

SUPPLEMENTAL  
INSERT

Sheriff's

Polk County



Office

Bartow, FL

DEC 4 2012

INCIDENT NUMBER  
2012-089514RELATED INCIDENT NUMBER  
NAAgency ORI Number  
FL05300000

<b>CLEARANCE CODE</b> 0 - OPEN      9 - CLOSED 1 - ARREST 2 - EXCEPTIONAL 3 - UNFOUNDED		<b>HATE CRIMES</b> 1. VERIFIED 2. UNVERIFIED 3. UNFOUNDED 4. N/A		<b>EXCEPTION TYPE</b> 1 - EXTRADITION DECLINED 2 - ARREST ON PRIMARY/SECONDARY OFFENSE WITHOUT PROSECUTION 3 - DEATH OF OFFENDER		4 - V/W REFUSED TO COOPERATE 5 - PROSECUTION DECLINED 6 - JUVENILE/NO CUSTODY		<b>ROUTE TO</b> B27/SW						
<b>REPORTING DEPUTY/AGENCY MEMBER</b> DS ANGELITA GODINEZ			<b>MEMBER #</b> 6955		<b>SUPERVISOR</b> <i>[Signature]</i>		<b>MEMBER #</b> <i>[Signature]</i>		<b>REGION/DIVISION</b> WEST REGION		<b>DISTRICT/BUREAU</b> SW DISTRICT		<b>SECTOR</b> 20	
<b>VICTIM'S COMPLETE NAME</b>														
<b>LAST</b> SEDWICK				<b>FIRST</b> REBECCA				<b>MI</b> ANN		<b>DATE/TIME OF REPORT</b> 11/30/2012 / 21:21				
<b>STATE STATUTE NUMBER</b> S8R				<b>OFFENSE DESCRIPTION</b> MISSING PERSON (RUNAWAY)										
<b>CHANGE TO</b>				<b>CHANGE TO</b>										

## ADDITIONAL CHARGES:

OFFENSE	TYPE	OFFENSE DESCRIPTION	ATTEMPT/COMM	STATE STATUTE NUMBER	NCIC/UCR CODE

## NARRATIVE:

THIS IS A SUPPLEMENTAL REPORT TO DEPUTY SHERIFF BLACKBURN'S ORIGINAL REPORT.

ON NOVEMBER 30, 2012, AT APPROXIMATELY 2121 HOURS, I RESPONDED TO 135 ARIZONA AVENUE, LAKELAND, FLORIDA, IN REFERENCE TO A MISSING PERSON (RUNAWAY) RECONTACT COMPLAINT. UPON ARRIVAL, I MADE CONTACT WITH A WHITE FEMALE LATER IDENTIFIED AS TRICIA NORMAN, WHO ADVISED HER DAUGHTER, REBECCA SEDWICK, WAS FORCED TO GO TO ANOTHER FEMALE'S HOUSE AFTER SCHOOL ON NOVEMBER 28, 2012 AND DEPUTY BLACKBURN RESPONDED TO THE RESIDENCE AND TOOK A REPORT ON THE INCIDENT. NORMAN ADVISED DEPUTY WEIS #3970 SPOKE WITH STUDENTS INVOLVED ON NOVEMBER 29, 2012 AND ON NOVEMBER 30, 2012, HE ESCORTED SEDWICK TO HER CLASSES.

