

0495659

50-2020-CF-006984-AMB

1228

ARREST / NOTICE TO APPEAR

- 1. Arrest (No Warrant)
- 2. N.T.A.
- 3. Request for Warrant
- 4. Request for Capias
- 5. Juvenile Referral

1

JUVENILE

N

OBTS Number	Agency ORI Number <b>0500200</b>		Agency Name <b>Boca Raton Police Department</b>		Agency Report Number (N.T.A.'s only) <b>3, 2   2020-009500</b>					
Charge Type: Check as many as apply	<input checked="" 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		Multiple Clearance Indicator				
Location of Arrest (Including Name of Business)			Location of Offense (Business Name, Address)							
<b>3100 AIRPORT RD, BOCA RATON, FL</b>			<b>3100 AIRPORT RD, BOCA RATON, FL 33431</b>							
Date of Arrest <b>08/22/2020</b>	Time of Arrest <b>22:23</b>	Booking Date <b>08/22/2020</b>	Booking Time <b>23:24</b>	Jail Date <b>// ::</b>	Jail Time	Location of Vehicle <b>N/A</b>				
Name (Last, First, Middle) <b>ZAGER, HALEY ERIN</b>			Alias (Name, DOB, Soc. Sec. #, Etc.)							
Race W - White I - American Indian B - Black O - Oriental/Asian <b>W F</b>			Date of Birth <b>04/10/1990</b>	Height <b>5'00</b>	Weight <b>110</b>	Eye Color <b>HAZEL</b>	Hair Color <b>BLONDE</b>	Complexion <b>LIGHT</b>	Build <b>SMALL</b>	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) <b>TATT L FORE ARM / THE NUMBER "13," A DIAMOND, AND AN</b>			Marital Status <b>S</b>	Religion <b>Catholic</b>		Indication of Alcohol Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk <input type="checkbox"/>	Indication of Drug Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk <input type="checkbox"/>			
Local Address (Street, Apt. Number) <b>499 W ATLANTA AVE, LANTANA, FL 33462</b>			(City)	(State)	(Zip)	Phone <b>(615) 483-3059</b>	Residence Type: 1. City 2. Country 3. Out of State <b>1 2</b>			
Permanent Address (Street, Apt. Number) <b>499 W ATLANTA AVE, LANTANA, FL 33462</b>			(City)	(State)	(Zip)	Phone <b>(615) 483-3059</b>	Address Source <b>FL ID</b>			
Business Address (Name, Street)			(City)	(State)	(Zip)	Phone	Occupation <b>Unemployed</b>			
DL Number, State <b>Z260325906300 / FL</b>		Soc. Sec. Number	INS Number	Place of Birth (City, State) <b>NEW YORK, NY, United</b>		Citizenship <b>U.S.</b>				
Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile				
Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth		<input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile				
<input type="checkbox"/> Parent <input type="checkbox"/> Other: _____		Name (Last, First, Middle)				Residence Phone				
<input type="checkbox"/> Legal Custodian		Address (Street, Apt. Number)				Business Phone				
Address (Street, Apt. Number)		(City)	(State)	(Zip)						
Notified by: (Name)		Date	Time	JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated						
Released To: (Name)		Relationship	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 355-2526) informed of any change of address.				School Attended		Grade				
Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description of Property			Value of Property					
Drug Activity N. N/A P. Possess	S. Sell B. Buy T. Traffic	R. Struggle 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/Deriv.	P. Paraphernalia/ Equipment S. Synthetic	U. Unknown Z. Other
Charge Description <b>CHILD ABUSE</b>						Statute Violation Number <b>827.03(2)(c)</b>	Violation of ORD #			
Drug Activity <b>N</b>	Drug Type <b>N</b>	Amount / Unit <b>/</b>	Offense # <b>20-009500</b>	Counts <b>1</b>	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant / Capias Number	Bond			
Charge Description <b>POSSESSION OF SCHEDULE IV SUBSTANCE</b> <i>Clonazepam</i>						Statute Violation Number <b>893.13(6A)</b>	Violation of ORD #			
Drug Activity <b>P</b>	Drug Type <b>N</b>	Amount / Unit <b>6 / g.</b>	Offense # <b>20-009500</b>	Counts <b>1</b>	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant / Capias Number	Bond			
Charge Description <b>UNLAWFUL POSSESSION OF PRESCRIPTION DRUGS</b> <i>Gabapentin</i>						Statute Violation Number <b>499.03(1)</b>	Violation of ORD #			
Drug Activity <b>P</b>	Drug Type <b>N</b>	Amount / Unit <b>3.2 / g.</b>	Offense # <b>20-009500</b>	Counts <b>1</b>	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant / Capias Number	Bond			
Health / Apparent Physical Condition of Defendant <b>GOOD</b>				Any knowledge of the following: Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deficiencies <input type="checkbox"/> Injuries						
Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input checked="" type="checkbox"/> T.O.T. County Jail <input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health				PROPERTY - Received By		Released By	Released To			
Transported By <b>CLINARD</b>				Date Transported	Time Transported	Other				
<input type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input checked="" type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.				Location (Court, Room) <b>South County 200 W Atlantic Ave Delray Beach, FL 33444</b>		Court Date and Time				
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.						No Photo Available				
Signature of Defendant (or Juvenile and Parent/Custodian)				Date Signed						
HOLD for Other Agency		Signature of Arresting Officer		Name Verification (Printed by Arrestee)						
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other		Name of Arresting Officer (Print) <b>CLINARD, R. L.</b>		(PRINT)						
Transporting Agency <b>DSC/CLINARD</b>		ID. # <b>780</b>		PAGE 1 of 2						
Poach #		Transporting Officer <b>MARTEL</b>		ID. # <b>811</b>						
		Agency <b>BRPD</b>		Witness here if subject signed with an "X".						

