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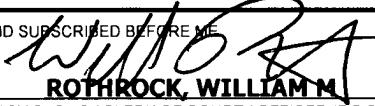
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ARREST/NOTICE TO APPEAR Juvenile Referral Report												Check if Supplement is Attached																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																					
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Race W-White B-Black		Sex I-American Indian O-Asian/Asian		Date of Birth W m 090496		Height 602		Weight 157		Eye Color B20		Hair Color B20		Complexion LIGHT		Build LARGE		Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)												Marital Status		Religion		Indication of: Alcohol Influence Drug Influence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Unk		Local Address (Street, Apt. Number)						(City)			(State)			(Zip)		Phone ()		Residence Type: 1. City 2. County 3. Florida 4. Out of State		Permanent Address (Street, Apt. Number) 0634 OLD MANCHESTER RD						(City) PETRU			(State) VERMONT			(Zip) 05152		Phone 203 918 9169		Address Source VERMONT DC		Business Name (Name, Street)						(City)			(State)			(Zip)		Phone ()		Occupation STUDENT		D/L Number, State 02831031 VERMONT			Soc. Sec. Number 5000			INS Number			Place of Birth (City, State) Charlottesville VA			Citizenship US		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		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		<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> 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				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.												School Attended				<input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No (Reason)												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. Barbituate C. Cocaine E. Heroin		H. Hallucinogen M. Marijuana O. Opium/Deriv.		P. Parapharmalia/ Equipment S. Synthetic		U. Unknown Z. 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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) X F. Fanning												Date Signed 01/05/17										HOLD for other agency						Signature of Arresting Officer X A. MAZZA 9156						Name Verification (Printed by Arrestee) (PRINT) X Fanning Miles Hearon JT						PAGE _____ OF _____		<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal						<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other														Initials/Deputy		I.D. #		Pouch #		Transporting Officer		I.D. #		Agency		Witness here if subject signed with an "X"						Thomas		790		A. MAZZA		9156		PBPD							
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PROBABLE CAUSE AFFIDAVIT

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

JUVENILE

OBTS Number		PROBABLE CAUSE AFFIDAVIT					
D	Agency ORI Number	Agency Name	Agency Report Number				
M	FL 0500600	PALM BEACH POLICE DEPARTMENT	7	6	17-000039		
N	Charge Type: Check as many as apply: 1. Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other			Special Notes:			
D	Name (Last, First, Middle) FANNING, HEARON MILES			Alias		Race	Sex
E						W	M
F						09/04/1996	
C	Charge Description 322.212(1) POSSESSION OF FORGED/COUNTERFEIT/ETC DL		Charge Description				
H	Charge Description		Charge Description				
A							
R							
G							
E							
S							
V	Victim's Name (Last, First, Middle) SOCIETY, SOCIETY				Race	Sex	Date of Birth
I	Local Address (Street, Apt. Number) 00 PALM BEACH, PALM BEACH, FL 33480		(City)	(State)	(Zip)	Phone	Address/Source
M	Business Address (Name, Street)		(City)	(State)	(Zip)	Phone	Occupation
<p>The undersigned certifies and swears that he/she has just and resonable grounds to believe, and does believe that the above named Defendant committed the following violation of law.</p> <p>The Person taken into custody . . .</p> <p><input checked="" type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by _____ who told _____</p> <p><input type="checkbox"/> confessed to _____ that he/she saw the arrested person committ the below acts.</p> <p><input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the <u>5</u> day of <u>January</u> <u>2017</u> at <u>22:34</u> (Specifically include facts constituting cause for arrest.)</p>							
<p>On 01/05/2017, at 2215 hours, I responded to 1 South County Road at the request of The Breakers Security. The details are as follows:</p> <p>Upon my arrival I met with Breakers security personnel who were with one unidentified white male. The subject, Fanning Hearon (W/M 09/04/1996) later identified by his Vermont driver's license, stated that he was with Breakers security personnel, because a Rhode Island driver's license (#4090490) he displayed to them was a "fake ID". Breakers security personnel advised they observed Hearon with an alcoholic beverage and believed he was underage. Security asked Hearon to present ID, and Hearon presented a Rhode Island driver's license (#4090490). Breakers security believed the ID to be a fictitious and contacted the Palm Beach Police Department to verify the driver's license's authenticity. At this time Hearon told Breakers security that the Rhode Island driver's license was a fake.</p> <p>Palm Beach Communications advised that there was no record found for the Rhode Island driver's license given and that the license was not valid. I read Hearon his Constitutional rights from a pre-printed Palm Beach Police Department Miranda card which he signed and dated. Post Miranda, Hearon advised to me that the Rhode Island driver's license was in fact a fictitious driver's license. He advised that the fictitious driver's license was to "get into bars and order drinks". All of Hearon's statements were recorded on vehicle 801's in-car video system.</p> <p>Due to the fact that he knowingly had in his possession a fictitious driver's license, he was placed under arrest for Possession of an Instrument in the Similitude of a Driver's Licesne pursuant to F.S.S 322.212(1)(b). The fictitious Rhode Island driver's license was seized and submitted to the PBPB CSEU. Hearon was transported to the Palm Beach County Jail without further incident.</p>							
SWORN AND SUBSCRIBED BEFORE ME  ROTHROCK, WILLIAM M. NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)		 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER MAZZA, ANTHONY M. (0291560) NAME OF OFFICER (PLEASE PRINT) <u>01/05/2017</u> DATE					
ADMINISTRATIVE	01/05/2017	DATE	01/05/2017	DATE			PAGE 1 OF 1

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.