

053 9609

22CT2879 NB  
ARREST / NOTICE TO APPEAR  
Juvenile Referral Report

1236

OBTS Number		Agency ORI Number <b>FLO 5 0 2 6 0 0</b>		Agency Name <b>PALM BEACH GARDENS POLICE DEPARTMENT</b>		Agency Report Number <b>78 - 22000902</b>	
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 checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Weapon Seized / Type <b>2</b> <input type="checkbox"/> 1. Yes <input type="checkbox"/> 2. No		Multiple Clearance Indicator		1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias <b>1</b>	
Location of Arrest (Including Name of Business) <b>PGA BLVD/N MILITARY TRL, PALM BEACH GARDENS, FL, 33410</b>		Location of Offense (Business Name, Address) <b>PGA BLVD/N MILITARY TRL, PALM BEACH GARDENS, FL, 33410</b>					
Date of Arrest <b>02/19/2022</b>	Time of Arrest <b>22:32</b>	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle <b>KAUFF'S TOWING AND RECOVERY 4701 EAST AVENUE, WPB, FL 33407</b>	
Name (Last, First, Middle) <b>FLEMING, STEVEN, ANDREW</b>		Alias (Name, DOB, Soc. Sec. #, Etc.) <b>NONE</b>					
Race <b>W - White 1 - American Indian B - Black 0 - Oriental/Asian</b>	Sex <b>W</b>	Date of Birth <b>10/03/1973</b>	Height <b>600</b>	Weight <b>265</b>	Eye Color <b>HAZ</b>	Hair Color <b>BRO</b>	Complexion <b>LGT</b>
Build <b>LARGE</b>		Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) <b>NONE</b>		Marital Status <b>MARRIED</b>	Religion <b>CATHOLIC</b>	Indication of Alcohol Influence Drug Influence <input type="checkbox"/> 1. City <input type="checkbox"/> 2. County <input type="checkbox"/> 3. Florida <input type="checkbox"/> 4. Out of State <input type="checkbox"/> 5. Unk.	
Local Address (Street, Apt. Number) <b>5114 ARTESA WAY, PALM BEACH GARDENS, FL 33410</b>		(City) <b>(State)</b>		(Zip) <b>(917) 693-6888</b>		Residence Type: <input type="checkbox"/> 1. City <input type="checkbox"/> 2. County <input type="checkbox"/> 3. Florida <input type="checkbox"/> 4. Out of State <input type="checkbox"/> 5. Unk.	
Permanent Address (Street, Apt. Number) <b>5114 ARTESA WAY, PALM BEACH GARDENS, FL 33410</b>		(City) <b>(State)</b>		(Zip) <b>(917) 693-6888</b>		Address Source <b>FL DRIVER'S LICENSE</b>	
Business Address (Name, Street) <b>WALL STREET OPTIONS, 4500 PGA BLVD, PBG, FL 33410</b>		(City) <b>(State)</b>		(Zip) <b>(212) 937-1045</b>		Occupation <b>PARTNER</b>	
DL Number, State <b>F455781733630 FL</b>		Soc. Sec. Number <b>[REDACTED]</b>		INS Number		Place of Birth (City, State) <b>LONG ISLAND, NY</b>	
Citizenship <b>USA</b>		Co-Defendant Name (Last, First, Middle) <b>[REDACTED]</b>		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) <b>[REDACTED]</b>		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 Name (Last) <b>[REDACTED]</b>		Parent (First) <b>[REDACTED]</b>		Parent (Middle) <b>[REDACTED]</b>		Residence Phone	
Legal Custodian <b>[REDACTED]</b>		Address (Street, Apt. Number) <b>[REDACTED]</b>		(City) <b>(State)</b>		(Zip) <b>[REDACTED]</b>	
Business Phone		Notified by: (Name) <b>[REDACTED]</b>		Date	Time	Juvenile Disposition 1. Handled/processed within Dept. and Released. 2. TOT HRS / DYS 3. Incarcerated	
Released To: (Name) <b>[REDACTED]</b>		Relationship <b>[REDACTED]</b>		Date	Time	Grade	
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 355-2528) 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 <b>[REDACTED]</b>		Value of Property <b>[REDACTED]</b>			
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. Synthetics	U. Unknown Z. Other		Statute Violation Number <b>316.193(3)(C)(1)</b>	
Charge Description <b>DUI - PROPERTY DAMAGE</b>		Counts <b>1</b>	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Violation of ORD #		Warrant / Capias Number	
Drug Activity <b>N</b>		Drug Type <b>N</b>	Amount / Unit <b>N</b>	Offense #	Bond <b>O R</b>		Statute Violation Number
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Violation of ORD #		Warrant / Capias Number	
Drug Activity		Drug Type	Amount / Unit	Offense #	Bond		Statute Violation Number
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Violation of ORD #		Warrant / Capias Number	
Drug Activity		Drug Type	Amount / Unit	Offense #	Bond		Statute Violation Number
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Violation of ORD #		Warrant / Capias Number	
Drug Activity		Drug Type	Amount / Unit	Offense #	Bond		Statute Violation Number
Location (Court Name, Number, Address) <b>NORTH COUNTY COURTHOUSE, 3188 PGA BOULEVARD, PALM BEACH GARDENS, FL 33410 - PH: (561) 662-6700</b>							
Court Date and Time Month <b>MARCH</b> Day <b>23</b> Year <b>2022</b> Time <b>10:00</b> 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 <b>02/19/2022</b>							
Signature of Defendant (or Juvenile and Parent / Custodian) <b>[REDACTED]</b>				Date Signed <b>02/19/2022</b>			
HOLD for other Agency Name: <input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:		Signature of Arresting Officer <b>[REDACTED]</b>		Name Verification (Printed by Arrestee) <b>FEB 20 AM 2:48</b>		PAGE	
Name of Arresting Officer (Print) <b>OFC. CAMERON CARVER</b>		I.D. # <b>471</b>		Witness here if subject signed with an "X"		of 1	
Transporting Officer <b>C. CARVER</b>		ID # <b>471</b>		Agency <b>PBGPFD</b>		Witness here if subject signed with an "X"	

