

OBTS Number		PROBABLE CAUSE AFFIDAVIT			1. Arrest 2. N.T.A.	3. Request For Warrant 4. Request For Capias	1	Juvenile <input type="checkbox"/>
Agency ORI Number FLO 5 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE			Agency Report Number 06		18037622	
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 _____		Special Notes		
Defendant Name (Last, First, Middle) KHURRAM SARA SAIGOL				Race O	Sex F	Date of Birth 10/19/1990		
Charge SIMPLE BATTERY				Charge				
Charge				Charge				
Victim Name (Last, First, Middle) KHURRAM SIDRA SAIGOL				Race O	Sex F	Date of Birth 02/09/1995		
Local Address (Street, Apt. Number) 4194 URQUHART ST		City LAKE WORTH	State FL	Zip 33461	Phone (561) 827-7639	Address Source VERBAL		
Business Address (Street, Apt. Number)		City	State	Zip	Phone	Occupation		
I the undersign 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 _____ that he/she saw the arrested person commit the below acts.					
<input type="checkbox"/> confessed to admitting to the below facts.			<input checked="" type="checkbox"/> was found to have committed the below acts, resulting from (described) investigation.					
On the 11TH day of FEBRUARY 20 18 at 2120 <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM								

Victim #2: KHURRAM, SHAZIA SAIGOL DOB: 11/13/1970
Address: 4194 Urquhart St Lake Worth, FL 33461 Phone: (561) 827-7639

On Sunday February 11, 2018 at approximately 2030 hours, I was dispatched to 4194 Urquhart St, within unincorporated Lake Worth, FL in reference to a Domestic Battery that just occurred. Prior to my arrival PBSO dispatch received a call from the complaint and victim Sidra Khurram, advising that her sister was drunk and was hitting family members.

Upon my arrival I made contact with Sidra who provided me with the following sworn written statement. Her Statement reads as follows, " I came to see my mom, I was talking about my dads ceremony of death setup ect. Sara came in the argument and she disagreed and started to attack an came to grab me. She was drunk and came with her husband Colin and her 3 kids. Both were drunk and asked to leave, she hit me in my face, she kicked me in my face and my mom tried to help me and hold her. She wouldn't stop and then she started to hit my mom, this lead to the kitchen to ask for help from my brother Subhan to control the fight. She was banging and throwing glass. My brother's friend came to help but he also got hit and attacked".

I was able to speak to the second victim Shazia who was also able to provide me a sworn written statement. The statement reads as follows, " My Daughter Sidra was getting hit repeatedly by Sara. I tried to stop the fight, she grabbed me and hit me. She wouldn't leave, she was drunk. She is not allowed in this house with Colin her husband. She beat me really bad. She is mentally ill." Shazia's son, Subhan was also able to provide me with a sworn written statement. Which reads as follows, " Sara was repeatedly hitting my sister Sidra. I saw my brother's friend Kevin was helping break up the fight. Colin Sara's husband started to choke my friend Kevin(see PBSO Case #18-037623 for further). I tried to help hold them, but Sara wouldn't stop. She was breaking and throwing glass. She was acting crazy and was drunk. Colin told sara to run but she wouldn't leave. "

While speaking to both victims I was advised that Sara had left the scene in and unknown direction. While gathering the information Sara walked back to the residence. Sara appeared to be intoxicated, she was slurring her speech and was having trouble standing on her own. While speaking to Sara I could smell the strong odor of an unknown alcoholic beverage emanating from her breath. Sarah advised that she was attacked by everyone and that she just wanted to leave. Upon further investigation it was determined that Sara and Colin were dropped of by Colin's Mother. They were there because Sara wanted to morn the death of her father with her family. While at the residence the discussion of the ceremony came up and a verbal altercation ensued between all parties. It is at this point were the victims advised that Sara became hostile and started to strike them. Sidra suffered an abrasion to her right upper chest and another abrasion on right wrist. Shazia suffered an edema to the left side of her upper lip caused by a

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PALM BEACH COUNTY SHERIFF'S OFFICE
DOMESTIC VIOLENCE PROBABLE CAUSE SUPPLEMENTAL FORM
(SUBMIT WITH STATE ATTORNEY'S COPY OF PROBABLE CAUSE AFFIDAVIT)

CASE NUMBER: 18-037622

DEFENDANT'S NAME: Sarah S Khurram

DEFENDANT'S STATEMENT: YES NO (IF YES: WRITTEN TAPED ORAL)

SYNOPSIS: They hit me first

VICTIM'S NAME: Sidra Khurram

VICTIM'S STATEMENTS: YES NO (IF YES: WRITTEN TAPED ORAL)

OBSERVATIONS OF VICTIM: (PHYSICAL & EMOTIONAL) Swelling to Face upset crying

RELATIONSHIP BETWEEN VICTIM AND SUSPECT: Suspect

PHOTOGRAPHS: SCENE: YES NO VICTIM(S): YES NO

911 CALL: YES NO WHO CALLED: Sidra Khurram

WEAPON USED: YES NO TYPE: _____

MEDICAL TREATMENT: YES NO
AT SCENE: YES NO PARAMEDICS: _____
AT HOSPITAL: YES NO HOSPITAL: _____ PHYSICIAN: _____

ARE CHILDREN LIVING IN HOME: YES NO
NAME: Shams Khurram DOB: 3/30/03
NAME: _____ DOB: _____
NAME: _____ DOB: _____

WAS ACT(S) COMMITTED IN PRESENCE OF MINOR(S): YES NO (IF YES SAME AS ABOVE OR SPECIFY)
NAME: _____ DOB: _____
NAME: _____ DOB: _____
NAME: _____ DOB: _____

