



Case Report Detail

Flagler County Sheriff's Office
901 East Moody Blvd
Bunnell, FL 32110
386-437-4116

Print Date/Time: 12/03/2019 13:37
Login ID: flagso\bkershaw
Case Number: 2019-00109164

Flagler County Sheriff's Office
ORI Number: FL0180000

Case Details:

Case Number: 2019-00109164 **Incident Type:** Fraud
Location: 5545 BELLE TERRE PKWY
Palm Coast,FL 32137 **Occurred From:** 12/01/2016 08:00
Occurred Thru: 11/26/2019 11:00
Reported Date: 11/26/2019 11:59 Tuesday
Status: Actual **Status Date:** 11/26/2019

Case Assignments:

Assigned Officer	Assignment Date/Time	Assignment Type	Assigned By Officer	Due Date/Time
<u>Associated Cases</u>	<u>Status</u>	<u>Assisting ORIs</u>	<u>Role</u>	
<u>Modus Operandi</u>		<u>Solvability Factors</u>	<u>Weight</u>	
			Total:	

Offenses

No.	Group/ORI	Crime Code	Statute	Description	Counts
1	State	260A	817.034.4.A.3	SCHEME TO DEFRAUD - FALSE PRETENSES UNDER \$20K	1

Offense # 1

Group/ORI: State **Crime Code:** 260A **Statute:** 817.034.4.A.3 **Counts:** 1 **Attempt/ Commit Code:** Commit
Description: SCHEME TO DEFRAUD - FALSE PRETENSES UNDER \$20K **Offense Date:** 12/01/2016

NCIC Code: **Scene Code:** **Bias/Motivation:**
Offense Status: **Status Date:** **Occupancy Code:**
Clery Location: **Domestic Code:** **Child Abuse:**
Arson Code: **Aiding/Abetting:** **Sub-Code:**
Gang Related: **# of Juveniles:** **IBR Seq. No:** 1
of Adults: **Abandoned Structure:** **Household Status:**
Property Damage Amt.: **Carjacking:**
Domestic Circumstance: **Order of Protection:** **Premise Code:**
Accosting Situation: **Anit-reproductive rights crime:** **Prior Inv - Victim:**
Gambling Motivated: **Prior Inv - Offender:** **Cargo Theft:**
Special Circumstances: **Hate Bias Indicator:** **Precipitating Event:**

Offender Suspected of Using

Alcohol:
Drugs:
Computer:
Aggravated Assault/ Homicide Circumstances #1:
Aggravated Assault/ Homicide Remarks #1:
Justifiable Homicide Circumstances :
Method of Entry Type:
Point of Entry:
Method of Exit Type:
Point of Exit:
Direction of Travel:
Counterfeit Type:

Victim Suspected of Using

Alcohol:
Drugs:
Computer:
Aggravated Assault/ Homicide Circumstances #2:
Aggravated Assault/ Homicide Remarks #2:
Justifiable Homicide Code :
Method of Entry :
of Premises Entered :
Method of Exit :
How Left Scene:

Counterfeit Status:

Counterfeit Amount:



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Subjects

Type	No.	Name	Address	Phone	Race	Sex	DOB/Age
Complainant	1	PATERNO, JENNIFER LEIGH	35 BOSTON LN Palm Coast,FL 32137		WHITE	Female	10/05/1981 38
Other	1	FURNARI, STEPHEN THOMAS	2119 FLAGLER AVE Flagler Beach,FL 32136	(917)597-9257	WHITE	Male	11/23/1971 48
		[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
		[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
		[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
		[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
		[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
		[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
		[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
		[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
		[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
		[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
		[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]

Subject # 1-Complainant

Primary: No
Name: PATERNO, JENNIFER LEIGH Race: WHITE Sex: Female DOB: 10/05/1981
Address: 35 BOSTON LN Palm Coast FL 32137 Height: 5ft 4 in Weight: Build:
Eyes: BRO Hair: BRO Age: 38
SSN: DVL #: [REDACTED] State: FL

Primary Phone: Resident Status: Statement Type:
Disposition: Date: Custody Status:

Related Offenses

Related Weapons

Victim/Offender Relationship

Transported By: Extent of Injury: Hospital:
Domestic Violence: Domestic Violence Referrals: Federal Agencies Involved:
Condition: Medical Treatment:

Missing Person Information



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Subject # 1-Other

Primary: No
Name: FURNARI, STEPHEN THOMAS
Address: 2119 FLAGLER AVE
Flagler Beach FL 32136
Primary Phone: (917)597-9257

Race: WHITE
Height: 6ft 2 in
Eyes: BRO
SSN:

Sex: Male
Weight: 210.0 lbs.
Hair: BRO
DVL #:

DOB: 11/23/1971
Build:
Age: 48
State: FL

Resident Type:
Disposition:

Resident Status:
Date:

Statement Type:
Custody Status:

Related Offenses

Related Weapons

Victim/Offender Relationship

Transported By:
Domestic Violence:
Condition:

Extent of Injury:
Domestic Violence Referrals:
Medical Treatment:

Hospital:
Federal Agencies Involved:

Missing Person Information

Subject # 1-Suspect

Primary: No
Name: [REDACTED]
Address: [REDACTED]
Palm Coast FL 32137
Primary Phone: [REDACTED]

Race: [REDACTED]
Height: [REDACTED]
Eyes: [REDACTED]
SSN:

Sex: [REDACTED]
Weight: [REDACTED]
Hair: [REDACTED]
DVL #:

DOB: [REDACTED]
Build: [REDACTED]
Age: [REDACTED]
State: [REDACTED]

Resident Type:
Disposition:

Resident Status:
Date:

Statement Type:
Custody Status:

Related Offenses

Related Weapons

Victim/Offender Relationship

Transported By:
Domestic Violence:
Condition:

Extent of Injury:
Domestic Violence Referrals:
Medical Treatment:

Hospital:
Federal Agencies Involved:

Missing Person Information



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Subject # **2-Suspect**

Primary: No
Name: [REDACTED]
Address: [REDACTED]
Palm Coast FL 32164
Primary Phone: [REDACTED]

Race: [REDACTED]
Height: [REDACTED]
Eyes: [REDACTED]
SSN: [REDACTED]

Sex: [REDACTED]
Weight: [REDACTED]
Hair: [REDACTED]
DVL #: [REDACTED]

DOB: [REDACTED]
Build: [REDACTED]
Age: [REDACTED]
State: [REDACTED]

Resident Type:
Disposition:

Resident Status:
Date:

Statement Type:
Custody Status:

Related Offenses

Related Weapons

Victim/Offender Relationship

Transported By:
Domestic Violence:
Condition:

Extent of Injury:
Domestic Violence Referrals:
Medical Treatment:

Hospital:
Federal Agencies Involved:

Missing Person Information

Subject # **3-Suspect**

Primary: No
Name: [REDACTED]
Address: [REDACTED]
Primary Phone: [REDACTED]
Resident Type:
Disposition:

Race:
Height:
Eyes:
SSN:

Sex:
Weight:
Hair:
DVL #:

Build:
Age:
State:

Resident Status:
Date:

Statement Type:
Custody Status:

Related Offenses

Related Weapons

Victim/Offender Relationship

Transported By:
Domestic Violence:
Condition:

Extent of Injury:
Domestic Violence Referrals:
Medical Treatment:

Hospital:
Federal Agencies Involved:

Missing Person Information



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Subject # **1-Witness**

Primary: No
Name: [REDACTED]
Address: [REDACTED]
Palm Coast FL 32164
Primary Phone: [REDACTED]

Race: [REDACTED]
Height: [REDACTED]
Eyes: [REDACTED]
SSN: [REDACTED]

Sex: [REDACTED]
Weight: [REDACTED]
Hair: [REDACTED]
DVL #: [REDACTED]

DOB: [REDACTED]
Build: [REDACTED]
Age: [REDACTED]
State: [REDACTED]

Resident Type:
Disposition:

Resident Status:
Date:

Statement Type:
Custody Status:

Related Offenses

Related Weapons

Victim/Offender Relationship

Transported By:
Domestic Violence:
Condition:

Extent of Injury:
Domestic Violence Referrals:
Medical Treatment:

Hospital:
Federal Agencies Involved:

Missing Person Information

Subject # **2-Witness**

Primary: No
Name: [REDACTED]
Address: [REDACTED]
Palm Coast FL 32137
Primary Phone: [REDACTED]

Race: [REDACTED]
Height: [REDACTED]
Eyes: [REDACTED]
SSN: [REDACTED]

Sex: [REDACTED]
Weight: [REDACTED]
Hair: [REDACTED]
DVL #: [REDACTED]

DOB: [REDACTED]
Build: [REDACTED]
Age: [REDACTED]
State: [REDACTED]

Resident Type:
Disposition:

Resident Status:
Date:

Statement Type:
Custody Status:

Related Offenses

Related Weapons

Victim/Offender Relationship

Transported By:
Domestic Violence:
Condition:

Extent of Injury:
Domestic Violence Referrals:
Medical Treatment:

Hospital:
Federal Agencies Involved:

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Subject # **3-Witness**

Primary: No
Name: [REDACTED]
Address: [REDACTED]
Palm Coast FL 32137
Primary Phone: [REDACTED]

Race: [REDACTED]
Height: [REDACTED]
Eyes: [REDACTED]
SSN: [REDACTED]

Sex: [REDACTED]
Weight: [REDACTED]
Hair: [REDACTED]
DVL #: [REDACTED]

DOB: [REDACTED]
Build: [REDACTED]
Age: [REDACTED]
State: [REDACTED]

