

0493593

663

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

Juvenile

OBTS Number		Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06-17155322	
Charge Type: Check as many as apply. <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony		<input type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Weapon Seized / Type 2 <input type="checkbox"/> 1. Yes <input type="checkbox"/> 2. No	
Location of Arrest (Including Name of Business) 3200 Belvedere Road, West Palm Beach FL 33406		Location of Offense (Business Name, Address) 3200 Belvedere Road West Palm Beach FL 33406					
Date of Arrest 11/23/2017	Time of Arrest 1845	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle Towed by All Florida Towing	
Name (Last, First, Middle) Wagner Bridgette Mary		Alias (Name, DOB, Soc. Sec. #, Etc.)					
Race W - White I - American Indian	Sex W F	Date of Birth 11/21/1964	Height 5'6"	Weight 120	Eye Color Blue	Hair Color Blonde	Complexion Fair
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) None visible		Marital Status Single	Religion None	Indication of: Alcohol Influence <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Unk. Drug Influence <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Unk.			
Local Address (Street, Apt. Number) 2955 NW 126th Ave Unit 2115		(City) Sunrise, FL 33323	(State)	(Zip)	Phone ()	Residence Type: 1. City 2. County 3. Florida 4. Out of State 3	
Permanent Address (Street, Apt. Number)		(City)	(State)	(Zip)	Phone ()	Address Source FL DL	
Business Address (Name, Street)		(City)	(State)	(Zip)	Phone ()	Occupation Healthcare Company owner	
D/L Number, State W256073649210, FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) West Point, New York	Citizenship USA
Co-Defendant Name (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 Name (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		
Parent Legal Custodian Other:		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.		2. TOT HRS / DYS 3. Incarcerated	
Released To: (Name)		Relationship		Date	Time		
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 355-2526) 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			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. Barbiturate C. Cocaine E. Heroin		H. Hallucinogen M. Marijuana O. Opium/Derv.		P. Paraphernalia/ Equipment S. Synthetics		U. Unknown Z. Other	
Charge Description DUI Crash with injury		Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 316.193(3)(C)(1)		Violation of ORD #	
Drug Activity N	Drug Type N	Amount / Unit	Offense # 17155322	Warrant / Capias Number		Bond OR	
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation of ORD #	
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond	
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation of ORD #	
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond	
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation of ORD #	
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond	
Location (Court Room Number, Address) PALM BEACH COUNTY COURTHOUSE CRIMINAL JUSTICE COMPLEX, 3228 GUN CLUB RD, WEST PALM BEACH, FL 33406 - PH: (561) 355-2996							
Court Date and Time Month December Day 23 Year 2017 Time 0830 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							
Signature of Defendant (or Juvenile and Parent/Custodian)						Date Signed 11/23/2017	
HOLD for other Agency Name:		Signature of Arresting Officer J.P. 2068		Name Verification (Printed by Arrestee) Bridgette Wagner			
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:		Name of Arresting Officer (Print) Inv. Christopher Ficarra		I.D. # 8368	
Intake # DISJ. THOMAS #7956		Transporting Officer Inv. C. Ficarra		ID # 8368		Agency PBSO	
Witness here if subject signed with an "X"						PAGE 1 OF 1	

SCANNED

NOV 24 2017

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 23rd DAY OF November 20 17, AT 1729 AM PM

SUBJECT: Wagner Bridgette Mary CASE NUMBER: 17155322

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: Inv. Christopher Ficarra

PERSONAL CONTACT

DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENTS PUTTING DEF. BEHIND WHEEL OF VEHICLE)

On 11/23/2017 at approximately 1824 hours I responded to the Palm Beach International Airport located at 3200 Belvedere Road, in unincorporated Palm Beach County, in reference to a DUI crash investigation. The crash occurred in front of the Air Canada Arrivals area on the first level of the airport roadway (James L Turnage Blvd). I was notified by PBSO dispatch that one of the victim's, Christopher Anthony Guarascio, struck by the suspect vehicle had been transported to St. Mary's Hospital by Palm Beach County Fire Rescue for a possible leg injury due to him being stuck between two vehicles (reference run number 17126276). His wife, Allison Lynn Guarascio, was also transported to St. Mary's with minor scrapes and bruising. Upon my arrival I observed a black Nissan Rouge bearing Florida tag BQNW88 stopped behind a silver Kia Sorento bearing Florida tag 922NMF. Both vehicles were stopped against the right side curb of the roadway closest to the arrival entry doors. Palm Beach County Fire Rescue was still on scene at that time. I then spoke with the sergeant on scene, Sgt. Roberts ID: 9169, who stated to me the following: The lady, in the Nissan, was out of it. The victim, Christopher Anthony Guarascio, had been transported to the hospital with a possible broken leg. The Nissan was seen hitting another vehicle prior to the Kia but it had left the scene prior to our arrival. The driver of the Nissan had medical paperwork in her vehicle which showed that she had been discharged that same day for alcohol intoxication. He also stated that the driver had small bottles of an alcoholic beverage in the passenger seat next to her.

