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19MM011862 SB2661

OBT Number		ARREST / NOTICE TO APPEAR		1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias		1	JUVENILE
Agency ORI Number 0500400		Agency Name Delray Beach Police Department		Agency Report Number (N.T.A.'s only) 4, 0 19-016757			
Charge Type: Check as many as apply: ☐ 1. Felony ☐ 2. Traffic Felony ☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other		If Weapon Seized Enter Type: Hands/fist/feet/teeth		Multiple Clearance Indicator 1			
Location of Arrest (Including Name of Business) 101 PUGLESI WAY, DELRAY BEACH, FL				Location of Offense (Business Name, Address) 104 NE 2ND AVE, DELRAY BEACH, FL 33444			
Date of Arrest 10/23/2019	Time of Arrest 02:34	Booking Date 10/23/2019	Booking Time 02:44	Jail Date 10/23/2019	Jail Time 03:10	Location of Vehicle	
Name (Last, First, Middle) MEDINA, STEVEN JOSEPH				Alias (Name, DOB, Soc. Sec. #, Etc.) Alias:			
Race W - White B - Black O - Oriental/Asian W	Sex M	Date of Birth 10/11/1991	Height 5'09	Weight 180	Eye Color BROWN	Hair Color BROWN	Complexion LIGHT
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)				Marital Status S	Religion NOT INDICA	Indication of: Alcohol Influence Yes ☐ No ☐ Unk. ☐ Drug Influence Yes ☐ No ☐ Unk. ☐	
Local Address (Street, Apt. Number) 2740 SW 11TH CT, BOYNTON BEACH, FL 33426				Phone		Residence Type: 1. City 2. County 3. Florida 4. Out of State 1	
Permanent Address (Street, Apt. Number) 2740 SW 11TH CT, BOYNTON BEACH, FL 33426				Phone		Address Source VERBAL	
Business Address (Name, Street) (City) (State) (Zip)				Phone		Occupation	
D/L Number, State M350790913711 / FL		Soc. Sec. Number [REDACTED]		INS Number		Place of Birth (City, State) BOYNTON BEACH, FL	
Citizenship US							
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	
☐ Parent ☐ Legal Custodian		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 Department and Released 2. TOF JAC 3. Incarcerated			
Released To: (Name)		Relationship	Date	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 (Phone 355-2526) informed of any change of address.				School Attended		Grade	
☐ Yes, by: ☐ No:		Property/Crime?		Description of Property		Value of Property	
☐ Yes, by: ☐ No:		☐ Yes ☒ No					
Drug Activity N. N/A P. Possess	S. Sell B. Buy T. Traffic	R. Snuggle D. Deliver E. Use	K. Dispose/ Distribute	M. Manufacture/ Produce/ Cultivate	Z. Other	Drug Type 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 SIMPLE BATTERY(TOUCH OR STRIKE)				Statute Violation Number 784.03(1A)		Violation of ORD #	
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond OR
	N	/		1	☐ Y ☒ N		
Charge Description				Statute Violation Number		Violation of ORD #	
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		
Charge Description				Statute Violation Number		Violation of ORD #	
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		
Health / Apparent Physical Condition of Defendant				Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries			
Check which applies: ☐ Released O.R. ☐ Released to Parent/Guardian ☒ T.O.T. County Jail ☐ Postal Bond ☐ South County Mental Health				PROPERTY - Received By Released By Released To			
Transported By				Date Transported	Time Transported	Other	
☒ INSTRUCTION NO. 1 - Mandatory appearance in court ☐ INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.				Location (Court, Room) South County 200 W Atlantic Ave Delray Beach, FL 33444		Court Date and Time: 12/05/2019 08:30:00	
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]		Date Signed [Blank]	
HOLD for Other Agency ☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other				Signature of Arresting Officer [Signature]		Name Verification (Printed by Arrestee) (PRINT)	
Transporting Officer WILDER, VINCENT T				I.D. # 1175		Agency DBPD	
Pouch # 15 Thompson				I.D. # 1175		Agency DBPD	
Witness here if subject signed with an "X"							

☐ COURT
 ☐ STATE ATTORNEY
 ☐ AGENCY
 ☐ CENTRAL RECORDS
 ☐ JAIL
 ☐ CRIME ANALYSIS
 ☐ P.I.O.
 ☐ DEFENDANT

SCANNED

OCT 23 2019

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OBT Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	JUVENILE
Agency ORI Number FL 0500400		Agency Name DELRAY BEACH POLICE DEPARTMENT		Agency Report Number 4 0 19-016757					
Charge Type: Check as many as apply.		☐ 1. Felony ☐ 2. Traffic Felony ☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other				Special Notes:			
Name (Last, First, Middle) MEDINA, STEVEN JOSEPH		Alias		Race W		Sex M		Date of Birth 10/11/1991	
Charge Description 784.03(1A1) SIMPLE BATTERY(TOUCH OR STRIKE)		Charge Description							
Charge Description		Charge Description							
Victim's Name (Last, First, Middle) FORESMAN, DONALD COLE		Race W		Sex M		Date of Birth 04/07/1957			
Local Address (Street, Apt. Number) 342 N SWINTON AVE, DELRAY BEACH, FL 33444		(City)		(State)		(Zip)		Phone	
Business Address (Name, Street) UNEMPLOYED		(City)		(State)		(Zip)		Phone	
								Address Source VERBAL	
								Occupation	
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 FORESMAN who told OFC WILDER 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 23 day of October, 2019 at 03:17 (Specifically include facts constituting cause for arrest.) On 10/23/2019 at approximately 0203 hours, I was dispatched to 104 NE 2nd Ave (Hyatt) regarding a battery that just occurred. While in route, dispatch provided a description of the defendant, Steven Medina, as a white male wearing a white button-down shirt and black dress pants. Officer Butner stated he was making contact with the defendant fitting that description in the area of 101 Puglesi Way, Delray Beach, FL. Upon my arrival to the Hyatt, I met with the victim, Donald Foresman, who had a blood covered face with a significant gash above his right eye. Foresman stated he was sleeping when the defendant approached him and told him to get up. Foresman stated the defendant proceeded to punch him with a closed fist multiple times in his face unprovoked. Foresman stated the defendant then proceeded to follow him as he tried to flee from the defendant until the manager of the Hyatt, Steven Krosecky, was able to call police. I transported Foresman to the area of Officer Butner to conduct a field show-up. Foresman confirmed the identity of the defendant as the one who battered him. Based on the above stated facts, probable cause exists to charge the defendant, Steven Medina, with F.S.S. 784.03 (1) (A) (1) SIMPLE BATTERY(TOUCH OR STRIKE).									
SWORN AND SUBSCRIBED BEFORE ME RASOR, JEFFREY WILDER, VINCENT T (1175) NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) SIGNATURE OF ARRESTING / INVESTIGATING OFFICER 10/23/2019 WILDER, VINCENT T (1175) DATE NAME OF OFFICER (PLEASE PRINT) 10/23/2019 10/23/2019 DATE DATE									
PAGE 1 OF 1									

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

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OCT 23 2019



**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)
L/E Exemptions	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	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)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(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	☐	415.107 (1)	Other: Elderly Abuse	
	☐	119.0712 (2)	Other: Personal Information Contained in a Motor Vehicle Record	

REVIEW COMPLETED BY

Booking Number: 2019034405	Date: 10/23/2019
	Specialist Name/ID: M. Tooks #8557

SCANNED

OCT 23 2019

Created 7/5/2016 | Updated 3/5/2018