DOMESTIC VIOLENCE/SIMPLE</b>		Charge Description		Local Address (Street, Apt. Number) <b>980 N LAKE WAY, PALM BEACH, FL 33480</b>		City		State		Zip	
Charge Description		Charge Description		Phone <b>(561) 951-6612</b>		Address Source		Business Address (Name, Street)		City	
				Phone <b>(561) 951-6612</b>		Occupation <b>HOUSEWIFE</b>					

The undersigned certifies and swears that he/she has just and reasonable 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.  was observed by \_\_\_\_\_ who told \_\_\_\_\_ that he/she saw the arrested person commit the below acts.

confessed to \_\_\_\_\_ admitting to the below facts.  was found to have committed the below acts, resulting from my (described) investigation.

On the 9 day of December, 2021 at 22:15 (Specifically include facts constituting cause for arrest.)


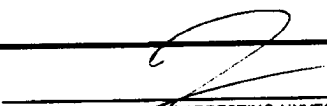
I was dispatched to 980 N Lake way in reference to Domestic Disturbance. Upon arrival, I met with Giovana Stephenson (W/F DOB 06/28/1965) who stated her husband Abe Haruvi (W/M DOB 02/26/1955) scratched and hit her. The details are as follows.

Stephenson and Haruvi have been married for 14 years and they have two children in common. Stephenson stated the altercation started when they were downstairs watching a movie and Haruvi went upstairs to use the bathroom. Haruvi wanted to take his phone with him and Stephenson believed it was because Haruvi was hiding something on his phone. Haruvi then showed his phone to Stephenson and took it upstairs with him.

Stephenson was later taking a shower when Haruvi entered the bathroom and began to scream at her over seeing her phone. Stephenson then exited the shower and Haruvi did then strike Stephenson with the intent to cause bodily harm by scratching her and pushing her around the bathroom. Haruvi did scratch Stephenson on the chest which caused redness to Stephenson's left breast and on her chest. Their eldest child then began to yell and said she was going to call the police. Haruvi then exited the bathroom and hallway and went into the bedroom.

Upon my arrival, Stephenson and both of her children were standing outside. Stephenson immediately advised me of the situation and showed me the marks where she was scratched on her chest, which were later photographed. I went upstairs to Haruvi's room and placed him in handcuffs.

Haruvi stated that he got into a verbal altercation with Stephenson over her phone which led to a small struggle over possession of the phone and Haruvi then left the phone with Stephenson and went upstairs to his bedroom. There were no marks or injuries on Haruvi.

SWORN AND SUBSCRIBED BEFORE ME		SIGNATURE OF ARRESTING / INVESTIGATING OFFICER	
 <b>WAYMIRE, FRED C II</b> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)		 <b>SPANGLER, JOSHUA I (1100215)</b> NAME OF OFFICER (PLEASE PRINT)	
<u>12/10/2021</u> DATE		<u>12/10/2021</u> DATE	

PROBABLE CAUSE AFFIDAVIT  
SUPPLEMENT

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

1

JUVENILE

A D M I N I S T R A T I V E	OBTS Number		Agency ORI Number <b>FL 0500600</b>		Agency Name <b>PALM BEACH POLICE DEPARTMENT</b>		Agency Report Number <b>7   6   21-001369</b>	
	Charge Type: Check as many as apply.		Special Notes:		Race		Sex	
	<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				<b>W</b>		<b>M</b>	
Name (Last, First, Middle) <b>HARUVI, ABE</b>		Alias		Date of Birth <b>02/26/1955</b>				

Based on the above facts, Haruvi was charged him with Simple Battery, Pursuant to F.S.S. 784.03(1). Because he knowingly and intentionally scratched Stephenson, with the intent to cause bodily harm.

NOT A CERTIFIED COPY

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A D M I N I S T R A T I V E	SWORN AND SUBSCRIBED BEFORE ME		SIGNATURE OF ARRESTING / INVESTIGATING OFFICER	
	<i>Fred C Waymire</i> <b>WAYMIRE, FRED C II</b>		<i>Joshua J Spangler</i> <b>SPANGLER, JOSHUA J (1100215)</b>	
	NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)		NAME OF OFFICER (PLEASE PRINT)	
	<b>12/10/2021</b> DATE		<b>12/10/2021</b> DATE	

# VICTIM NOTIFICATION FORM

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

- Homicide (Ch. 782)
- Attempted Murder
- Stalking (F.S. 784.048)
- 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.)
- Sexual Offense (Ch. 794)
- Attempted Sexual Offense
- Dating Violence

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

1. Incident Report #: 21-1369 Agency: PBPD  
Offense: Simple Battery  
Suspect/Offender: Abe Haruv  
D.O.B. 02/26/1985 Race: White Sex: Male