2022 FEB 20 AM 2:48  
PALM BEACH COUNTY  
CLERK OF COURT  
FILE

## D.U.I. PROBABLE CAUSE AFFIDAVIT

On the 24 day of November 2021 at 21:32 ☐ AM ☒ PM

Subject: FLEMING, STEVEN, ANDREW Case Number: 22000902

Agency: PALM BEACH GARDENS POLICE DEPARTMENT Arresting Officer: OFC. CAMERON CARVER 471

### PERSONAL CONTACT

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

Responded to a MVC involving Fleming and a Palm Tran Connection passenger van. Fleming was driving a 2017 Lexus RX350 bearing FL - JCQX78. The Palm Tran Connection van was a 2020 Toyota Sienna bearing FL - TG8640. The Toyota was stationary in the left turn lane of PGA Boulevard when the Lexus came into the travel lane and struck the Toyota on the right side. Both vehicles ended up in the right turn lane to N Military Trail from PGA Boulevard.

### OBSERVATION OF DRIVER:

Fleming was dazed. Slurred speech, sweating and eyes were glassy. Fleming would not stand still, constantly moving around and repeating himself. Fleming, had the strong odor of alcohol. During the crash investigation, statements contradicted the evidence at the scene.

Airbag dust on jacket shows where seatbelt was worn, seatbelt also locked out. Blood on hand and seat (no one else was bleeding) places male behind the wheel at time of crash.

### DRIVER STATEMENTS:

Lawyer. Refused SFST's post Taylor.