Resident Type:
Disposition:

Resident Status:
Date:

Statement Type:
Custody Status:

Related Offenses

Related Weapons

Victim/Offender Relationship

Transported By:
Domestic Violence:
Condition:

Extent of Injury:
Domestic Violence Referrals:
Medical Treatment:

Hospital:
Federal Agencies Involved:

Missing Person Information

Subject # **4-Witness**

Primary: No
Name: [REDACTED]
Address: [REDACTED]
Palm Coast FL 32137
Primary Phone: [REDACTED]

Race: [REDACTED]
Height: [REDACTED]
Eyes: [REDACTED]
SSN: [REDACTED]

Sex: [REDACTED]
Weight: [REDACTED]
Hair: [REDACTED]
DVL #: [REDACTED]

DOB: [REDACTED]
Build: [REDACTED]
Age: [REDACTED]
State: [REDACTED]

Resident Type:
Disposition:

Resident Status:
Date:

Statement Type:
Custody Status:

Related Offenses

Related Weapons

Victim/Offender Relationship

Transported By:
Domestic Violence:
Condition:

Extent of Injury:
Domestic Violence Referrals:
Medical Treatment:

Hospital:
Federal Agencies Involved:

Missing Person Information



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Subject # **5-Witness**

Primary: No

Name: [REDACTED]

Address:

Primary Phone: [REDACTED]

Resident Type:

Disposition:

[Related Offenses](#)

[Related Weapons](#)

[Victim/Offender Relationship](#)

Transported By:
Domestic Violence:
Condition:

Extent of Injury:
Domestic Violence Referrals:
Medical Treatment:

Hospital:
Federal Agencies Involved:

[Missing Person Information](#)

Subject # **6-Witness**

Primary: No

Name: [REDACTED]

Address:

Primary Phone: [REDACTED]

Resident Type:

Disposition:

[Related Offenses](#)

[Related Weapons](#)

[Victim/Offender Relationship](#)

Transported By:
Domestic Violence:
Condition:

Extent of Injury:
Domestic Violence Referrals:
Medical Treatment:

Hospital:
Federal Agencies Involved:

[Missing Person Information](#)



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Subject # **7-Witness**

Primary: No

Name: [REDACTED]

Address:

Race:

Height:

Eyes:

SSN:

Resident Status:

Date:

Sex:

Weight:

Hair:

DVL #:

Build:

Age:

State:

Statement Type:

Custody Status:

Primary Phone: [REDACTED]

Resident Type:

Disposition:

[Related Offenses](#)

[Related Weapons](#)

[Victim/Offender Relationship](#)

Transported By:

Domestic Violence:

Condition:

Extent of Injury:

Domestic Violence Referrals:

Medical Treatment:

Hospital:

Federal Agencies Involved:

[Missing Person Information](#)

Subject # **8-Witness**

Primary: No

Name: [REDACTED]

Address:

Race:

Height:

Eyes:

SSN:

Resident Status:

Date:

Sex:

Weight:

Hair:

DVL #:

Build:

Age:

State:

Statement Type:

Custody Status:

Primary Phone: [REDACTED]

Resident Type:

Disposition:

[Related Offenses](#)

[Related Weapons](#)

[Victim/Offender Relationship](#)

Transported By:

Domestic Violence:

Condition:

Extent of Injury:

Domestic Violence Referrals:

Medical Treatment:

Hospital:

Federal Agencies Involved:

[Missing Person Information](#)

Arrests

Arrest No.	Name	Address	Date/Time	Type	Age
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Property

Date	Code	Type	Make	Model	Description	Tag No.	Item No.
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Vehicles

No.	Role	Vehicle Type	Year	Make	Model	Color	License Plate	State
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Initial Case Report-Gamarra

The following report details a complaint of fraud, and public corruption, that has been taking place at Belle Terre Elementary School, located at 5545 Belle Terre Parkway, Palm Coast, for a period of at least three years, as reported by the current President of the Parent Teacher Organization (PTO), Jennifer Leigh Paterno, on November 26, 2019, at approximately 1200 hours, at 712 S. Oceanshore Boulevard, Flagler Beach, within Flagler County.

On November 26, 2019, at approximately 1200 hours, Corporal Franklin Gamarra of the Flagler County Sheriff's Office (FCSO) Community Policing Division (CPD) met with Jennifer, her attorney, Stephen Furnari, and Jennifer's husband, Joseph Paterno, at Furnari's office, located at 712 S. Oceanshore Boulevard, Flagler Beach, to discuss her allegations. Jennifer stated that as the President of the PTO, she represented the PTO's interest in misappropriated funds that were used illegally, without consent or knowledge from the PTO board,

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Jennifer, and her attorney were provided with a business card, and case number for this complaint. Corporal Gamarra will notify the FCSO's Investigative Services Division, and appropriate chain of command of this complaint for further investigation. There is no further information to report at this time.