OBSERVATION OF DRIVER:

I then made contact with Deputy Siciliano Jr ID: 4872 who was conducting the crash investigation (reference crash case 17155318). He stated that Deputy Kirchen ID: 3192 was first on scene of the crash. Sworn written witness statements were obtained by each witness on scene. Donald Mackay, the person that had been driving the Kia prior to the crash, was able to describe the crash and place the driver of the Nissan behind the wheel (see attached statement for further). Olivia Guarascio also gave a sworn written statement describing the crash (see attached for further). Kaylee Guarascio also gave a sworn written statement describing the crash and was able to identify the driver of the Nissan (see attached for further). Christopher M. Guarascio, the son of Christopher Anthony, gave a sworn written statement in regards to the incident as well. In his statement he stated he was also struck by the Nissan.

DRIVER'S STATEMENTS:

As I spoke with Fire Rescue I was able to smell the obvious odor of an unknown alcoholic beverage coming from the inside of the Nissan. I observed sitting in the driver's seat was a white female wearing a black shirt with long white pants and brown boots. The female was identified as Bridgette Mary Wagner through her Florida issued driver's license. She appeared to be sleeping with a blanket over her lap. I then spoke with Deputy Kirchen who stated to me the following: She was at that other end of the arrival area when she heard yelling. She arrived on scene and observed the driver who appeared totally unresponsive. The driver's eyes appeared rolled back and glassy as she looked at her. The driver's speech was slurred and she had the odor of an alcoholic beverage on her. She observed a small bottle underneath a pillow of an alcoholic beverage (see attached supplemental PC page for further) (see attached PC page for further).

ODORS:

Obvious odor of an unknown alcoholic beverage on her breath as she spoke

GENERAL OBSERVATIONS

SPEECH: low, slow, slurred, mumbled, incoherent

ATTITUDE: Calmed, dazed, confused, disoriented

CLOTHING: Black long sleeve shirt, white long pants, brown boots

MEDICAL/OTHER: No medical issues (no diabetes or seizures), no physical defects or injuries, stated left arm is weak, did not take prescription medication or illegal drugs, drank 4 small Sutter Home wines, no issues with eyes (no glasses or contacts)

STATE OF FLORIDA
COUNTY OF PALM BEACH

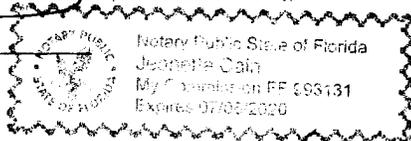
Inv. Christopher Ficarra *Inv. CD 8368*

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 23rd day of November 20 17 by Inv. Christopher Ficarra

(Print name of Arresting/Investigative Officer, who is personally known to me and/or produced identification. Type of identification produced Know)

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



SCANNED
NOV 24 2017

PROBABLE CAUSE AFFIDAVIT

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

1 Juvenile

OBTS Number	Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 06- 17155322
Charge Type: Check as many as apply.	<input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony	<input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other	Special Notes:

Name (Last, First, Middle) Wagner, Bridgette, Mary	Alias	Race W	Sex F	Date of Birth 11/21/1964
Charge Description DUI Crash with injury	Charge Description 316.193(3)(C)(1)			

Victim's Name (Last, First, Middle) State of Florida, ,	Race	Sex	Date of Birth
Local Address (Street, Apt. Number) _____ (City) _____ (State) _____ (zip) _____ Phone _____	Address Source		
Business Address (Name, Street) _____ (City) _____ (State) _____ (zip) _____ Phone _____	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 _____ who told _____ 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 **23rd** day of **November** 20**17** at **1729** A.M. P.M. (Specifically include facts constituting cause for arrest.)