**ODORS:** Unknown odor of alcohol

### GENERAL OBSERVATIONS

**SPEECH:** Slurred, repeated, mumbled.

**ATTITUDE:** Nervous, agitated.

**CLOTHING:** Dress shirt, coat, pants and shoes.

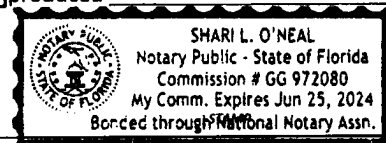
**MEDICAL/OTHER:** Hydrochlorothiazide - High Blood Pressure and Kidneys

STATE OF FLORIDA  
COUNTY OF PALM BEACH

471  
SIGNATURE OF ATTESTING OFFICER

The forgoing instrument was sworn to or affirmed and subscribed before me this 20 day of February 2022 by  
OFC. CAMERON CARVER 471 who is ☒ personally known to me or ☐ produced

S. O'Neal  
Notary Public, Clerk of Court, Officer (FSS 117.10)



**D.U.I. PROBABLE CAUSE AFFIDAVIT Cont.**

Subject: FLEMING, STEVEN, ANDREW

Case Number: 22000902

**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:**

Glassy, swaying.

**Refused Roadsides**

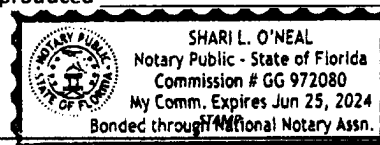
**BREATH RESULTS:** 1) REFUSED @ 23:59 2) \_\_\_\_\_ @ \_\_\_\_\_ 3) \_\_\_\_\_ @ \_\_\_\_\_ 4) \_\_\_\_\_ @ \_\_\_\_\_

**STATE OF FLORIDA  
COUNTY OF PALM BEACH**

[Signature]  
SIGNATURE OF ATTESTING OFFICER

The forgoing instrument was sworn to or affirmed and subscribed before me this 20 day of February 20 22 by  
OFC. CAMERON CARVER 471 who is ☒ personally known to me or ☐ produced

[Signature]  
Notary Public, Clerk of Court, Officer (FSS 117.10)



SUBJECT: Fleming, Steven

CASE NUMBER: 22000902

## IMPLIED CONSENT FOR DUI IN A MOTOR VEHICLE

NOTE: READ ONLY THE PARAGRAPH APPLICABLE TO THE TYPE OF TEST YOU ARE REQUESTING.

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

-OR-

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

-OR-

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

NOTE: READ ONLY IF THE SUBJECT DOES NOT COMPLY WITH YOUR REQUEST.

I am Off C. Carter 471 of the Palmdale Gardens 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'S SIGNATURE: (X) Road on Camera

## CONSTITUTIONAL WARNINGS

I AM REQUIRED TO WARN YOU BEFORE YOU MAKE ANY STATEMENTS THAT YOU HAVE THE FOLLOWING RIGHTS:

1. You have the right to remain silent and not answer any questions.
2. Any statement must be freely and voluntarily given.
3. You have the right to the presence 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 of a court appointed lawyer before you make any statements 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 and will be used against you in a court of law.

SUSPECT'S SIGNATURE: (X) Road on Camera

**STATE OF FLORIDA  
DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES  
AFFIDAVIT OF REFUSAL TO SUBMIT TO  
BREATH AND/OR URINE TEST**

I, **OFC. CAMERON CARVER**, a duly certified Law Enforcement Officer or Correctional Officer,  
(Name of Officer reading Implied Consent Warning)

am a member of **PALM BEACH GARDENS POLICE DEPARTMENT**, and I do swear  
(Name of law enforcement agency)

or affirm that on or about the **19** day of **FEBRUARY**, 20 **22**, at **22:32** ☒ P.M. ☐ A.M.

