0277129
2025-MM-010163

P# 1463

☒ Marsy's Law (FL Const. Art. I § 16(b))

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 500000
Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE
Agency Report Number: 06- 25-118743

ADMINISTRATIVE

Charge Type (Check as many as apply): ☐ 1. Felony ☐ 2. Traffic Felony ☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other
Weapon Seized / Type: 2 (1. Yes 2. No)
Multiple Clearance Indicator: 02
Location of Arrest (Including Name of Business): [redacted]
Location of Offense (Business Name Address): Same as arrest
Date of Arrest: 11/20/25
Time of Arrest: 23:11
Booking Date: 11/21/2025
Booking Time:
Jail Date:
Jail Time:
Location of Vehicle: N/A

DEFENDANT

Name (Last): Lampert, (First): Heather, (Middle):
Alias (Name, DOB, Soc. Sec. #, Etc.):
Race (W - White I - American Indian B - Black O - Oriental/Asian): W
Sex: F
Date of Birth: 01/25/1983
Height: 5'10
Weight: 140
Eye Color: Brown
Hair Color: Brown
Complexion: PALE
Build: MEDIUM
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description): Tattoo on sholder
Marital Status: Single
Religion: Christianity
Indication of Alcohol Influence / Drug Influence: Y ☐ N ☒ Unk ☐
Local Address (Street, Apt. Number): [redacted] (City): (State): (Zip):
Phone: 561-523-2762
Residence Type (1. City 2. County 3. Florida 4. Out of State): 2
Permanent Address (Street, Apt. Number): (City): (State): (Zip):
Phone:
Address Source: VERBAL
Business Address (Name, Street): (City): (State): (Zip):
Phone:
Occupation: Unemployed
D/L Number, State: L200-601-80-500-0
Soc. Sec. Number: [redacted]
INS Number:
Place of Birth (City, State): West Palm Beach, FL
Citizenship: 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 ☐ Legal ☐ Other
(Last): (First): (Middle):
Residence Information:
Address (Street, Apt. Number): (City): (State): (Zip):
Business Phone:
Notified by (Name): Date: Time:
Juvenile Disposition (1. Handled/ proceed Dept. and 2. Other Agency Referred):
Released To (Name): Relation: Date: Time:
The above address provided by ☐ defendant and / or ☐ defendant's parents. The child and / or parent was told to keep the Juvenile Court Clerk (Phone 355-7526) informed of any change of address. ☐ Yes, by (Name): ☐ No, (Reason):
School Attended: Grade:
Property Crime? ☐ Yes ☐ No
Description of Property:
Value of Property:

CODE

Drug Activity: S. Sell, B. Buy, T. Traffic, N. N/A, P. Possess, 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

CHARGE

Charge Description: Battery (Domestic)
Counts: 1
Domestic Violence: Y ☒ N ☐
Statute Violation Number: 784.03(1a1)
Violation of ORD #:
Drug Activity: N
Drug Type: N
Amount / Unit:
Offense #: 25-118743
Warrant / Capias Number:
Bond: none

CHARGE

Charge Description: Misuse of 911
Counts: 1
Domestic Violence: Y ☐ N ☒
Statute Violation Number: 365.172(14)A
Violation of ORD #:
Drug Activity: N
Drug Type: N
Amount / Unit:
Offense #: 25-118743
Warrant / Capias Number:
Bond: 1000 —

CHARGE

Charge Description:
Counts:
Domestic Violence: Y ☐ N ☐
Statute Violation Number:
Violation of ORD #:
Drug Activity:
Drug Type:
Amount / Unit:
Offense #:
Warrant / Capias Number:
Bond:

CHARGE

Charge Description:
Counts:
Domestic Violence: Y ☐ N ☐
Statute Violation Number:
Violation of ORD #:
Drug Activity:
Drug Type:
Amount / Unit:
Offense #:
Warrant / Capias Number:
Bond:

NOTICE TO APPEAR

Location (Court, Room Number, Address):
Court Date and Time: Month: Day: (Year): Time: AM ☐ 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.
Signature of Defendant (or Juvenile and Parent / Custodian):
Date Signed: 11/20/25

ADMIN

HOLD for other Agency: Name:
☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other
Intake Deputy: [redacted] I.D. #: Pouch #:
Signature of Arresting Officer:
Arresting Officer (Print): D/S T. Reis I.D. #: 32166
Transporting Officer: D/S T. Reis I.D. #: 32166 Agency: PBSO
Name Verification (Printed by Arrestee) (PRINT): 11/21/2025 AT 0156 hrs
Witness here if subject signed with an "X":
PAGE 1 OF 1

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (I.A. ONLY)

PBSO #0148 REV. 04/22

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VICTIM NOTIFICATION REQUESTED
VIC

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'25 NOV 21 AM 7:57

OBTS Number

PROBABLE CAUSE AFFIDAVIT

1 Arrest 2 N.T.A. 3 Request for Warrant 4 Request for Capias | Juvenile: I | N

ADMIN

Agency ORI Number: FLO 500000 | Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE | Agency Report Number: 06- 25-118743

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

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
Lampert Heather		W	F	01/25/1983

CHARGES

Battery (Domestic) 784.03(1a1)	Misuse of 911 365.172(14)b

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
BECKEMEYER DEAN	W	M	[redacted]

Local Address (Street, Apt. Number) (City) (State) (Zip): [redacted] | Phone: [redacted] | Address Source: VERBAL

Business Address (Name, Street) (City) (State) (Zip) | Phone | Occupation: Self-employed

PROBABLE CAUSE STATEMENT

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
☐ confessed to _____ admitting to the below facts
☐ was observed by _____ Who told _____ that he/she saw the arrested person commit the below acts
☒ was found to have commited the below acts resulting from my (described) investigation

On the 20th day of November 20 25 at 23:11 ☐ A.M. ☒ P.M. (Specifically, include facts constituting cause for arrest.)

☒ Marsy's Law (FL Const. Art. I § 16(b))

On Thursday, November 20th, 2025, at approximately 2249 hours, I responded to [redacted] in reference to a domestic disturbance in progress.

Upon my arrival, I made contact with the complainant, identified as Dean Beckemeyer, [redacted] in front of the residence. I could immediately observe a long stretch of wet marks running along the front of his person on his shirt and his pants. Dean then stated the following: He and his girlfriend, Heather Lampert, 01/25/1983, recently returned from Duff's after dinner. Both were drinking heavily and began arguing after returning home due to her purse being missing. Heather demanded that he locate her purse and call the restaurant to see if they have it. The restaurant advised that they did not locate the purse, and his attempts to find it around the residence were unsuccessful. After hearing her purse could not be located, she began acting angrier towards him and began throwing numerous items at him. He advised that one of the objects that struck him contained water, which splashed all over him. Other items of "bullshit" also collided with him, but he does not know exactly what hit him. He immediately decided to contact law enforcement for assistance before the situation escalated any further.

While speaking with Dean, I observed that he appeared to be under the influence of alcohol. The front of Dean's shirt and pants were wet with water consistent with his statement of being struck with a fluid-filled object.

I then attempted to make contact with Heather, who was inside the residence. Heather could be heard inside the residence on the other side of the front door telling deputies to enter the residence, but refused to exit. After continued attempts to have her exit the property, she eventually complied and began speaking with deputies. Heather appeared to be heavily intoxicated and denied that any altercation occurred. She does not know how the water got on him and denied throwing anything at him.

While speaking with Heather, I did not observe any physical injuries that would indicate an altercation had occurred.

Based on the above information, Heather Lampert is in violation of Florida Statute 784.03(1)(a)(1) simple battery domestic.

