

0332350

18 MM 0136648

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

ADMINISTRATION

DEFENDANT

CO-DEF

JUVENILE

CHARGE

CHARGE

CHARGE

CHARGE

CHARGE

CHARGE

NOTICE TO APPEAR

ADMIN

OBTS Number		Agency ORI Number FL 050000				Agency Name Palm Beach County Sheriff's Office				Agency Report Number 06-18149748													
Charge Type: Check as many as Apply.		<input type="checkbox"/> 1 Felony <input type="checkbox"/> 2 Traffic Felony		<input checked="" type="checkbox"/> 3 Misdemeanor <input type="checkbox"/> 4 Traffic Misdemeanor		<input type="checkbox"/> 5 Ordinance <input type="checkbox"/> 6 Other		If Weapon Seized Enter Type		Multiple Clearance Indicator 01													
Location of Arrest (Including Name of Business) 139 SPARROW DR APT 2C RPB FL 33411						Location of Offense (Business Name, Address) 139 SPARROW DR APT 2C RPB FL 33411																	
Date of Arrest 11/28/2018		Time of Arrest 2344		Booking Date		Booking Time		Jail Date		Jail Time		Location of Vehicle PARKING LOT											
Name (Last, First, Middle) RODRIGUEZ CAROLINA												Alias (Name, DOB, Soc. Sec. #, Etc)											
W - White B - Black		I - American Indian O - Oriental / Asian		Race W		Sex F		Date of Birth 02/06/1989		Height 5'01		Weight 131		Eye Color BRN		Hair Color BLK		Complexion MED		Build MED			
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) NONE												Marital Status SINGLE		Religion UNK		Indication of: Alcohol Influence Drug Influence		Y N Unk. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		Residence Type 1. City 3. Florida 2. County 4. Out of State		2	
Local Address (Street, Apt. Number) 139 SPARROW DR APT 2C RPB FL 33411						Phone (561)351-6835						Address Source DL											
Permanent Address (Street, Apt. Number)						Phone						Occupation PERMIT MANGER											
Business Address (Street, Apt. Number)						Phone																	
DL Number, State R362100895460				INS Number				Place of Birth NEWYORK QUEEN				Citizenship US											
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											
<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		Juv. Disposition 1. Handled/Processed within 2. TOT HRS/DYS 3. Incarcerated		Date		Time											
Released To (Name)				Relationship		Date		Time		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 561-355-2526) informed of any change of address: <input type="checkbox"/> Yes, By: (Name) <input type="checkbox"/> No: (Reason)										School Attended		Grade											
Property Crime? Yes <input type="checkbox"/> No <input type="checkbox"/>		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. Paraphernalia/ Equipment S. Synthetic		U. Unknown Z. Other			
Charge Description ASSAULT ON 65YOA OR OLDER						Counts 01		Domestic Violence <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Statute Violation Number 784.08(2)(D)		Violation of ORD#											
Drug Activity N		Drug Type N		Amount/Unit 0		Offense # 18149748		Warrant/Capias Number		Bond													
Charge Description						Counts		Domestic Violence <input type="checkbox"/> Yes <input type="checkbox"/> No		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"/> Yes <input type="checkbox"/> No		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"/> Yes <input type="checkbox"/> No		Statute Violation Number		Violation of ORD#											
Drug Activity		Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond													
Location (Court, Room Number, Address) Central County Courthouse, 3228 Gun Club Road, West Palm Beach, FL 33409																							
<input type="checkbox"/> Instruction No. 1 Mandatory Appearance in Court		<input type="checkbox"/> Instruction No. 2 You need not appear in Court but must Comply with instruction on reverse side.		Court Date and Time		Month		Day		Year		Time <input type="checkbox"/> A.M. <input type="checkbox"/> 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)										Date Signed													
HOLD for other Agency Name:				Signature of Arresting Officer D/S Wagner				Name Verification (Printed by Arrestee) (PRINT)															
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other		Name of Arresting Officer (Print) D/S Wagner				I.D.# 31845		Agency PBSO		Page 1 OF 1											
Intake Deputy		I.D.#		Pouch #		Transporting Officer D/S Wagner		I.D.# 31845		Agency PBSO		Witness here if subject Signed with an "X".											