2. Warrant #(s): \_\_\_\_\_

3.a. Victim's name: Giovanna Stephenson D.O.B. \_\_\_\_\_ Race: W Sex: F  
Address: 280 N Lake Way  
City: Palm Beach State: FL Zip: 33480  
Home #: 561 951 6612 Work #: \_\_\_\_\_ Other: \_\_\_\_\_

b. Victim's next of kin, friend or neighbor: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home #: \_\_\_\_\_ Work #: \_\_\_\_\_ Other: \_\_\_\_\_

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:

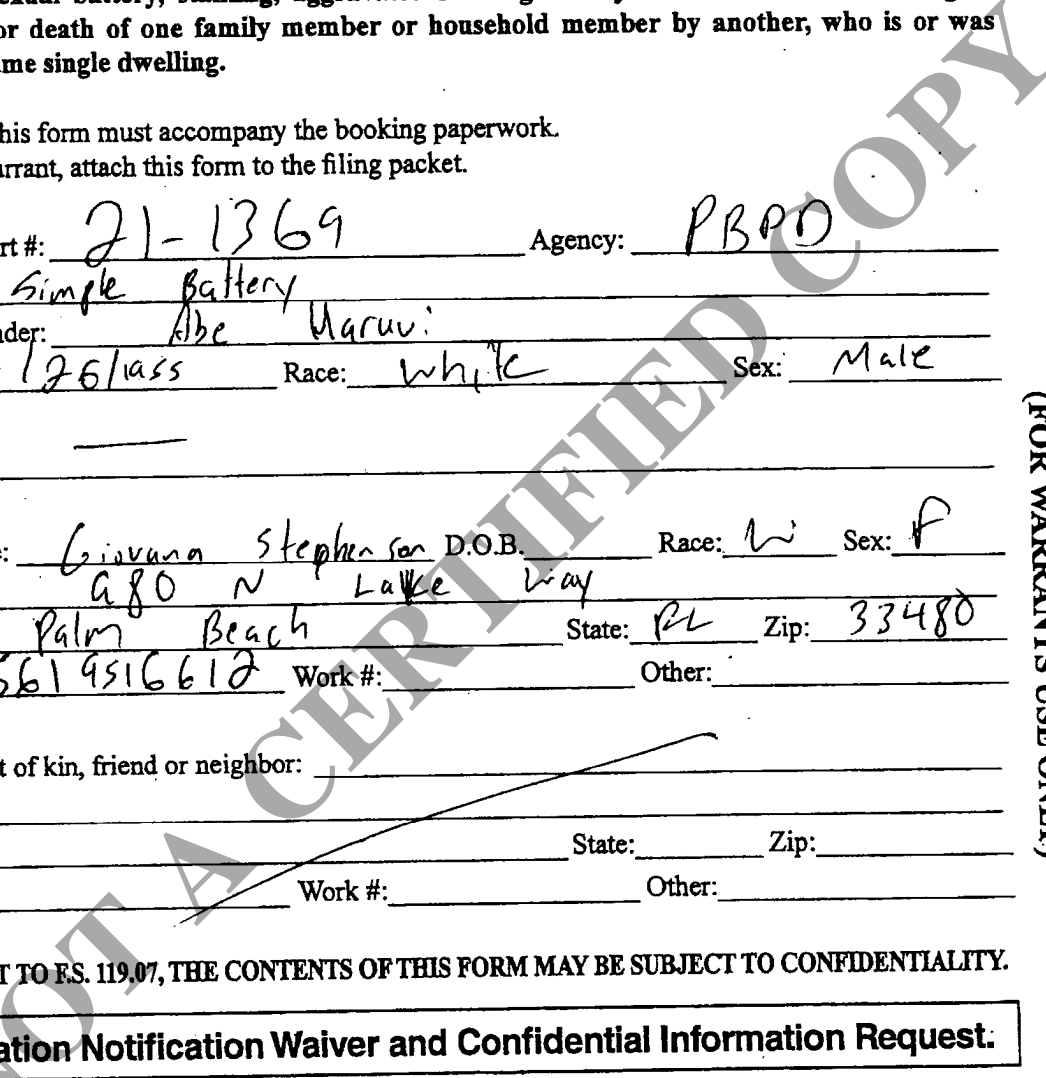
(check applicable boxes)

- 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: Spangler Palm Beach I.D. # 0215 Date: 12/10/2021

White = Corrections or State Attorney (Warrant Application) Yellow = Warrants Section Pink = Central Records **DEC 10 2021**

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





**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: 2021031082	Date: 12/10/2021
	Specialist Name/ID: T Howard/7185

SCANNED  
 DEC 10 2021