AUG 23 AM 6:54

ARREST / NOTICE TO APPEAR  
Juvenile Referral Report

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

OBTS Number		Agency ORI Number FL 500200		Agency Name BOCA RATON POLICE SERVICES DEPT.		Agency Report Number (N.T.A.'s only) 3-21-20 19500		11		11					
Charge Type: Check as many as apply.		<input checked="" 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		Weapon Seized / Type 1. Yes 2. No <b>Hand Feet Cuff</b>		Multiple Clearance Indicator					
Location of Arrest (Including Name of Business) 3100 Airport Rd Boca Raton FL 33414						Location of Offense (Business Name, Address) 3100 Airport Rd Boca Raton 33414									
Date of Arrest 082220		Time of Arrest 2220		Booking Date 2324		Booking Time 2324		Jail Date		Jail Time					
Name (Last, First, Middle) Zoser, Alex Erin						Alias (Name, DOB, Soc. Sec. #, Etc.)									
Race W - White B - Black O - Oriental/Asian		Sex W F		Date of Birth 04.10.90		Height 5'00		Weight 110		Eye Color Hax					
Hair Color BLO		Complexion Lgt		Build SMALL		Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) TATTOO FOREARM / THE LABOR 'D'		Marital Status S		Religion CATH					
Local Address (Street, Apt. Number) 499 W Atlanta Ave Lantana FL 33402		(City) Lantana		(State) FL		(Zip) 33402		Phone (05) 403 3059		Residence Type: 1. City 2. County 3. Florida 4. Out of State					
Permanent Address (Street, Apt. Number) 499 W Atlanta Ave Lantana FL 33402		(City) Lantana		(State) FL		(Zip) 33402		Phone (05) 403 3059		Address Source FL ID					
Business Address (Street, Street) D/L Number, State 226052540300		(City)		(State)		(Zip)		Phone ( )		Occupation EMPLOYEE					
Soc. Sec. Number		INS Number		Place of Birth (City, State) New York, NY		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		Parent Legal Custodian <input type="checkbox"/> Parent <input type="checkbox"/> Other:		Name (Last) (First) (Middle)					
Address (Street, Apt. Number)		(City)		(State)		(Zip)		Residence Phone ( )		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		School Attended		Grade		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 385-2529) informed of any change of address. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)		Value of Property					
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property		Drug Activity S. Sell 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 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 Possession of Schedule IV ALAZOLAM		Counts 1		Domestic Violence DY <input type="checkbox"/> DN <input type="checkbox"/>		Statute Violation Number 8.9.3.113		Violation of ORD # 116.A					
Drug Activity P		Drug Type N		Amount / Unit 2.9 GM		Offense # 20-9500		Warrant / Capias Number		Bond 1000.00					
Charge Description Possession of Schedule IV CACISOPRODOL		Counts 1		Domestic Violence DY <input type="checkbox"/> DN <input type="checkbox"/>		Statute Violation Number 8.9.3.113		Violation of ORD # 116.A		Bond 1000.00					
Drug Activity P		Drug Type N		Amount / Unit 2.3 GM		Offense # 20-9500		Warrant / Capias Number		Bond					
Charge Description		Counts		Domestic Violence DY <input type="checkbox"/> DN <input type="checkbox"/>		Statute Violation Number		Violation of ORD #		Bond					
Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number		Bond					
Health/Apparent Physical Condition of Defendant GOOD				Property - Rec'd. By				Released By				Released To			
Any knowledge of the following, place an "X" and explain: <input type="checkbox"/> Mental; <input type="checkbox"/> Escape Risk; <input type="checkbox"/> Medication; <input type="checkbox"/> Deformities; <input type="checkbox"/> Injuries															
Explain:															
Check which applies: <input type="checkbox"/> Released O.R.; <input type="checkbox"/> Posted Bond; <input type="checkbox"/> Released to Parent/Guardian; <input type="checkbox"/> S. County Mental Health; <input type="checkbox"/> T.O.T. County Jail															
Transported By: <b>CHARD</b> Date _____ Time _____ Other _____															
<input type="checkbox"/> Instruction No. 1 Mandatory Appearance in Court				Location (Court, Room Number, Address)											
<input checked="" type="checkbox"/> Instruction No. 2 You need not appear in Court but must comply with instructions on Reverse Side.				Court Date and Time											
				Month		Day		Year		Time					
				A.M.		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 X				Name Verification (Printed by Arrestee)							
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal				<input type="checkbox"/> Releated Arrest <input type="checkbox"/> Other:				(PRINT)							
Intake Deputy		I.D. #		Pouch #		Name of Arresting Officer (Print) OFF CHARD 780		I.D. # 780		PAGE 2 OF 2					
						Transporting Officer OFF MATTI 811		I.D. # 811		Witness here if subject signed with an "X".					