SEDWICK ADVISED ON NOVEMBER 28, 2012, AT APPROXIMATELY 1510 HOURS, WHEN THE BELL RANG A WHITE FEMALE, EMILY COLE GRABBED HER BY THE ARM AND FORCED HER TO WALK OUT OF THE SCHOOL, WHERE SHE STOPPED TO ALLOW ONE OF SEDWICK'S FRIEND, RUBY, TO HUG HER, THEN CONTINUED TO HOLD HER ARM AND WALK HER TO COLE'S RESIDENCE. SEDWICK ADVISED SHE NEVER ASKED FOR ASSISTANCE FROM ANYONE SHE PASSED IN THE HALLS OF THE SCHOOL OR HER FRIEND WHILE SHE WAS BEING HUGGED. SEDWICK ADVISED SHE CALLED FOR HER BROTHER, COUSIN, AND HER COUSIN'S FRIEND IN THE HALL OF THE SCHOOL, HOWEVER THEY DID NOT TURN AROUND. SEDWICK ADVISED WHEN COLE PULLED HER OFF THE SCHOOL CAMPUS ANOTHER FEMALE "KYERNA" GOT BEHIND HER AND EVERY TIME SHE STOPPED KYERNA WOULD MAKE HER KEEP GOING BY PUSHING HER. SEDWICK ADVISED WHEN THEY GOT TO COLE'S RESIDENCE COLE ADVISED THE PEOPLE AT THE RESIDENCE OF WHAT WAS GOING ON AND THEY ADVISED THEY WERE NOT GOING TO ALLOW HER TO GO HOME. SEDWICK ADVISED AMANDA WILSON CONTACTED SEDWICK'S MOTHER AND A DEPUTY RESPONDED TO COLE'S RESIDENCE. SEDWICK ADVISED THE PEOPLE IN THE RESIDENCE TOLD HER, IF SHE DID NOT LIE TO THE DEPUTY SHE WOULD NOT GO HOME AND SHE WOULD NOT SEE HER FAMILY. SEDWICK ADVISED SHE TOLD DEPUTY BLACKBURN THAT HER MOTHER BURNED HER ARM AND DEPUTY BLACKBURN CONTACTED THE DEPARTMENT OF CHILDREN AND FAMILY AND SEDWICK ADVISED SHE TOLD THE SOCIAL WORKER THE SAME THING. SEDWICK ADVISED WHEN DEPUTY BLACKBURN TOOK HER HOME THE SOCIAL WORKER TALKED TO SEDWICK'S FAMILY AND THEN SEDWICK ADVISED SHE TOLD DEPUTY BLACKBURN AND THE SOCIAL WORKER THE TRUTH.

NORMAN ADVISED SEDWICK HAS LIED TO THE DEPARTMENT OF CHILDREN AND FAMILIES BEFORE AND THEY ARE CURRENTLY UNDER INVESTIGATION FOR ANOTHER INCIDENT. NORMAN WAS ADVISED HOW TO GO ABOUT GETTING AN INJUNCTION FOR PROTECTION FOR HER DAUGHTER.

SEDWICK COMPLETED A SWORN WRITTEN STATEMENT ABOUT THE INCIDENT.

I HAD NO FURTHER INVOLVEMENT IN THIS CASE.

## INVESTIGATIVE COST:

ONE DEPUTY CONDUCTING AND DOCUMENTING INVESTIGATION FOR APPROXIMATELY TWO (2) HOURS.

RECEIVED DEC - 3 2012

PAGE 1 OF 3

STATEMENT  
INSERT

Sheriff's



Office

FORM #9006 - Revised 09/08/10

Agency ORI Number  
FL 0530000

Polk County

INCIDENT NUMBER

12-89514

COMPLETE NAME OF PERSON MAKING STATEMENT

LAST Sedwick	FIRST Rebecca	MI A	DATE/TIME OF STATEMENT November 30th, 2012
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I, Rebecca Sedwick, SWEAR OR AFFIRM THE STATEMENT HEREIN IS CORRECT AND TRUE TO THE BEST OF MY KNOWLEDGE AND I HAVE VOLUNTEERED THIS INFORMATION.

STATEMENT: I was in class with a girl, Emily Cole and she grabbed my arm and when we were walking I called for my big brother and cousin and my cousin's friend but they didn't turn around so I don't think they heard me. When the girl pulled me out of the school campus another girl Kyerra got behind me and everytime I stopped she would make me go more. My friend Tracy saw us and I guess she tried to help me but they pulled me away. When we got to Emily's neighborhood Emily told the people there what was going on. Emily's big brother and everybody there was telling me they weren't going to let me go home. After awhile a woman, Amanda Wilson called my mom and later a Deputy came and everybody said if I didn't lie to the Deputy I wouldn't go home and I wouldn't see my family. After I talked to the deputy she called DCF and I told her the same thing. When the deputy and DCF lady brought me home and talked to everybody here I talked to them again and told them the truth. After that they talked to my mom again then they left.