DCF NOTIFIED: (IF CHILD ABUSE) YES NO
PRIOR HISTORY OF DOMESTIC VIOLENCE: YES NO
VIOLATION OF RESTRAINING ORDER: YES NO CASE #: _____
VICTIM PREGNANT: YES NO
ALCOHOL OR DRUGS INVOLVED: YES NO

ALTERNATE VICTIM CONTACT INFORMATION: (IF VICTIM DECIDES TO LEAVE RESIDENCE)
RELATIVE/FRIEND NAME: Polo Leonardo **SCANNED** 771349
RELATIVE/FRIEND ADDRESS: 5005 Brecken Ridge 4 WAB **FEB 17 2018** 33417
PBSO #0004A REV. 01/01

**PALM BEACH COUNTY SHERIFF'S OFFICE
DOMESTIC VIOLENCE PROBABLE CAUSE SUPPLEMENTAL FORM
(SUBMIT WITH STATE ATTORNEY'S COPY OF PROBABLE CAUSE AFFIDAVIT)**

CASE NUMBER: 18-037622

DEFENDANT'S NAME: Sarah S Khurram

DEFENDANT'S STATEMENT: YES NO (IF YES: WRITTEN TAPED ORAL)

SYNOPSIS: They hit me first

VICTIM'S NAME: Shazia Khurram

VICTIM'S STATEMENTS: YES NO (IF YES: WRITTEN TAPED ORAL)

OBSERVATIONS OF VICTIM: (PHYSICAL & EMOTIONAL) Swelling to face upset crying

RELATIONSHIP BETWEEN VICTIM AND SUSPECT: ~~Sister~~ Mother / Daughter

PHOTOGRAPHS: SCENE: YES NO VICTIM(S): YES NO

911 CALL: YES NO WHO CALLED: Shazia Khurram

WEAPON USED: YES NO TYPE: _____

MEDICAL TREATMENT: YES NO
AT SCENE: YES NO PARAMEDICS: _____
AT HOSPITAL: YES NO HOSPITAL: _____ PHYSICIAN: _____

ARE CHILDREN LIVING IN HOME: YES NO
NAME: Shams Khurram DOB: 5/30/03
NAME: _____ DOB: _____
NAME: _____ DOB: _____

WAS ACT(S) COMMITTED IN PRESENCE OF MINOR(S): YES NO (IF YES SAME AS ABOVE OR SPECIFY)
NAME: _____ DOB: _____
NAME: _____ DOB: _____
NAME: _____ DOB: _____

DCF NOTIFIED: (IF CHILD ABUSE) YES NO
PRIOR HISTORY OF DOMESTIC VIOLENCE: YES NO
VIOLATION OF RESTRAINING ORDER: YES NO CASE #: _____

VICTIM PREGNANT: YES NO
ALCOHOL OR DRUGS INVOLVED: YES NO

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ALTERNATE VICTIM CONTACT INFORMATION: (IF VICTIM DECIDES TO LEAVE RESIDENCE)
RELATIVE/FRIEND NAME: Rob Leonadra PHONE: 561 577 1344
RELATIVE/FRIEND ADDRESS: 5005 Brecken Ridge 4, WPB, FL 33417

VICTIM NOTIFICATION FORM

This form must be completed when one of the following crime(s) has been committed:

- 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 #: 18-027622 Agency: PBSO
Offense: Simple Battery (Domestic)
Suspect/Offender: Sarah S Khurram
D.O.B. 10/19/90 Race: O Sex: F

2. Warrant #(s): _____

3.a. Victim's name: Sidra S Khurram D.O.B. 2/9/95 Race: O Sex: F
Address: 4194 Urquhart St
City: LW State: FL Zip: 33461
Home #: _____ Work #: _____ Other: _____

b. Victim's next of kin, friend or neighbor: Shazia S Khurram
Address: 4194 Urquhart St
City: LW State: FL Zip: 33461
Home #: 561-827-543 Work #: _____ Other: _____

NOTE: PURSUANT TO F.S. 119.07, THE CONTENTS OF THIS FORM MAY BE 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: Turabelo I.D. # 2052 Date: 2/11/18

White = Corrections or State Attorney (Warrant Application)

Yellow = Warrants Section

Pink = Central Records

SUSPECT/OFFENDER

Khurram

Sarah S Khurram

(FOR WARRANTS USE ONLY)

COURT CASE/WARRANT #:

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VICTIM NOTIFICATION FORM

This form must be completed when one of the following crime(s) has been committed:

- 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 #: 18-037622 Agency: PBSSO
 Offense: Simple Battery (Domestic)
 Suspect/Offender: Sarah S Kaurman
 D.O.B. 10/29/90 Race: 0 Sex: F

2. Warrant #(s): _____

3.a. Victim's name: ~~Sarah~~ Shazia Kaurman D.O.B. 11/13/70 Race: 0 Sex: F
 Address: 4194 Urquhart St
 City: LW State: FL Zip: 33461
 Home #: 561-827-7543 Work #: _____ Other: _____

b. Victim's next of kin, friend or neighbor: Sandra S Kaurman
 Address: 4194 Urquhart St
 City: LW State: FL Zip: 33461
 Home #: _____ Work #: _____ Other: _____

NOTE: PURSUANT TO F.S. 119.07, THE CONTENTS OF THIS FORM MAY BE 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).

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Signature of person waiving notification: _____
 Printed name of person waiving notification: _____
 Deputy's Name: Jurado I.D. # 20332 Date: 2/11/18

White = Corrections or State Attorney (Warrant Application) Yellow = Warrants Section Pink = Central Records

SUSPECT/OFFENDER Kaurman, Sarah Serge
COURT CASE/WARRANT #: _____
(FOR WARRANTS USE ONLY)