DOMESTIC

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1 Arrest	3 Request for Warrant	1	Juvenile	N
Agency ORI Number FL0500000		Agency Name Palm Beach County Sheriff's Office		Agency Report Number 06 - 18149748				
Charge Type Check all that Apply		Special Notes						
<input type="checkbox"/> 1 Felony		<input checked="" type="checkbox"/> 3 Misdemeanor		<input type="checkbox"/> 5 Ordinance				
<input type="checkbox"/> 2 Traffic Felony		<input type="checkbox"/> 4 Traffic Misdemeanor		<input type="checkbox"/> 6 Other				
Name (Last, First, Middle) RODRIGUEZ CAROLINA				Alias	Race W	Sex F	Date of Birth 02/06/1989	
Charge Description ASSAULT ON 65YOA OR OLDER				Charge Description				
Charge Description				Charge Description				
Victim's Name (Last, First, Middle) RODRIGUEZ FLOR				Race W	Sex F	Date of Birth 02/10/1947		
Local Address (Street, Apt Number) 139 SPARROW		(City) RPB	(State) FL	(Zip) 33411	Phone 561-951-6835	Address Source DL		
Business Address (Name, Street)		(City)	(State)	(Zip)	Phone	Occupation RETIRED		
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 type="checkbox"/> Committed the below acts in my presence.			<input type="checkbox"/> Was observed by			Who told		
<input type="checkbox"/> Confessed to			<input type="checkbox"/> Admitting the below facts			<input checked="" type="checkbox"/> Was found to have committed the below acts, resulting from my (described) investigation.		
On The 28			Day Of NOVEMBER			2018		
At 2344			<input type="checkbox"/> A.M.			<input checked="" type="checkbox"/> P.M.		

On 11/28/2018 at 2206 hours, I responded to 139 Sparrow Dr. Apt 2C in the village of Royal Palm Beach FL 33411, in reference to a civil matter.

Upon arrival, I met with Carolina Rodriguez, the complainant and suspect in this case, who stated she would like deputies to stand by while she retrieves her belongings. While speaking with Carolina she advised her mother Flor Rodriguez was in the residence and there has been an ongoing issue between them and tonight it had become physical. Carolina stated that Flor had struck her with a broom in the residence while she was trying to retrieve the phone that she states belongs to her. I noticed a red mark on Carolina's arm at this time.

I then went to make contact with the mother Flor but due to a language barrier I was unable to, D/s Chaparro #26696 was contacted to the scene to translate. Through translation it was stated by Ms. Flor that her daughter Carolina had come to the residence this evening to retrieve her belongings. Flor advised while she was mopping the floor upstairs Carolina came into the bedroom and was yelling at her to give her the phone she had given to her mother as a gift. Flor then placed the phone into the waistband of her pants. Flor advised that Carolina went to grab the phone from her waist band and she felt much threatened of Carolina and had used the broom to push Carolina away as of self-defense.

After the incident Carolina went downstairs Flor said and Carolina ripped off the thermostat to the heater stating to her mother she paid for it. Carolina then ripped off the plate to the dead-bolt lock to the front door and had thrown it at Flor but did not hit her with it.

Flor provided me with a sworn recording statement that was done by D/s Caparro #26696 and received a domestic violence brochure.

Through my investigation I found probable cause to arrest Carolina Rodriguez for Domestic assault on a 65 YOA or older F.S.S 784.08(2)(D).

The foregoing instrument was sworn to and affirmed before me this 28 day of NOVEMBER 20 18, by:

Gerald Chaparro
Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)

D/S Wagner 31845

Name of Arresting/Investigating Officer

[Signature]
Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)

[Signature]
Signature of Arresting/Investigating Officer

VICTIM NOTIFICATION FORM

- Homicide (Ch.782)
- Attempted Murder
- Stalking (F.S. 784.048)
- Domestic Violence - (This includes any assault, aggravated assault, battery, aggravated battery, sexual assault, sexual battery, stalking, aggravated stalking, 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)
- Sexual Offense (Ch.794)
- Attempted Sexual Offense
- Dating Violence

Upon completion, this form must accompany the booking paperwork.
If applying for a warrant, attach this form to the filing packet.