I then made contact with Bridgette who was still sleeping in the driver's seat of the vehicle. I attempted to wake her up but at first she was not rousing. As I stood there attempting to wake her up I could smell the obvious odor of an unknown alcoholic beverage coming from her person. Her face appeared very flush and droopy. When she finally did being to open her eyes I immediately observed that her eyes were red, bloodshot, glassy, and droopy. As she slowly opened her eyes I asked her if she was okay and if she knew where she was. In a slow, low voice she stated, "yeah." I asked her if she could come out of the vehicle so I could talk with her to which she stated, "yeah" again. I observed that she was very slow moving and disoriented. Bridgette stated that she was supposed to have her service dog which was back in Belvedere. As Bridgette was slowly moving in her vehicle I observed that her pants were pulled slightly down on her waist. They appeared very wet in the crotch area and down the pant legs as if she urinated on herself. Fire Rescue assisted in helping Bridgette out of her vehicle. Bridgette moved very slow and appeared very shaky. She appeared to have body tremors as she stood still. She also was very unsteady on her feet, swayed in a circular motion, and walked very slowly requiring assistance so that she would not fall.

Fire Rescue assisted in walking Bridgette to the front of my marked PBSO patrol vehicle. Bridgette was shaking and very unsteady on her feet. I identified myself to her again and asked her about the crash. Bridgette gave crash statements at that time. I observed that her speech was slowed, low, unclear, and slurred. The odor of an alcoholic beverage became more obvious as she spoke.

After speaking about the crash I explained to Bridgette that the crash investigation was complete and I was conducting a DUI investigation where I would have to read her her Constitutional Warnings which she stated she understood. I read Bridgette her Constitutional Warnings which she stated she understood. Post-Warnings she stated the following: She stated that she was in a fender bender. She was the only person in the car when it happened and she was driving it. She stated that the vehicle was hers even though it was registered to someone else. Bridgette stated that she saw the person she hit and he was in between the vehicles. I advised her that she was shaking badly and asked if she needed and medical attention or if she had diabetes or seizures. Bridgette stated that she did not have any issues but she had a service dog she needed to get. Bridgette stated she did not take any prescription medication, illegal drugs, or marijuana. She did not have any physical defects or injuries but stated that her arm was weak. She stated that she did not have any issues standing. I asked her how much she had to drink that night to which she stated she had four little bottles of Sutter Home wine which she stated she did not have in the vehicle. Bridgette attempted to walk forward but I asked her to stay still so that she did not fall.

Due to Bridgette's extreme intoxication and risk of injury due to falling I decided to forgo roadside tasks for her safety. I advised her that she was being placed under arrest for DUI at that point. Prior to being placed in the rear of my patrol vehicle she had urinated on herself again. It should be noted that Christopher M. Guarascio was transported to St. Mary's Hospital by his grandfather, Donald. He did have injury to his hip which may have been fractured during the crash.

During the inventory of the Nissan I located three Sutter Home Wine bottles (187 ml) which were open and mostly empty (still small amount of alcoholic beverage inside). A Woodbridge Wine (187ml) Chardonnay bottle was also with the Sutter Home bottles. They were located in a plastic bag on the passenger front seat. Inv. Rodriguez ID: 18334 located several prescription bottles also in the vehicle, which were all prescribed to Bridgette. They were as follows: Quetiapine (Seraguil) 50 mg, Ibuprofen 800 mg, Escitalopram (Lexapro, two bottles) 10 mg, and Gabapentin 100 mg.

STATE OF FLORIDA
COUNTY OF PALM BEACH
Inv. Christopher Ficarra
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this **23rd** day of **November** 20**17** by **Inv. Christopher Ficarra**
 (Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced _____
Jeanette Cain
 Notary Public, Clerk of Court, Officer (F.S.S. 117.10)
 Notary Public State of Florida
 My Commission FF 993131
 Expires 07/08/2020

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- | | |
|--|--|
| <input type="checkbox"/> LT EYE-LACK OF SMOOTH PURSUIT | <input type="checkbox"/> RT EYE-LACK OF SMOOTH PURSUIT |
| <input type="checkbox"/> LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION | <input type="checkbox"/> RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION |
| <input type="checkbox"/> LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES | <input type="checkbox"/> RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES |

Other Observations:

Did not attempt due to extreme risk of falling and injury to Bridgette

WALK & TURN:

Did not attempt due to extreme risk of falling and injury to Bridgette

ONE LEG STAND:

Did not attempt due to extreme risk of falling and injury to Bridgette

FINGER TO NOSE:

Did not attempt due to extreme risk of falling and injury to Bridgette

ROMBERG ALPHABET:

Did not attempt due to extreme risk of falling and injury to Bridgette

BREATH TEST RESULTS: 1) 2) 3) 4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

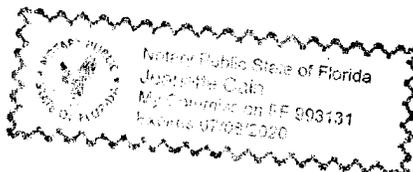
Inv. Christopher Ficarra *W C J 8308*

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 23rd day of November 2017 by Inv. Christopher Ficarra

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced Know

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



SCANNED
NOV 24 2017

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest	3. Request for Warrant	1	Juvenile
Agency ORI Number FLO 5 0 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 0 6 11 7 1 5 5 3 2 2 1 1			
Charge Type: Check as many as apply		Special Notes:					
<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							
Name (Last, First, Middle) <u>Wagner, Bridgette Mary</u>		Alias		Race <u>W</u>	Sex <u>F</u>	Date of Birth <u>11/21/64</u>	
Charge Description <u>DUI CRASH w/ PROPERTY INJURY DAMAGE</u>		Charge Description					
Charge Description		Charge Description					
Victim's Name (Last, First, Middle) <u>STATE of Florida</u>		Race		Sex	Date of Birth		
Local Address (Street, Apt. Number) (City) (State) (Zip)		Phone () ()		Address Source			
Business Address (Name, Street) (City) (State) (Zip)		Phone () ()		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 ... <input checked="" type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. <input type="checkbox"/> confessed to _____ admitting to the below facts. <input type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.							
On the <u>23rd</u> day of <u>November</u> 20 <u>17</u> at _____ <input type="checkbox"/> A.M. <input type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)							
<p><u>I was on the 1st level, arrivals, at Palm Beach International Airport when I heard screaming and commotion in the area of Spirit Airlines curbside. I ran to the area and observed a w/m on the ground by the rear of a Silver Kia. Behind the Silver Kia I observed a blk Niss tag/BQNW88. I observed a W/F in the drivers seat of the Nissan. I opened the driver's door to see if she was okay. I observed a strong odor of alcohol. She appeared unresponsive, unable to talk clearly, she had glassy eyes, and appeared to keep closing her eyes and moving her head. I observed a small bottle of an alcoholic liquid on the passenger side of the vehicle. I located her purse and found her ID the picture on the FL DL matched the white female in front of me. She was identified as Bridgette Mary Wagner 11/21/64, FL DL #W254073649210. At this time I requested my Sargeant to call for a DLI unit to respond. I continued observing Bridgette, she slept behind the wheel. I also observed her pants were down and her top was covered by a jacket</u></p>							
STATE OF FLORIDA COUNTY OF PALM BEACH <u>D/S Kuckew</u> 3192 (Signature of Arresting/Investigative Officer)							
The foregoing instrument was sworn to or affirmed and subscribed before me this <u>23</u> day of <u>NOVEMBER</u> 20 <u>17</u> by <u>D/S KIRKMAN</u> (Print name of Arresting/Investigative Officer) who is personally known to me and/or produced identification. Type of identification produced <u>known</u>							
Notary Public, Clerk of Court, Officer (F.S. 117.10) <u>IN C 8368</u> <div style="text-align: right;"> SCANNED NOV 24 2017 PAGE 1 OF 1 </div>							

PALM BEACH COUNTY SHERIFF'S OFFICE - **SWORN STATEMENT**

Per FL statute 837.012, whoever knowingly makes a false statement under oath shall be guilty of a misdemeanor of the first degree punishable by imprisonment up to 1 year.