DRIVER **STEVEN** **ANDREW** **FLEMING**  
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# **F455781733630**, state of **FL**, was placed under lawful arrest for

the offense of **DUI - PROPERTY DAMAGE** by **OFC. CAMERON CARVER** and  
(Name of Arresting Officer)

issued Citation # **AECR98E**

That on or about the **19** day of **FEBRUARY**, 20 **22**, at **23:58** ☒ P.M. ☐ A.M.

in **PALM BEACH** County,

I requested that the driver submit to a ☒ breath and/or ☐ urine test to determine his or her blood alcohol level and/or the presence of chemical or controlled substances. I informed the driver that the refusal to submit to such test(s) 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 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 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 CDL, or was operating a CMV, refusal will result in the disqualification of the Commercial Driver's License/driving 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 any such lawful test. Nonetheless, the driver refused to submit to the test(s) requested.

  
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:

  
Signature of Attesting Officer

Title **OFFICER SHELDON KEEL #508**

Date **02/20/22**

(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before

me this **20** day of **February**, 20 **22**,

by **OFC. CAMERON CARVER**,

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.



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



PBSO Case #: 22-038093

PBSO Zone: 3-13

Agency Case #: 22000902

Crash Case #: 24718313

**Incident Information:**

Time of Stop/Crash: 21:32 Date of Incident: 02/19/2022 Day: SATURDAY

Location of Incident: PGA BLVD/N MILITARY TRL, PALM BEACH GARDENS, FL, 33410

**Arrest Information:**

Time of Arrest: 22:32 Date of Arrest: 02/19/2022 Day: SATURDAY

Location of Arrest: PGA BLVD/N MILITARY TRL, PALM BEACH GARDENS, FL, 33410

Subject's Name: (L) FLEMING, (F) STEVEN, (M) ANDREW

DOB: 10/03/1973 Race: W Sex: M Height: 600 Weight: 265 Hair BRO Eye HAZ

Address: 5114 ARTESA WAY, PALM BEACH GARDENS, FL 33410 Phone: (917) 693-6888

Arresting Officer's Name: OFC. CAMERON CARVER ID#: 471

Agency: PBGPD Division: TRAFFIC - DUI

**Breath Results**

**REFUSED**

- 1) 23:52 hrs.  
2) \_\_\_\_\_ at \_\_\_\_\_ hrs.  
3) \_\_\_\_\_ at \_\_\_\_\_ hrs.  
4) \_\_\_\_\_ at \_\_\_\_\_ hrs.

**---BAT Use---**

BAT Notified: YES  
Arrival Time at BAT: 23:33  
Subject Arrest Time: 22:32

Breath Test Operator: O'Neal 6212  
PBSO

# TESTING FACILITY TASK REPORT

AGENCY: PBDP OFC. CARVER #471

SUBJECT: FLEMING, STEVEN A.

CASE NUMBER: 22-038093

DATE: 02-19-22

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 23:56 HRS

ENDING TIME: 23:59 HRS

BREATH TESTS RESULTS:

**REFUSED**

1) TIME 23:58

A.M. ☐ P.M. ☒

2)

TIME

A.M. ☐ P.M. ☐

3)

TIME

A.M. ☐ P.M. ☐

4)

TIME

A.M. ☐ P.M. ☐

BREATH OPERATOR: S.O'NEAL #6212

MAINTENANCE TECHNICIAN: J. KARLECKE #6467

## TESTING OFFICER'S OBSERVATIONS

SPEECH:

ATTITUDE: CALM, COOPERATIVE

CLOTHING: SHIRT- PINK & WHITE/ PLAID PANTS- KHAKI

MEDICAL CONDITIONS: HEART & KIDNEY PROBLEMS, HIGH BLOOD PRESSURE

MEDICATIONS: A COUPLE OF MEDS. FOR HEART, KIDNEY & HIGH BLOOD PRESSURE

## OTHER:

EYES: RED, GLASSY

## COMMENTS:

20 MIN. OBSERVATION DONE BY A/O CARVER #471

A/O REQUESTED THE BREATH TEST.