PROBABLE CAUSE AFFIDAVIT

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

**1** JUVENILE

A D M I N	OBT# Number		Agency ORI Number <b>FL 0500200</b>		Agency Name <b>BOCA RATON POLICE DEPARTMENT</b>		Agency Report Number <b>3   2   2020-009500</b>	
	Charge Type: Check as many as apply.		Special Notes:		Race		Sex	
<input checked="" 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				W		F		

D E F	Name (Last, First, Middle) <b>ZAGER, HALEY ERIN</b>				Alias		Race		Sex		Date of Birth <b>04/10/1990</b>	
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C H A R G E S	Charge Description <b>893.13(6A) POSSESSION OF SCHEDULE IV SUBSTAN</b>				Charge Description <b>499.03(1) POSSESS NEW OR LEGEND DRUG W/O PRESCRIP</b>							
	Charge Description				Charge Description							

V I C T I M	Victim's Name (Last, First, Middle) <b>STATE OF FLORIDA,</b>				Race		Sex		Date of Birth			
					U		U					
	Local Address (Street, Apt. Number) (City) (State) (Zip) <b>100 NW 2ND AVE, BOCA RATON, FL 33432</b>				Phone <b>(561) -</b>				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 22 day of August, 2020 at 22:23 (Specifically include facts constituting cause for arrest)

On 08/22/2020 at hours 2146 hours, I responded to 3100 Airport Rd. (Boomers) in reference to a disturbance. Upon arrival, I made contact with Boomers Manager Jonathan Miller, Haley Zager, [REDACTED] and [REDACTED] in the parking lot.

I first spoke with Miller. Miller advised he attempted to diffuse a verbal argument between Zager and [REDACTED] in the parking lot. He was advised by other Boomers staff of an earlier physical altercation on the go-kart track between Zager and [REDACTED]. There was an accidental go-kart collision between Zager and [REDACTED] on the go-kart track. At the conclusion of the go-kart ride, Zager got out of her go-kart, approached [REDACTED], and slapped him in the face. Miller advised there were three Boomers employees that witnessed the incident.

I then spoke with Zager. When asked what happened, Zager stated she was stopped at the end of the go-kart race. Zager advised that [REDACTED] rammed his go-kart into the rear of her go-kart at full speed. Zager became upset because [REDACTED] did not apologize for the accident. She then "tapped" [REDACTED] in the face. Zager immediately stated that she shouldn't have hit a child. Zager spontaneously uttered her account of what happened. Zager later reconfirmed her account of events after being advised of her constitutional warnings. After the incident, Zager stated to a Boomers employee "That fucking nigger hit me in the back."

