

**7th. Judicial Circuit 707
Charging Affidavit - FLAGLER**

Arrest # _____

Bk # 16-2476

Pg #1 of 4

ARREST <input checked="" type="checkbox"/> NOTICE TO APPEAR <input type="checkbox"/> AFFIDAVIT <input checked="" type="checkbox"/> C.C. <input type="checkbox"/>		ADULT <input checked="" type="checkbox"/> JUVENILE <input type="checkbox"/>		Court Case Number: 2016 MM 001330	
(ORI) FL: 0 1 8 0 0 0 0		Agency Name: Flagler County Sheriff's Office		Agency Case Number: 2016-00111342	
FCIC/NCIC Check? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		OBTS# <u>501047506</u>		U.C.R.:	Date Arrested: <u>12/5/16</u>
ADDRESS OF ARREST: <u>9 CUTE CT Palm Coast, FL 32137</u>		Arrested By: <u>Robert J. Finn</u>		ID Number: <u>705-560</u>	
DEFENDANT Name (L.F.A.): <u>MCGRAW, PHILLIP STEVEN</u>		A.K.A.:		Sex: <u>Male</u>	Race: <u>White</u>
DOB: <u>06/07/1990</u>	Age: <u>26</u>	Driver's Lic ID No.: <u>109584011</u>	State:	Year Expires:	S.S. #:
Height: <u>5 10</u>	Weight: <u>180</u>	Hair: <u>Brown</u>	Eyes: <u>Brown</u>	POB (City, St. Country):	Scars, Marks, Tattoos:
Business & Occupation:		Citizenship: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		Probation: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Sexual Predator: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		English: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		Deaf/Blind: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Address-Permanent (STREET, APT. NUMBER) (CITY) (STATE) ZIP/PO BOX RESIDENCE PHONE					
Address-Local (STREET, APT. NUMBER) (CITY) (STATE) ZIP/PO BOX RESIDENCE PHONE		<u>9 CUTE CT Palm Coast Florida 32137 (000)000-0000</u>			
Address-Other (Employer/School) (STREET, APT. NUMBER) (CITY) (STATE) ZIP/PO BOX BUS/STB/WL PHONE					
CHARGES DOMESTIC VIOLENCE? YES <input checked="" type="checkbox"/>		Attachments: Affidavit(s) <input type="checkbox"/> Statement(s) <input type="checkbox"/> NTA Schedule <input type="checkbox"/> Report <input checked="" type="checkbox"/> Traffic Infraction(s) <input type="checkbox"/> DUI <input type="checkbox"/>		Total Charges: <u>2</u>	
#1 Charge: <u>Viol No Contact Order</u>	FEL <input type="checkbox"/> MISD <input checked="" type="checkbox"/> ORD <input type="checkbox"/>	FS ORD: <u>848.06 NCO</u>	Citation No.: <u>N/A</u>	Bond: <u>NONE</u>	
#2 Charge: <u>Battery Domestic Violence</u>	FEL <input type="checkbox"/> MISD <input checked="" type="checkbox"/> ORD <input type="checkbox"/>	FS ORD: <u>784.03 dv</u>	Citation No.: <u>N/A</u>	Bond: <u>N/A</u>	
#3 Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS ORD:	Citation No.:	Bond:	
CODEFENDANT Co-Df #1 Arrested? Y <input type="checkbox"/> N <input type="checkbox"/> Fel <input type="checkbox"/> Misd <input type="checkbox"/> Traf <input type="checkbox"/> Ord <input type="checkbox"/> NTA <input type="checkbox"/>		Co-Df #2 Arrested? Y <input type="checkbox"/> N <input type="checkbox"/> Fel <input type="checkbox"/> Misd <input type="checkbox"/> Traf <input type="checkbox"/> Ord <input type="checkbox"/> NTA <input type="checkbox"/>			
#1 NAME (L.F.A.):		Race:	Sex:	DOB:	Age:
#2 NAME (L.F.A.):		Race:	Sex:	DOB:	Age:
NARRATIVE The undersigned certifies and swears that there is a probable cause to believe the above named defendant, on the <u>5th</u> day of <u>December</u> , <u>2016</u> , at approximately <u>02:00</u> <u>X</u> A.M. <u></u> P.M. at <u>9 CUTE CT</u> within <u>Flagler</u> County, violated the law and did then and there. On Monday December 5 th 2016 at approximately 12:41 AM I, Deputy J Smith, responded to 9 Cute Court Palm Coast Florida 32137 in reference to a domestic disturbance. Upon arriving at the residence, I made contact with Mr. Richard E Newberry and Mrs. Verna O'Guin who was located in the roadway in front of 9 Cute CT. Mr. Newberry advised me of the following: On Sunday Dec. 4 th 2016 Phillip McGraw and Sarah Jones attended a company Christmas party where they consumed alcohol. Phillip and Sarah returned home from the party shortly after midnight on Dec. 5 th 2016. Upon arriving home at 9					
Supervisor Approved: <u>Reckenwald, Jon Daniel</u>					
NOTICE TO APPEAR MANDATORY APPEARANCE <input type="checkbox"/>		YOU NEED NOT APPEAR IN COURT BUT MUST COMPLY WITH INSTRUCTIONS ON THE REVERSE SIDE OF YOUR COPY <input type="checkbox"/>		FINE AND COSTS AMOUNT:	
I AGREE TO APPEAR IN COURT HERIN TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE INDICATED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED, OR PAY THE LISTED FINE, I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST WILL BE ISSUED.					
SIGNATURE OF DEFENDANT		DATE		RELATIONSHIP TO JUVENILE	
Sworn to and subscribed before me, the undersigned This <u>5th</u> day of <u>DEC. 2016</u> .		I swear affirm the above statements are correct and true.		RI Thmsb	
Name: <u>Robert Finn #560</u>		OFFICER'S/COMPLAINANT'S SIGNATURE			
Notary Public: <input type="checkbox"/> Law Enforcement or Corrections Officer <input checked="" type="checkbox"/> Personally Known <input type="checkbox"/> Produced Identification <input type="checkbox"/>		NAME (PRINTED)		ID NUMBER	
Type of Identification:		<u>Det J Smith</u>		<u>705</u>	
OFFICIAL USE ONLY		Inmate Number & Facility:			