While on scene, Heather was informed numerous times not to use 911 to contact emergency services due to her making statements to report her purse as stolen. As deputies walked away from Heather, she picked up her phone and began calling an unknown subject. It was confirmed via PBSO dispatch that she contacted emergency services utilizing 911 using phone number 561-523-2762.

Due to Heather's use of 911 for a non-emergency purpose while in the presence of a uniformed Deputy Sheriff, Heather Lampert is in violation of Florida Statute 365.172(14) false 911 calls.

ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH
D/S T. Reis ID#: 32166
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 20 day of November 20 25 by D/S T. Reis 32166
(Print name of Arresting/Investigative Officer) who is personally known to me and/or produced identification. Type of identification produced: _____

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

PAGE 1 OF 1

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PALM BEACH COUNTY SHERIFF'S OFFICE (PBSO)
CASE INFORMATION FORM

Date:	Time:	Case #:
11/20/2025	2317	25

CHECK ONE: [X] PERSON CRIME [ ] PROPERTY CRIME [ ] DOMESTIC - NON-CRIME CASE [ ] OTHER - NON-CRIME CASE

Deputy:	ID#:	Dist. / Div.	Phone:	Case Type/Offense/Crime (do not use signal code):
D/S STEVENS	47493	D15	561 386 4436	DOMESTIC BATTERY

[X] Victim [ ] Witness • Name (Last, First, M.):	Race:	Sex:	D.O.B.:	Phone:
DEAN, BECKEMEYER	W	M	[redacted]	[redacted]

Victim/Witness Address:	City/State/Zip
[redacted]	[redacted]

DEPUTY TO VERIFY AND CHECK APPLICABLE BOX(ES) – VICTIM/WITNESS TO INITIAL APPLICABLE SECTIONS – WRITE LEGIBLY

A [X] VICTIM / WITNESS RIGHTS BROCHURE – ACKNOWLEDGEMENT

BROCHURE TO BE PROVIDED TO ALL CRIME VICTIMS AND/OR WITNESSES **(PBSO #0147)**

I, **[Initials** DM **]**, have received a copy of the Victim Rights Brochure and/or acknowledge I can view electronically via **www.pbso.org**.

B [X] VICTIM NOTIFICATION (V.I.N.E.) – FOR CORRECTIONS TO CONTACT VICTIM UPON JAIL RELEASE

REQUIRED IF ARREST OR WARRANT FOR HOMICIDE, ATTEMPTED MURDER, SEXUAL OFFENSES, ATTEMPTED SEXUAL OFFENSES, STALKING, DOMESTIC/DATING VIOLENCE - TO INCLUDE ANY ASSAULT, AGG. ASSAULT, BATTERY, AGG. BATTERY, SEXUAL ASSAULT, SEXUAL BATTERY, STALKING, AGG. STALKING, VIOLATION OF NCO OR INJUNCTION, 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.

Suspect Name (Last, First, M.):	Race:	Sex:	D.O.B.:
Heather Lampert	W	F	01/25/1983

I understand that I may be notified when the arrestee is released from PBSO custody at the phone number I provided above.
I request the following person be notified if I was not contacted (optional):

Name: _____ Address: _____ Primary Phone: _____
(Next of Kin/Neighbor/Friend/etc.)

(optional) I choose **NOT** to be notified when the arrestee is released from custody. **[Initial_____]**

Deputy to check one: ( ) ARREST or ( ) WARRANT #_____

C [X] MARSY'S LAW – CONFIDENTIAL VICTIM INFORMATION – FL Constitution, Article 1, §16(b)

CRIME REPORT ONLY - MUST BE LISTED AS A "VICTIM" IN AN OFFENSE REPORT (or next of kin); NOT A BUSINESS, COMPLAINANT OR OTHER

I, **[Initials** DM **]** request confidentiality pursuant to Marsy's Law, FL Constitution, Article 1, §16(b) as provided below:
As a victim, I have the right under the Florida Constitution to prevent the disclosure of certain information or records that could be used to locate or harass me or my family, or which could disclose confidential or privileged information about me. I do hereby request that the email address, phone number and work and business addresses of me and my family be redacted from my records indefinitely, if my records are requested pursuant to a public records request.