WITNESS VICTIM OTHER

CASE #:	17-155322	ZONE:	Airport	SUSPECT:	Bridgette Wagner	DATE & TIME OF ORIGINAL EVENT/OFFENSE:	11-23-17 1729
EVENT TYPE:	DUI	DEPUTY:	Roberts	ID#:	9169		

COMPLETE EVERYTHING BELOW - PRINT LEGIBLY

LAST NAME:	Guarascio	FIRST NAME:	Kailee	MIDDLE INITIAL:	J	RACE:	W	SEX:	F	
DATE OF BIRTH:	09/17/01	YOUR HEIGHT:	5'5"	YOUR WEIGHT:	140	YOUR HAIR COLOR:	brown	YOUR EYE COLOR:	Green	
YOUR HOME ADDRESS:	4 Catherine Pl			<input type="checkbox"/> CHECK IF HOMELESS	CITY:	Bellmore	STATE:	NY	ZIP:	11710
YOUR WORK NAME & ADDRESS:				<input checked="" type="checkbox"/> CHECK IF UNEMPLOYED OR RETIRED	CITY:		STATE:		ZIP:	
WORK PHONE:	<input checked="" type="checkbox"/> CHECK IF NONE	CELL PHONE:	<input type="checkbox"/> CHECK IF NONE	HOME PHONE:	<input type="checkbox"/> CHECK IF NONE	EMAIL:	Kaiguarascio@optonline.net			

WRITE WHAT HAPPENED IN YOUR WORDS IN FULL DETAIL - PRINT LEGIBLY

YOUR NAME:	Kailee Guarascio	DO HEREBY VOLUNTARILY MAKE THE FOLLOWING STATEMENT WITHOUT THREAT, COERCION, OFFER OF BENEFIT, OR FAVOR BY ANY PERSONS WHOMSOEVER...
<p>I had arrived at the west palm beach airport and proceeded to put the luggage in my grandfathers trunk. I was with my granpa, mom, dad, brother and 2 sisters. I was on the left side of the backseat and felt the car get hit and forward. After this I heard an overwhelming amount of screaming. I didnt see the accident occur but I heard my grandpa screaming for the police and my mom screaming because my dad was hurt. My dad was screaming and was in terrible pain. Once I came out to see what happened I saw my dad laying on the floor and a lady who appeared to be on drugs driving the other vehicle.</p>		

The woman had blood hairs around shoulder length. She was wearing a brace shirt, white.

<p>READ AND SIGN</p> <p>I SWEAR AND AFFIRM THIS AND/OR THE ATTACHED STATEMENTS ARE CORRECT AND TRUE:</p> <p>YOUR SIGNATURE: <i>Kailee Guarascio</i></p>	<p><input type="checkbox"/> DEPUTY SHERIFF <input type="checkbox"/> NOTARY PUBLIC FSS: 117.10</p> <p>SWORN TO AND SUBSCRIBED BEFORE ME TODAY:</p> <p>DATE: 11-23-17 TIME: 1848</p> <p>SIGNATURE: <i>[Signature]</i> ID: 9169</p>
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IF YOU DO NOT WISH TO PROSECUTE, COMPLETE THE ABOVE STATEMENT, READ THIS DISCLAIMER AND INITIAL BELOW: I AM OF LEGAL AGE AND I AM THE REPORTED VICTIM OF A CRIME UNDER FLORIDA LAW. I HEREBY STATE THAT I WILL NOT COOPERATE ANY FURTHER WITH THE INVESTIGATION OF THE ALLEGED CRIME. I FURTHER RELEASE THE PALM BEACH COUNTY SHERIFF'S OFFICE OF ANY PRESENT OR FUTURE RESPONSIBILITY AS TO MY CASE. I ACKNOWLEDGE THAT I UNDERSTAND MY RIGHTS AS A CRIME VICTIM, PARTICULARLY REGARDING VICTIM COMPENSATION ELIGIBILITY, WHICH INCLUDES SUCH BENEFITS AS REIMBURSEMENT FOR: DISABILITY; LOST WAGES; LOSS OF SUPPORT; MEDICAL, DENTAL, MENTAL HEALTH COUNSELING AND FUNERAL EXPENSES. I AM AWARE I MAY BE GIVING UP THESE RIGHTS FOR MY FAMILY AND MYSELF BY INITIALLING BELOW. I AM TAKING THIS POSITION OF MY OWN FREE WILL KNOWING THAT THE CASE CAN ONLY BE FURTHER INVESTIGATED AND PROSECUTED WITH MY COOPERATION.

DO NOT WISH TO PROSECUTE (INITIAL _____)