SWORN TO AND SUBSCRIBED BEFORE ME, THE UNDERSIGNED AUTHORITY, THIS 30 DAY OF November 20 12

X Rebecca Sedwick

SIGNATURE OF PERSON MAKING STATEMENT

DISA (2) (655)

SIGNATURE OF LAW ENFORCEMENT OFFICER/NOTARY PUBLIC

PERSONALLY KNOWN \_\_\_\_\_ OR PRODUCED IDENTIFICATION \_\_\_\_\_

A. GODINEZ

PRINTED NAME OF L.E.O./NOTARY PUBLIC

TYPE OF IDENTIFICATION PRODUCED NO ID

IDENTIFICATION CARD NUMBER \_\_\_\_\_

RIGHTS AND  
CERTIFICATION  
INSERT

Agency ORI Number  
FL05300000

Sheriff's  
Polk County



Office  
Bartow, FL

FORM #9009 - Revised 01/22/03

INCIDENT NUMBER  
2012-089514

Victim Notification	<input type="checkbox"/> Pursuant to Section 960.001(1)(b), F.S., in the case of <b>homicide, sexual offenses, attempted murder, stalking, or domestic violence</b> , as a victim of the crime or appropriate next of kin of a homicide victim, <u>you have the right to be notified or designate a person to be notified</u> , of the defendant's release from incarceration.  Victim's Name _____ Mailing Address _____ City _____ Zip Code _____ Phone: Home _____ Work _____ Alternate Telephone # _____ Victim wants to be notified if the defendant is released ____ Yes ____ No
Victim Confidentiality	<input type="checkbox"/> Section 119.07(3)(s), F.S., states; Any information not otherwise held confidential or exempt from the provisions of Section 119.07(1) which reveals the home or employment telephone number, home or employment address, or personal assets of a person who has been the victim of <b>sexual battery, aggravated child abuse, aggravated stalking, harassment, aggravated battery, or domestic violence</b> is exempt from the provisions of the Public Records Laws upon written request by the victim, which must include official verification that an applicable crime has occurred. Such information shall cease to be exempt five years after the receipt of the written request.  I request the Polk County Sheriff's Office exempt from public inspection, any and all records revealing my home or employment telephone, home or employment address, or any personal assets. I understand these records will be confidential and exempt from public inspection for five years from the date on this request.  Defendant's Name (Print) _____
Intake Referral	<input type="checkbox"/> I understand a sworn statement from me is necessary in order to prosecute this case. I must contact the number provided to me within three working days, excluding holidays, for an appointment. Failure to contact the Region Intake Detective indicates I am no longer interested in prosecution. Failure to cooperate will result in the case being cleared pursuant to office procedure.  _____ NORTHWEST DISTRICT - 815-6515      _____ NORTHEAST DISTRICT - 297-1100 _____ SOUTHWEST DISTRICT - 499-2400      _____ SOUTHEAST DISTRICT - 534-6291
Waiver	<input type="checkbox"/> I hereby request the POLK COUNTY SHERIFF'S OFFICE not to prosecute _____ regarding my complaint. I am satisfied with the manner in which the investigation was conducted and release the Sheriff's Office of any responsibility regarding this complaint. I request no further investigation be pursued.
Certification	<div style="display: flex; justify-content: space-between;"> <div> SIGNATURE OF VICTIM/WITNESS/NEXT OF KIN    Signature of Deputy/Agency Member </div> <div> Was the <b>Victim's Right's Pamphlet</b> given? ____ Yes ____ No  Was the <b>Domestic Violence Pamphlet</b> given? ____ Yes ____ No </div> </div> I swear or affirm this report is correct and true to the best of my knowledge and belief. Signature of Deputy/Agency Member: Date: Sworn before me this <u>3</u> day of <u>December</u> 20 <u>12</u> Notary/Law Enforcement Officer:

