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15 *Attorneys for Plaintiffs Mychelle Blandin and minor B.W.*

16 UNITED STATES DISTRICT COURT  
17 CENTRAL DISTRICT OF CALIFORNIA

18 MYCHELLE BLANDIN, individually and  
19 as successor-in-interest to Mark Winek and  
20 Sharon Winek, deceased; B.W., a minor, by  
21 and through their guardian *ad litem*,  
22 Mychelle Blandin, individually and as  
23 successor-in-interest to Brooke Winek,  
24 deceased,

25 Plaintiffs,

26 vs.

27 WASHINGTON COUNTY SHERIFF'S  
28 OFFICE, a public entity;  
ESTATE OF AUSTIN LEE EDWARDS, an  
estate; and DOES 1-20, inclusive,

Defendants.

CASE NO.

**COMPLAINT FOR DAMAGES**

- 1. Fourth Amendment (42 U.S.C. § 1983)
- 2. Battery (Wrongful Death and Survival Action)
- 3. Violation of the Bane Act (Cal. Civil Code § 52.1)
- 4. Negligent Hiring, Supervision, or Retention (Wrongful Death and Survival Action)

**DEMAND FOR JURY TRIAL**

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1 Plaintiffs Mychelle Blandin and B.W., for their Complaint against Defendants  
2 Washington County Sheriff's Office, the Estate of Austin Lee Edwards, and Does 1-20,  
3 inclusive, allege as follows:

4 **INTRODUCTION**

- 5 1. On November 25, 2022, Austin Lee Edwards – a 28-year-old Washington County  
6 Sheriff's deputy – kidnapped 15-year-old R.W. after murdering her mother and  
7 grandparents and setting fire to their home in Riverside, California. Edwards  
8 gained entry to the home by identifying himself as a law enforcement officer,  
9 displaying his law enforcement badge and service weapon, and falsely claiming  
10 that he was conducting a law enforcement investigation.
- 11 2. After committing these murders, Edwards fled the scene in his vehicle with R.W.  
12 before becoming surrounded by deputies from the San Bernardino County  
13 Sheriff's Department. Edwards killed himself in a shootout with the deputies.
- 14 3. Edwards should have never been hired by the Washington County Sheriff's Office  
15 in the first place. The Sheriff's Office failed to conduct any investigation into his  
16 background before hiring him. If they did, they would have learned that in 2016  
17 he was detained for a psychiatric evaluation in connection with cutting himself  
18 and threatening to kill his father. As a result, Edwards was held on a temporary  
19 detention order and admitted to a treatment facility, which prevented him (under  
20 Virginia law) from buying or possessing a firearm until that right was restored by  
21 a court.
- 22 4. Edwards' right to buy or possess a firearm was never restored by a court. Despite  
23 this, the Washington County Sheriff's Office shockingly hired him as a deputy  
24 and provided him with a service firearm.
- 25 5. Plaintiffs now seek redress under state and federal law for the Washington County  
26 Sheriff's Office's many failures in hiring Edwards, and for the heinous murders he  
27 committed on November 25, 2022. Accordingly, this case is in the public interest.

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**JURISDICTION AND VENUE**

- 1
- 2 6. This Court has original jurisdiction pursuant to 28 U.S.C. §§ 1331 and 1343(a)(3)-
- 3 (4) because Plaintiffs assert claims arising under the laws of the United States,
- 4 including 42 U.S.C. § 1983 and the Fourth Amendment of the United States
- 5 Constitution. The Court has supplemental jurisdiction over Plaintiffs’ claims
- 6 arising under state law pursuant to 28 U.S.C. § 1367(a), because those claims are
- 7 so related to the federal claims that they form part of the same case or controversy
- 8 under Article III of the United States Constitution.
- 9 7. Venue is proper in this Court under 28 U.S.C. § 1391(b) because a substantial part
- 10 of the events or omissions giving rise to the claim occurred in this judicial district.