D REFUSED THE BREATH REQUEST

A/O READ THE IMPLIED CONSENT ON CAMERA.

D UNDERSTOOD THE I/C AS READ.

D STILL REFUSED THE BREATH TEST AFTER THE I/C WAS READ TO HIM.

C/W READ ON CAMERA TO THE D.

NO Q&A CONDUCTED.

## DUI WITNESS LIST

22000902

Arresting Officer: OFC. CAMERON CARVER 471 Email: ccarver@pbgfl.com

Agency Address: 10500 N Military Trail, Palm Beach Gardens, FL 33410 Phone: (561) 799-4445

Can Testify To: Facts of Case

Backup Officers: Ofc. Sheldon Keel #508 / Ofc. Kristin Garito #500 / Sgt. Denis Beath #334

Agency Address: 10500 N Military Trail, Palm Beach Gardens, FL 33410 Phone: (561) 799-4445

Can Testify To: Primary Backup for DUI / Scene Safety

Crash Investigator: Self Email: \_\_\_\_\_

Agency Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Breathalyzer Technician: O'Neal ID: 6212 Agency: PBSO

DRE: \_\_\_\_\_ ID# \_\_\_\_\_ Agency Case #: \_\_\_\_\_

Agency Address: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Involvement: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Can Testify To: \_\_\_\_\_ ☐ Wheel Witness

Name: MARILYN DENISE BENTLEY Involvement: VICTIM

Address: 1243 7TH ST, WEST PALM BEACH, FL, 33401 Phone: (786) 704-2307

Can Testify To: CRASH - Driver in victim vehicle. ☐ Wheel Witness

Name: DONALD LEE KNIGHTEN JR. Involvement: VICTIM

Address: 711 FOREST CLUB DR UNIT 508, WELLINGTON, FL, 33414 Phone: (561) 402-9752

Can Testify To: CRASH - Passenger in victim vehicle. ☐ 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



# FLORIDA DRIVER EXCHANGE OF INFORMATION

CRASH DATE <b>02/19/2022</b>	TIME OF CRASH <b>9:32 PM</b>	REPORTING AGENCY CASE NUMBER <b>22000902</b>	HSMV CRASH REPORT NUMBER <b>24718313</b>
COUNTY OF CRASH <b>PALM BEACH</b>	PLACE OR CITY OF CRASH <b>PALM BEACH GARDENS</b>	<input checked="" type="checkbox"/> Within City Limits CRASH OCCURRED ON STREET, ROAD, HIGHWAY <b>SR786 (PGA BLVD)</b>	
AT STREET ADDRESS # <b>30</b>	OR FEET <b>30</b>	MILES <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W	AT / FROM INTERSECTION WITH STREET, ROAD, HIGHWAY <b>SR809 (N MILITARY TRL)</b>
OR FROM MILEPOST #			

<b>SECTION 1</b>		<input checked="" type="checkbox"/> VEHICLE <input type="checkbox"/> NON-MOTORIST	
YEAR <b>2017</b>	MAKE <b>LEXS</b>	STYLE/BODY TYPE <b>SUV</b>	VEHICLE LICENSE NUMBER <b>JCQX78</b>
INSURANCE COMPANY <b>PROGRESSIVE SELECT INSURANCE COMPAN</b>		INSURANCE POLICY NUMBER <b>932438380</b>	
NAME OF VEHICLE OWNER <b>STEVEN A. FLEMING</b>		CURRENT ADDRESS <b>5114 ARTESA WAY W</b>	CITY & STATE <b>PALM BEACH GARDENS, FL</b>
NAME OF DRIVER/NON-MOTORIST <b>STEVEN A. FLEMING</b>		CURRENT ADDRESS <b>5114 ARTESA WAY W</b>	CITY & STATE <b>PALM BEACH GARDENS, FL</b>
DRIVER LICENSE NUMBER <b>F455781733630</b>	STATE <b>FL</b>	DL TYPE <b>E</b>	SEX <b>M</b>
DATE OF BIRTH <b>10/03/1973</b>		DRIVER/NON-MOTORIST PHONE NUMBER <b>(917) 693-6888</b>	