Next, I spoke with [REDACTED]. [REDACTED] stated [REDACTED] is 11 years old. [REDACTED] stated he was off the side of the go-kart track, watching [REDACTED]. At the end of the ride, [REDACTED] was stopped in his go-kart at the end of the ride. Another go-kart rider crashed full speed into a row of go-karts. This caused a series of smaller collisions as each go-kart was pushed into the one directly in front of the other. This caused a go-kart to strike [REDACTED] go-kart, and in turn his kart struck the rear of Zager's kart. Zager proceeded to exit her kart, approached [REDACTED], and slapped

A D M I N I S T R A T I V E	SWORN AND SUBSCRIBED BEFORE ME		SIGNATURE OF ARRESTING / INVESTIGATING OFFICER	
	<b>HARDING, BRANDON BLAZE</b>		<b>CLINARD, RICKY LEE JR (780)</b>	
	NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)		NAME OF OFFICER (PLEASE PRINT)	
	<b>08/23/2020</b>		<b>08/23/2020</b>	
DATE		DATE		

PROBABLE CAUSE AFFIDAVIT SUPPLEMENT		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	JUVENILE
A D M I N I S T R A T I V E	OBT# Number Agency ORI Number <b>FL 0500200</b>	Agency Name <b>BOCA RATON POLICE DEPARTMENT</b>	Agency Report Number <b>3   2   2020-009500</b>		
Charge Type: Check as many as apply.		<input checked="" 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:
Name (Last, First, Middle) <b>ZAGER, HALEY ERIN</b>		Alias	Race <b>W</b>	Sex <b>F</b>	Date of Birth <b>04/10/1990</b>
<p>him across the left side of his face with an open palm. A bystander asked Zager why she struck [REDACTED], and Zager replied "The nigger hit me. The nigger hit me." This statement was made in front of [REDACTED], [REDACTED], and other bystanders. [REDACTED] provided an MVR recorded statement of his account.</p> <p>I then spoke with [REDACTED]. [REDACTED] is a black male juvenile. He advised he is 11 years old (DOB 06/04/2009). He advised he was driving the go-kart and was slowing down to stop at the end of the ride. While stopping, another go-kart crashed into the line of go-karts behind him. His kart was hit, which caused his kart to strike Zager's kart. Zager then got out of her kart and slapped [REDACTED]. [REDACTED] stated Zager then said something, but he was unable to recall as he was still processing what just occurred. [REDACTED] also provided an MVR recorded statement of his account. I observed swelling on [REDACTED] left cheek. Boca Raton Fire Rescue responded to the scene and evaluated [REDACTED]. They provided [REDACTED] an ice pack to help with the swelling. I photographed [REDACTED] and his injuries.</p> <p>Based on the statements and evidence consistent with the statements, I find probable cause to arrest Haley Zager for Child Abuse in accordance with F.S.S. 827.03(1B). Zager did knowingly or willfully abuse a child without causing great bodily harm, permanent disability, or permanent disfigurement to the child. Furthermore, this incident evidences prejudice based on Zager's statements. Therefore, the penalty for incident shall be reclassified from a felony of the third degree to a felony of the second degree, in accordance with F.S.S. 775.085(1A). Zager perceived, knew, or had reasonable grounds to know or perceive that the victim was within the class delineated in this section.</p> <p>FAU PD Officer Hopkins (ID 390) responded to the scene to conduct a same sex search of Zager. During the search, a metal Altoids tin was discovered stuffed in Zager's underwear. The tin contained a multitude of pills in various colors and sizes.</p> <p>I contacted the Poison Control Center via landline and spoke with Lily who identified the pills. This was documented under their case number, #M3637960. The pills were identified as follows: 2.9g (11.5 tabs) of Alprazolam 2mg (white), 0.3g (1.25 tabs) of Alprazolam 2mg (blue), 2.3g (5 tabs) of Carisoprodol 350mg, 0.5g (3 tabs) of Clonazepam 0.5mg, and 3.2g (4 tabs) of Gabapentin 600mg, 1.8g (6 tabs) of Ibuprofen 200mg, and 1.4g (2 tabs) of Kratom. Zager was unable to provide documentation of a valid prescription or the original prescription bottles.</p> <p>Based on my investigation, I find probable cause to arrest Haley Zager for possession of Alprazolam, Carisoprodol, and Clonazepam in violation of F.S.S. 893.13(6a), and possession of Gabapentin in violation of F.S.S. 499.03(1). Zager was transported to Palm Beach County Jail without incident.</p>					
SWORN AND SUBSCRIBED BEFORE ME  <b>HARDING, BRANDON BLAZE</b> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)  <b>08/23/2020</b> DATE		SIGNATURE OF ARRESTING / INVESTIGATING OFFICER  <b>CLINARD, RICKY LEE JR (780)</b> NAME OF OFFICER (PLEASE PRINT)  <b>08/23/2020</b> DATE			
					PAGE <b>2 OF 2</b>