D [ ] CONFIDENTIAL VICTIM INFORMATION – FS 960 – ONLY APPLIES TO SPECIFIC CRIMES LISTED BELOW

CRIME REPORT ONLY - MUST BE LISTED AS A "VICTIM" IN AN OFFENSE REPORT (or next of kin); NOT A BUSINESS, COMPLAINANT OR OTHER

I, **[Initials_____]**, as a victim (or spouse/former spouse) of **Harassment** (FSS 784.048(1)(a)), **Sexual Battery**, **Aggravated Child Abuse**, **Domestic Violence** (live together, lived together or have a child in common), **Aggravated Stalking** (FSS 784.048 (3)(4)), or **Aggravated Battery** (FSS 784.045), I do hereby request that my home and employment telephone number, home and employment address and personal assets be redacted from my records requested pursuant to public records request for a period of five (5) years from the date noted on this form.

E [ ] AUTHORIZED RECORD EXEMPTION(S) - PUBLIC RECORDS ACT - FS 119.071(4)(d) – VERIFY EMPLOYMENT

CRIME OR NON CRIME REPORT - MUST FIT THE CRITERIA DESCRIBED

I, **[Initials_____]**, attest that I am an individual exempt under FS 119.071(4)(d) (to include a spouse or child of), a current or former **Law Enforcement Officer, Firefighter, Justice or Judge, General Magistrate, Code Enforcement Officer, Child Enforcement Hearing Officer, State Attorney, Public Defender, U.S. Attorney, U.S. Judge, U.S. Magistrate**, or other authorized person and hereby request my information be redacted from public record.

CURRENT or FORMER exempt position: _____ Name of current or last agency: _____

SIGN BELOW

I have read and initialed the applicable section(s) and sign of my own free will (if a minor, a parent or guardian must sign):

Print Parent/Guardian/Next of Kin name (if applicable):

MY SIGNATURE: X _____ Date: 11/20/25

Deputy Signature: _____ ID#: 47493

▶ *If Criminal Case or Domestic – Non-Crime:*
Scanned to Victim Advocate by ID#: _____

WHITE – CENTRAL RECORDS YELLOW – CORRECTIONS (if arrest) PINK – VICTIM/WITNESS

PBSO#0028 REV. 04/25

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Palm Beach County Sheriff's Office

Florida State Statute Exemption Sheet

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	☐	119.071(4)(c)	Undercover personnel	
	☐	119.071(2)(e)	Confession	
Public Info. Exemptions	☒	FL Const. Art. I, s. 16(b)(5)	Marsy's Law – victim information shall be redacted. The term "victim" also includes the victim's lawful representative, the parent or guardian of a minor, or the next of kin of a homicide victim. The term "victim" does not include the accused (ref. page 99 of the CRTM for additional information)	1-4
	☐	119.071(2)(j)	Home/employment telephone number, home/employment address, or personal assets of a person who has been the victim of sexual battery, aggravated child abuse, aggravated stalking, harassment, aggravated battery or domestic violence	
	☐	119.0712(2)	Personal information contained in a motor vehicle record	
	☐	316.650(11)	Driver information contained in a uniform traffic citation	
	☐	119.071(4)(d)2.a.	Home addresses, telephone numbers, dates of birth, and photographs of active/former LE personnel, spouses, and children	
Florida Rules of Judicial Administration 2.420	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers	2
	☐	(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	☐			
	☐			
	☐			
	☐			

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REVIEW COMPLETED BY

Booking Number: 2025031217 WDC	**Date:** 11/21/2025
	Specialist Name/ID#: C.Daniels 30347