707 - COURT COPY

Witness/Victim/Evidence Form 707-A

Arrest
 Affidavit
 Notice to Appear
 Adult
 Juvenile

Court Case Number

Pg 2 of 4

Defendant Name: MCRAW, PHILLIP, STEVEN		Agency Case Number: 2016-00111342	
Name (L.F.M): JONES, SARAH, E	Vic <input checked="" type="checkbox"/> Wit <input type="checkbox"/>	Race: White	Sex: M <input type="checkbox"/> F <input checked="" type="checkbox"/>
Address 9 CUTE CT PALM COAST, Florida (#, Street, City, State):		Age: 27	DOB: 03/18/1989
Bus/School Address:		Zip: 32137-	Home Phone: (904)600-0000
Relative/Contact Name:		Relative/Contact Address:	
Name (L.F.M): NEWBERRY, RICHARD, E		Vic <input type="checkbox"/> Wit <input type="checkbox"/>	Race: White
Address 9 CUTE CT PALM COAST, Florida (#, Street, City, State):		Age: 51	DOB: 03/19/1966
Bus/School Address:		Zip: 32137-	Home Phone: (386)338-1788
Relative/Contact Name:		Relative/Contact Address:	
Name (L.F.M):		Vic <input type="checkbox"/> Wit <input type="checkbox"/>	Race:
Address (#, Street, City, State):		Sex: M <input type="checkbox"/> F <input type="checkbox"/>	Age:
Bus/School Address:		DOB:	SSN:
Relative/Contact Name:		Relative/Contact Address:	
Name (L.F.M):		Vic <input type="checkbox"/> Wit <input type="checkbox"/>	Race:
Address (#, Street, City, State):		Sex: M <input type="checkbox"/> F <input type="checkbox"/>	Age:
Bus/School Address:		DOB:	SSN:
Relative/Contact Name:		Relative/Contact Address:	
Name (L.F.M):		Vic <input type="checkbox"/> Wit <input type="checkbox"/>	Race:
Address (#, Street, City, State):		Sex: M <input type="checkbox"/> F <input type="checkbox"/>	Age:
Bus/School Address:		DOB:	SSN:
Relative/Contact Name:		Relative/Contact Address:	
Name (L.F.M):		Vic <input type="checkbox"/> Wit <input type="checkbox"/>	Race:
Address (#, Street, City, State):		Sex: M <input type="checkbox"/> F <input type="checkbox"/>	Age:
Bus/School Address:		DOB:	SSN:
Relative/Contact Name:		Relative/Contact Address:	
Name (L.F.M):		Vic <input type="checkbox"/> Wit <input type="checkbox"/>	Race:
Address (#, Street, City, State):		Sex: M <input type="checkbox"/> F <input type="checkbox"/>	Age:
Bus/School Address:		DOB:	SSN:
Relative/Contact Name:		Relative/Contact Address:	

EVIDENCE COLLECTED

Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Owner(Name) (Address)		(Phone)	Value
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Owner(Name) (Address)		(Phone)	Value
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount

I certify that the foregoing is a complete list of witnesses/victims & evidence known to me.