PROBABLE CAUSE AFFIDAVIT

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

1

JUVENILE

A D M I N I S T R A T I V E	OBT3 Number		Agency ORI Number <b>FL 0500200</b>		Agency Name <b>BOCA RATON POLICE DEPARTMENT</b>		Agency Report Number <b>3 2 2020-009500</b>		
	Charge Type: Check as many as apply.		Special Notes:		Name (Last, First, Middle) <b>ZAGER, HALEY ERIN</b>		Race <b>W</b>	Sex <b>F</b>	Date of Birth <b>04/10/1990</b>
<input checked="" 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									
C H A R G E S	Charge Description <b>827.03(16) CHILD ABUSE</b>		Charge Description		Victim's Name (Last, First, Middle)		Race <b>B</b>	Sex <b>M</b>	Date of Birth <b>06/04/2009</b>
	Charge Description		Charge Description		Local Address (Street, Apt. Number) (City) (State) (Zip)		Phone	Address Source	
V I C T I M	Business Address (Name, Street) (City) (State) (Zip)		Phone		Business Address (Name, Street) (City) (State) (Zip)		Phone	Occupation	
	<p>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.</p> <p>The Person taken into custody ...</p> <p><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.</p> <p><input type="checkbox"/> confessed to _____ admitting to the below facts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the <u>22</u> day of <u>August</u>, <u>2020</u> at <u>22:23</u> (Specifically include facts constituting cause for arrest.)</p> <p>On 08/22/2020 at hours 2146 hours, I responded to 3100 Airport Rd. (Boomers) in reference to a disturbance. Upon arrival, I made contact with Boomers Manager Jonathan Miller, Haley Zager, _____, and _____ in the parking lot.</p> <p>I first spoke with Miller. Miller advised he attempted to diffuse a verbal argument between Zager and _____ in the parking lot. He was advised by other Boomers staff of an earlier physical altercation on the go-kart track between Zager and _____. There was an accidental go-kart collision between Zager and _____ on the go-kart track. At the conclusion of the go-kart ride, Zager got out of her go-kart, approached _____, and slapped him in the face. Miller advised there were three Boomers employees that witnessed the incident.</p> <p>I then spoke with Zager. When asked what happened, Zager stated she was stopped at the end of the go-kart race. Zager advised that _____ rammed his go-kart into the rear of her go-kart at full speed. Zager became upset because _____ did not apologize for the accident. She then "tapped" _____ in the face. Zager immediately stated that she shouldn't have hit a child. Zager spontaneously uttered her account of what happened. Zager later reconfirmed her account of events after being advised of her constitutional warnings. After the incident, Zager stated to a Boomers employee "That fucking nigger hit me in the back."</p> <p>Next, I spoke with _____ stated his son is 11 years old. _____ stated he was off the side of the go-kart track, watching his son _____. At the end of the ride, _____ was stopped in his go-kart at the end of the ride. Another go-kart rider crashed full speed into a row of go-karts. This caused a series of smaller collisions as each go-kart was pushed into the one directly in front of the other. This caused a go-kart to strike _____ go-kart, and in turn his kart struck the rear of Zager's kart. Zager proceeded to exit her kart, approached _____, and slapped</p>								
S W O R N	SWORN AND SUBSCRIBED BEFORE ME		SIGNATURE OF ARRESTING / INVESTIGATING OFFICER		HARDING, BRANDON BLAZE		CLINARD, RICKY LEE JR (780)		P A G E  1 OF 2
	NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)		NAME OF OFFICER (PLEASE PRINT)		08/23/2020		08/23/2020		
DATE		DATE							