<b>SECTION 2</b>		<input checked="" type="checkbox"/> VEHICLE <input type="checkbox"/> NON-MOTORIST	
YEAR <b>2020</b>	MAKE <b>TOYT</b>	STYLE/BODY TYPE <b>VN</b>	VEHICLE LICENSE NUMBER <b>TG8640</b>
INSURANCE COMPANY <b>GEMINI INSURANCE COMPANY</b>		INSURANCE POLICY NUMBER <b>GVE100144807</b>	
NAME OF VEHICLE OWNER <b>PALM BEACH COUNTY</b>		CURRENT ADDRESS <b>2455 VISTA PARKWAY</b>	CITY & STATE <b>WEST PALM BEACH, FL</b>
NAME OF DRIVER/NON-MOTORIST <b>MARILYN D. BENTLEY</b>		CURRENT ADDRESS <b>1243 7TH ST</b>	CITY & STATE <b>WEST PALM BEACH, FL</b>
DRIVER LICENSE NUMBER <b>B534544748449</b>	STATE <b>FL</b>	DL TYPE <b>E</b>	SEX <b>F</b>
DATE OF BIRTH <b>09/24/1974</b>		DRIVER/NON-MOTORIST PHONE NUMBER <b>(786) 704-2307</b>	

<b>SECTION</b>		<input type="checkbox"/> VEHICLE <input type="checkbox"/> NON-MOTORIST	
YEAR	MAKE	STYLE/BODY TYPE	VEHICLE LICENSE NUMBER
INSURANCE COMPANY		INSURANCE POLICY NUMBER	
NAME OF VEHICLE OWNER		CURRENT ADDRESS	CITY & STATE
NAME OF DRIVER/NON-MOTORIST		CURRENT ADDRESS	CITY & STATE
DRIVER LICENSE NUMBER	STATE	DL TYPE	SEX
DATE OF BIRTH		DRIVER/NON-MOTORIST PHONE NUMBER	

<b>SECTION</b>		<input type="checkbox"/> VEHICLE <input type="checkbox"/> NON-MOTORIST	
YEAR	MAKE	STYLE/BODY TYPE	VEHICLE LICENSE NUMBER
INSURANCE COMPANY		INSURANCE POLICY NUMBER	
NAME OF VEHICLE OWNER		CURRENT ADDRESS	CITY & STATE
NAME OF DRIVER/NON-MOTORIST		CURRENT ADDRESS	CITY & STATE
DRIVER LICENSE NUMBER	STATE	DL TYPE	SEX
DATE OF BIRTH		DRIVER/NON-MOTORIST PHONE NUMBER	

<b>SECTION</b>		<input type="checkbox"/> VEHICLE <input type="checkbox"/> NON-MOTORIST	
YEAR	MAKE	STYLE/BODY TYPE	VEHICLE LICENSE NUMBER
INSURANCE COMPANY		INSURANCE POLICY NUMBER	
NAME OF VEHICLE OWNER		CURRENT ADDRESS	CITY & STATE
NAME OF DRIVER/NON-MOTORIST		CURRENT ADDRESS	CITY & STATE
DRIVER LICENSE NUMBER	STATE	DL TYPE	SEX
DATE OF BIRTH		DRIVER/NON-MOTORIST PHONE NUMBER	

<b>REPORTING OFFICER</b>		DEPARTMENT		FHP	SO	PD	OTHER
ID/BADGE NUMBER <b>471</b>	RANK & NAME <b>CAMERON CARVER</b>	<b>Palm Beach Gardens Police Department</b>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>



**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)
I/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: 2022004743	Date: 02/20/2022
	Specialist Name/ID: T Howard/7185