1. Incident Report #: 18149748 Agency: Palm Beach County Sheriff's Office
Offense: ASSAULT ON 65YOA OR OLDER
Suspect/Offender: RODRIGUEZ CAROLINA
DOB: 02/06/1989 Race: W Sex: F

2. Warrant #(s): _____

3.a. Victim's Name: RODRIGUEZ FLOR DOB: 02/10/1947 Race: W Sex: F
Address: 139 SPARROW
City: RPB State: FL Zip: 33411
Home #: 561-951-6835 Work #: _____ Other #: _____

b. Victim's next of kin, friend or neighbor: _____
Address: _____
City: _____ State: _____ Zip: _____
Home #: _____ Work #: _____ Other #: _____

NOTE: PURSUANT TO F.S. 119.07, THE CONTENTS OF THIS FORM MAY SUBJECT TO CONFIDENTIALITY.

Victim/Relation Notification Waiver and Confidential Information Request

(Check applicable boxes)

- Waiver: I choose not to be notified when the arrestee is released from custody.
- Confidential: I request the information on this form be kept confidential (applicable only to sexual battery, stalking, child abuse, harassment or domestic violence cases).

Signature of person waiving notification: _____

Printed name of person waiving notification: _____

Deputy's Name: D/S Wagner ID #: 31845 Date: 11/28/2018

SUSPECT/OFFENDER

RODRIGUEZ

CAROLINA

(FOR WARRANTS USE ONLY)

COURT CASE/WARRANT #

Palm Beach County Sheriff's Office
DOMESTIC VIOLENCE/DATING VIOLENCE SUPPLEMENTAL PROBABLE CAUSE FORM
 (Submit this form with the original Probable Cause Affidavit)

Defendant: RODRIGUEZ CAROLINA DOB: 02/06/1989 Case #: 18149748

Victim: RODRIGUEZ FLOR DOB: 02/10/1947 Race: W Sex: F

Relationship between Victim and Defendant: DAUGHTER/MOTHER

Photographs: Scene Yes No Victim Yes No Defendant Yes No

911 Call: Yes No Caller: _____

Weapon Used: Yes No Type: _____

Witness: Yes No Name: _____

Victim Pregnant: Yes No If yes, _____ Weeks _____ Months

Injuries: Yes No Description: _____

Medical Treatment: Yes No

At Scene: Yes No Paramedics: _____ PBCFR

At Hospital: Yes No Hospital: _____ Physician: _____

Are children living in the home? Yes No DCF Notified? Yes No

Name: AMAR'E RODRIGUEZ DOB: 10/19/2011

Name: _____ DOB: _____

Name: _____ DOB: _____

Injunction: Yes No Case #: _____

No Contact Order: Yes No Case #: _____

Alcohol or Drugs: Yes No Unknown

Prior history of Domestic/Dating Violence Yes No

Defendant's statements Yes No If yes, written recorded oral

First words Defendant said when you responded to scene: SHE WOULD LIKE HER BELONGINGS.

Victim's statements Yes No If yes, written recorded oral

First words Victim said when you responded to scene: HER DAUGHTER TRIED TO GRAB HER PHONE.

Did the Victim contact anyone other than the police within an hour of the incident regarding the incident?

Yes No If yes, name: _____ phone: _____

Observations of Victim (Physical & Emotional): _____

Upset Crying Fearful Hysterical Afraid Calm Nervous

Complained of pain Other _____

Victim contact information:

Local Address: 139 SPARROW

RPB FL 33411

Phone: Home: 561-951-6835 Work: _____ Cell: _____

Employer: RETIRED

Name of Relative: _____ Phone: _____

PALM BEACH CNTY SHERIFF'S OFFICE

Date: 11/29/2018

Time: 2:22 AM

Page: 1 of 1

VICTIM NOTIFICATION ENTRY

Defendant Name: RODRIGUEZ, CAROLINA

SSN: [REDACTED]

Book #: 2018039594

Victim First Name: FLOR

Victim Address 1: 139 SPARROW

Day Phone: (561) 951-6835

Victim Middle Name:

Victim Address 2:

Night Phone:

Victim Last Name: RODRIGUEZ

Victim City: RPB

Last 4 SSN:

Victim Full Name: RODRIGUEZ, FLOR

Victim State/Zip: FL 33411

Victim Type: DOMESTIC VIOLENCE

Victim Minors Name:

Minor Relationship:

Victim Id: 164394

Book #: 2018039594

Entry By: 9226

Modified By: 9226

NOT A CERTIFIED COPY