OBTS Number Agency ORI Number <b>FL 0500200</b>	<b>PROBABLE CAUSE AFFIDAVIT SUPPLEMENT</b>	1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias	<b>1</b>	JUVENILE
Agency Name <b>BOCA RATON POLICE DEPARTMENT</b>	Agency Report Number <b>3   2   2020-009500</b>			
Charge Type: Check as many as apply. <input checked="" type="checkbox"/> 1. Felony <input 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			Special Notes:	
Name (Last, First, Middle) <b>ZAGER, HALEY ERIN</b>		Race <b>W</b>	Sex <b>F</b>	Date of Birth <b>04/10/1990</b>
<p>him across the left side of his face with an open palm. A bystander asked Zager why she struck [REDACTED], and Zager replied "The nigger hit me. The nigger hit me." This statement was made in front of [REDACTED], [REDACTED], and other bystanders. [REDACTED] provided an MVR recorded statement of his account.</p> <p>I then spoke with [REDACTED] [REDACTED] is a black male juvenile. He advised he is 11 years old (DOB 06/04/2009). He advised he was driving the go-kart and was slowing down to stop at the end of the ride. While stopping, another go-kart crashed into the line of go-karts behind him. His kart was hit, which caused his kart to strike Zager's kart. Zager then got out of her kart and slapped [REDACTED] [REDACTED] stated Zager then said something, but he was unable to recall as he was still processing what just occurred. [REDACTED] also provided an MVR recorded statement of his account. I observed swelling on [REDACTED] left cheek. Boca Raton Fire Rescue responded to the scene and evaluated [REDACTED]. They provided [REDACTED] an ice pack to help with the swelling. I photographed [REDACTED] and his injuries.</p> <p>Based on the statements and evidence consistent with the statements, I find probable cause to arrest Haley Zager for Child Abuse in accordance with F.S.S. 827.03(2)(b). Zager did knowingly or willfully abuse a child without causing great bodily harm, permanent disability, or permanent disfigurement to the child. Furthermore, this incident evidences prejudice based on Zager's statements. Therefore, the penalty for incident shall be reclassified from a felony of the third degree to a felony of the second degree, in accordance with F.S.S. 775.085(1A). Zager perceived, knew, or had reasonable grounds to know or perceive that the victim was within the class delineated in this section.</p> <p>FAU PD Officer Hopkins (ID 390) responded to the scene to conduct a same sex search of Zager. During the search, a metal Altoids tin was discovered stuffed in Zager's underwear. The tin contained a multitude of pills in various colors and sizes.</p> <p>I contacted the Poison Control Center via landline and spoke with Lily who identified the pills. This was documented under their case number, #M3637960. The pills were identified as follows: 2.9g (11.5 tabs) of Alprazolam 2mg (white), 0.3g (1.25 tabs) of Alprazolam 2mg (blue), 2.3g (5 tabs) of Carisoprodol 350mg, 0.5g (3 tabs) of Clonazepam 0.5mg, and 3.2g (4 tabs) of Gabapentin 600mg, 1.8g (6 tabs) of Ibuprofen 200mg, and 1.4g (2 tabs) of Kratom. Zager was unable to provide documentation of a valid prescription or the original prescription bottles.</p> <p>Based on my investigation, I find probable cause to arrest Haley Zager for possession of Alprazolam, Carisoprodol, and Clonazepam in violation of F.S.S. 893.13(6a), and possession of Gabapentin in violation of F.S.S. 499.03(1). Zager was transported to Palm Beach County Jail without incident.</p>				
SWORN AND SUBSCRIBED BEFORE ME  <b>HARDING, BRANDON BLAZE</b> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)  <b>08/23/2020</b> DATE	 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER <hr/> <b>CLINARD, RICKY LEE JR (780)</b> NAME OF OFFICER (PLEASE PRINT) <hr/> <b>08/23/2020</b> DATE			
ADMINISTRATIVE				PAGE <b>2 OF 2</b>



**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	<input type="checkbox"/>	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	<input type="checkbox"/>	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel.	
	<input type="checkbox"/>	119.071(2)(f)	Confidential informants (CIs).	
	<input type="checkbox"/>	119.071(2)(e)	Confession.	
Public Info. Exemptions	<input type="checkbox"/>	985.04(1)	Juvenile offender records.	
	<input type="checkbox"/>	119.071(h)(i)	Assets of a crime victim.	
	<input type="checkbox"/>	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	<input type="checkbox"/>	394.4615(7)	Mental health information.	
	<input type="checkbox"/>	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)	<input checked="" type="checkbox"/>	(iii) 119.0714(1)(i)-(j), 2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2,3
	<input type="checkbox"/>	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	<input type="checkbox"/>	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	<input type="checkbox"/>	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

**REVIEW COMPLETED BY**

Booking Number: 2020020053	Date: 08/24/2020
	Specialist Name/ID: AM/31562