Investigating Officer: *D.S. Smith* ID Number: **705** Agency: **FGSO**

707-A - COURT COPY

Narrative 707-B Supplement

Arrest
 Affidavit
 Notice to Appear
 Adult
 Juvenile

Court Case Number:

Page # 3 of 4

Defendant Name: MCGRAW, PHILLIP, STEVEN	Agency Case Number: 2016-00111342
---	---

CHARGES	DOMESTIC VIOLENCE? YES <input type="checkbox"/>	Attachments: Affidavit(s) <input type="checkbox"/> Statement(s) <input type="checkbox"/> NTA Schedule <input type="checkbox"/> Report <input type="checkbox"/> Traffic Infraction(s) <input type="checkbox"/>	Total Charges:
# Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD:	Citation No: Bond:
# Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD:	Citation No: Bond:
# Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD:	Citation No: Bond:

Cute Ct Sarah became upset with her Aunt Verna, about having to pick up the children's toys. After Sarah's grandmother Billie Jones attempted to quite everyone down, Sarah pushed Billie and that is when Verna attempted to stop Sarah from hurting Billie. Sarah began to attack Verna, and then Richard attempted to separate Verna and Sarah. Once Richard got involved, Phillip punched Richard in his right cheek area with a closed fist causing Richards cheek to swell extensively. All parties were separated inside the residence.

After briefly speaking with Richard I was able to determine that Phillip and Sarah were no longer on scene and the female I observed was in fact Sarah Jones. I notified the Flagler County Communications Division and advised the next on-coming Deputy to stop and make contact with Sarah. Contact was made with Sarah as she was walking on Cunningham Ct. by Deputy Ditolla. It should be known that Sarah was completely uncooperative with law enforcement, becoming agitated and verbally confrontational at times, and would not provide a written or verbal statement about the incident.

After speaking with Richard, he refused medical treatment on scene and advised he would get a ride to the hospital. Pictures were taken of Richards injuries he sustained. Sarah and Billie were completely uncooperative and did not wish to complete statements. Billie would not let us inside the residence to verify that Phillip was not still inside. Sworn written statements were provided by Richard and Verna, Sarah provided a sworn written statement stating that she did not wish to write a statement. Phillip was unable to be found at this time.

Sarah Jones is not being charged at this time due to the "victim" (her Aunt Verna) not wanting to pursue charges against her as well as a lack of physical evidence to prove that a physical altercation took place.

Richard Newberry is related to Phillip McGraw by marriage, as he is his Uncle in-law, as well as residing in the same household for approximately 6 months.

It should be known that there is a current no contact order between Phillip and Sarah due to FCSO Case # 109088-16 where Phillip was arrested for Battery Domestic Violence and Battery Domestic Violence by Strangulation against Sarah. Mr. Phillip McGraw's identity was verified by personal information gathered on scene and cross referencing it with his booking information from the aforementioned case.

It should also be known that a neighbor who also attended the Christmas party advised that both Phillip and

Sworn to and subscribed before me, the undersigned this <u>5th</u> day of <u>December</u> , <u>2016</u>	I swear/affirm the above statements are correct and true.	Right thumb
Name: <u>PHILLIP MCGRAW #560</u>	<u>D/S [Signature]</u> OFFICER'S/COMPLAINANT'S SIGNATURE	
Notary Public <input type="checkbox"/> Law Enforcement Officer <input checked="" type="checkbox"/> Personally Known <input type="checkbox"/> Produced Identification <input type="checkbox"/>	NAME (PRINTED) <u>D/S J Smith</u>	ID NUMBER <u>705</u>
Type of Identification:		

707-B - COURT COPY

Narrative 707-B Supplement

Arrest
 Adult
 Misdemeanor
 Juvenile
 Notice to Appear

Court Case Number:

Defendant Name: MCGRAW, PHILLIP, STEVEN	Agency Case Number: 2016-00111342
---	---

#	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD:	Citation No:	Bond:

Sarah attended it together.

Taser Axon video will be uploaded to evidence.com.

No further information at this time.

Sworn to and subscribed before me, the undersigned this <u>5th</u> day of <u>December</u> , 2016. Name: <u>D/S J Smith #560</u> Notary Public <input type="checkbox"/> Law Enforcement Officer <input checked="" type="checkbox"/> Personally Known <input type="checkbox"/> Produced Identification <input type="checkbox"/> Type of Identification:	I swear/affirm the above statements are correct and true. D/S <u>J Smith</u> OFFICER'S/COMPLAINANT'S SIGNATURE NAME (PRINTED) <u>D/S J Smith</u> ID NUMBER <u>705</u>	Right thumb
--	---	-------------

707-B - COURT COPY