11 **PARTIES**

- 12 8. Plaintiff Mychelle Blandin is the daughter of Decedents Mark and Sharon Winek.
- 13 At all relevant times, Plaintiff Mychelle Blandin is and was a resident of the
- 14 County of Riverside, State of California. She brings these claims individually and
- 15 as successor-in-interest to Decedents Mark and Sharon Winek. Her successor-in-
- 16 interest declaration pursuant to CCP section 377.32 is attached hereto as “Exhibit
- 17 A.”
- 18 9. Plaintiff B.W. is the biological child of Decedent Brooke Winek. Her sister is
- 19 minor R.W., who was kidnapped by Austin Lee Edwards. A petition to appoint
- 20 Mychelle Blandin as B.W.’s guardian *ad litem* has been filed concurrently with
- 21 this Complaint. At all relevant times, Plaintiff B.W. is and was a resident of the
- 22 County of Riverside, State of California. She brings her claims individually and
- 23 as successor-in-interest to Decedent Brooke Winek. Her successor-in-interest
- 24 declaration pursuant to CCP section 377.32 is attached hereto as “Exhibit B.”
- 25 10. At all relevant times, Defendant Washington County Sheriff’s Office (“WCSO”)
- 26 is and was a constitutional office directed by the Sheriff responsible for the
- 27 enforcement of all laws enacted by state and local governments, and for the
- 28 investigation of felonies and misdemeanors committed in Washington County,

1 Virginia. Defendant WCSO is and was responsible for ensuring that the actions,  
2 omissions, policies, procedures, practices, and customs of its employees and  
3 agents complied with the laws of the United States and the State of Virginia. At  
4 all relevant times, Defendant WCSO was the employer of Austin Lee Edwards  
5 and is vicariously liable for his acts and omissions pursuant to California  
6 Government Code § 815.2 and relevant Virginia law.

7 11. Defendant Estate of Austin Lee Edwards is the estate for Decedent Austin Lee  
8 Edwards. Since this is an action to establish the decedent's (Austin Lee Edwards)  
9 liability for which he was protected by insurance (by Defendant WCSO),  
10 Plaintiffs are not required to join Edwards' personal representative or successor in  
11 interest pursuant to California Probate Code § 550(a). At all relevant times,  
12 Austin Lee Edwards was acting under color of law and within the course and  
13 scope of his employment with Defendant WCSO.

14 12. Does 1-20 are individuals and/or entities also responsible for the hiring, retention,  
15 and/or supervision of Austin Lee Edwards. The names of Does 1-20 are unknown  
16 to Plaintiffs at this time, who therefore sue them by fictitious names. Plaintiffs  
17 will amend their Complaint to show the true names and capacities of Does 1-20  
18 when they have been ascertained.

19 13. At all relevant times, each and every defendant was the agent of each and every  
20 other defendant and had the legal duty to oversee the hiring, conduct and  
21 employment of each and every defendant.

22 14. On May 24, 2023, Plaintiffs filed their Notice of Claim pursuant to Code of  
23 Virginia § 15.2-209.

24 **FACTS COMMON TO ALL CLAIMS FOR RELIEF**

25 Edwards is hired by Defendant WCSO after he resigns his position with the Virginia  
26 State Police.

27 15. Austin Lee Edwards first became a law enforcement officer in January 2022,  
28 when he was hired by the Virginia State Police as a state trooper.

1 16.Edwards remained employed with the Virginia State Police until he resigned on  
2 October 28, 2022.

3 17.After resigning his employment with the Virginia State Police, Edwards applied  
4 for a position as a deputy with the Washington County Sheriff's Office in  
5 November 2022. The Sheriff's Office hired him in November 2022.

6 18.The Sheriff's Office did not conduct an adequate investigation into Edwards'  
7 background before hiring him.

8 19.If the Sheriff's Office had investigated Edwards' background, they would have  
9 learned that he was detained for a psychiatric evaluation in February 2016 after  
10 threatening to kill himself and his father.

11 20.On February 8, 2016, local police and emergency medical technicians took  
12 Edwards into custody at a local hospital, where he was detained under an  
13 emergency custody order.

14 21.A local judge then approved a temporary detention order for Edwards and ordered  
15 his transfer to a local psychiatric facility.

16 22.During his psychiatric stay, another judge barred Edwards from purchasing,  
17 possessing or transporting firearms. Edwards was advised that his gun rights had  
18 been revoked unless restored by a court.

19 23.The treatment order detailing the loss of Edwards' gun rights was sent to the  
20 Central Criminal Records Exchange by the clerk for the Bristol General District  
21 Court.

22 24.Under Virginia law, any person who is held on a temporary detention order and is  
23 subsequently admitted to a treatment facility is prohibited from buying or  
24 possessing a firearm until that right is restored by a court.

25 25.Edwards never petitioned a court to restore his right to buy or possess a firearm.

26 26.As of the time he applied for a position with the Sheriff's Office, his right to buy  
27 or possess a firearm had not been restored by a court. As such, it would have been  
28 unlawful for him to own or possess a firearm under Virginia law.

1 27.Despite this, the Sheriff’s Office hired Edwards and provided him with a service  
2 weapon.

3 Edwards “catfishes” R.W., a minor, by posing as a 17-year-old boy.

4 28.Edwards created a fake online profile for himself as a 17-year-old boy.

5 29.He used this profile to “catfish” R.W., leading her to believe that she was  
6 exchanging messages with a boy similar in age to herself.

7 30.Edwards sent romantic messages to R.W. with this fake profile and learned  
8 personal information about R.W.

9 31.Edwards had also “catfished” another young woman living in the San Diego area.

10 Edwards gains entry into the Winek home by claiming that he was conducting a law  
11 enforcement investigation.

12 32.Edwards traveled across the country from Virginia to R.W.’s Riverside home at  
13 11261 Price Court on November 25, 2022.

14 33.R.W. resided at this address with her mother, Brooke, and her grandparents, Mark  
15 and Sharon Winek (who owned the home).

16 34.When Edwards arrived at the home, only Mark and Sharon Winek were home.  
17 Brooke and her daughter, R.W., were not at the home.

18 35.Edwards entered the home by falsely claiming that he was a law enforcement  
19 officer conducting an investigation. He showed Mark and Sharon his law  
20 enforcement badge and service weapon.

21 36.Edwards instructed Sharon to call Brooke. Once Brooke answered the phone,  
22 Sharon told Brooke that there was a detective at the home who was there to ask  
23 questions about a prior incident involving R.W. Sharon told Brooke that the  
24 detective wanted Brooke and R.W. to come to the home immediately.

25 37.Edwards then instructed Sharon to call Mychelle, Brooke’s sister. Sharon called  
26 Mychelle and told her (at Edwards’ direction) to remind Brooke that she was to  
27 leave all cell phones in the car and come inside the home first while leaving R.W.  
28 in the car, since he would be questioning the two of them separately.

1 38. While Sharon was on the phone with Mychelle, Edwards took the phone from  
2 Sharon and told Mychelle that he was a law enforcement detective. He told  
3 Mychelle that her mother (Sharon) was nervous but that he was trying to reassure  
4 her.

5 39. Once Brooke arrived, pursuant to Edwards' instructions, she left R.W. and all cell  
6 phones in the car and entered the home.

7 Edwards murders R.W.'s family, sets their home on fire, and kidnaps R.W.

8 40. After some time passed while R.W. was waiting in the car, she finally decided to  
9 get out of the car and enter the home.

10 41. Upon entry, R.W. discovered that Edwards had murdered her mother by slitting  
11 her throat. Edwards had also attempted to murder her grandparents by  
12 asphyxiation. Her grandparents were both hogtied with bags over their heads, but  
13 at least one of them was still moving when R.W. entered the home.

14 42. Edwards then set the house on fire and kidnapped R.W. at gunpoint with his  
15 service weapon.

16 43. Edwards fled the scene with R.W. in his vehicle.

17 44. Deputies from the San Bernardino County Sheriff's Department eventually  
18 surrounded Edwards.

19 45. Edwards killed himself in a shootout with the deputies. R.W. survived.

20 **FIRST CLAIM FOR RELIEF**

21 **Fourth Amendment (42 U.S.C. § 1983)**

22 (Against Defendant Estate of Austin Lee Edwards and Does 1-20)

23 46. Plaintiffs repeat and re-allege each and every allegation in the above paragraphs of  
24 this Complaint with the same force and effect as if fully set forth herein.

25 47. Austin Lee Edwards used excessive and unreasonable force against Mark Winek,  
26 Sharon Winek, and Brooke Winek, when he murdered them as described above.  
27 His conduct deprived Mark Winek, Sharon Winek, and Brooke Winek of their  
28 rights to be secure in their persons against unreasonable searches and seizures as



1 guaranteed under the Fourth Amendment and applied to state actors by the  
2 Fourteenth Amendment.

3 48.As a result of the foregoing, Decedents Mark Winek, Sharon Winek, and Brooke  
4 Winek all lost their lives. Up until the time of their deaths, they experienced  
5 physical pain and emotional distress.

6 49.Edwards killed himself on the same day that he carried out the murders of Mark  
7 Winek, Sharon Winek, and Brooke Winek. As such, this claim is brought against  
8 his Estate.

9 50.Plaintiffs bring this claim in their representative capacities and seek survival  
10 damages and loss of life damages. Plaintiffs also seek attorneys' fees.

11 **SECOND CLAIM FOR RELIEF**

12 **Battery – Wrongful Death and Survival Action**

13 (Against Defendant Washington County Sheriff's Office and Does 1-20)

14 51.Plaintiffs repeat and re-allege each and every allegation in the above paragraphs of  
15 this Complaint with the same force and effect as if fully set forth herein.

16 52.Edwards, while in the course and scope of his employment with Defendant  
17 WCSO, used unreasonable and excessive force against Decedents Mark Winek,  
18 Sharon Winek, and Brooke Winek. As a result, these Decedents experienced pain  
19 and suffering and ultimately died.

20 53.Defendant WCSO is vicariously liable for the wrongful acts of Edwards pursuant  
21 to section 815.2(a) of the California Government Code and relevant Virginia law.

22 54.Plaintiffs bring this claim in their individual and representative capacities and seek  
23 both survival damages and wrongful death damages.

24 **THIRD CLAIM FOR RELIEF**

25 **Violation of the Bane Act (Cal. Civil Code § 52.1)**

26 (Against Defendant Washington County Sheriff's Office and Does 1-20)

27 55.Plaintiffs repeat and re-allege each and every allegation in the above paragraphs of  
28 this Complaint with the same force and effect as if fully set forth herein.



1 56. Edwards, while acting in the course and scope of his employment with Defendant  
2 WCSO, intentionally committed acts of violence against Decedents Mark Winek,  
3 Sharon Winek, and Brooke Winek, including by using unreasonable and excessive  
4 force.

5 57. When Edwards murdered Decedents Mark Winek, Sharon Winek, and Brooke  
6 Winek, he intentionally interfered with their civil rights, including without  
7 limitation their right to be free from unreasonable seizures, and to life, liberty, and  
8 property.

9 58. Edwards successfully interfered with the above civil rights of Decedents Mark  
10 Winek, Sharon Winek, and Brooke Winek.

11 59. Edwards' conduct caused the death of Decedents Mark Winek, Sharon Winek,  
12 and Brooke Winek.

13 60. Defendant WCSO is vicariously liable for the wrongful acts of Edwards pursuant  
14 to section 815.2(a) of the California Government Code.

15 61. Plaintiffs bring this claim in their representative capacities and seek survival  
16 damages. Plaintiffs also seek attorneys' fees.

17 **FOURTH CLAIM FOR RELIEF**

18 **Negligent Hiring, Supervision, or Retention – Wrongful Death and Survival Action**

19 (Against Defendant Washington County Sheriff's Office and Does 1-20)

20 62. Plaintiffs repeat and re-allege each and every allegation in the above paragraphs of  
21 this Complaint with the same force and effect as if fully set forth herein.

22 63. Defendant WCSO hired Austin Lee Edwards as a sheriff's deputy in November  
23 2022.

24 64. Edwards was unfit to be a sheriff's deputy, given his mental health background.

25 65. Specifically, in February 2016, Edwards was detained for a psychiatric evaluation  
26 in connection with cutting himself and threatening to kill his father. As a result,  
27 he was held on a temporary detention order and admitted to a treatment facility,  
28

1 which prevented him (under Virginia law) from buying or possessing a firearm  
2 until that right was restored by a court.

3 66. Defendant WCSO should have known about Edwards' above mental health  
4 history if it conducted an adequate investigation into his background prior to  
5 hiring him.

6 67. Defendant WCSO's failure to conduct an adequate investigation into Edwards  
7 before hiring him resulted in Edwards becoming a WCSO deputy with access to a  
8 service firearm.

9 68. Defendant WCSO's negligence in hiring, supervising, and/or retaining Edwards  
10 was a substantial factor in Edwards carrying out the murders of Decedents Mark  
11 Winek, Sharon Winek, and Brooke Winek.

12 69. As described above, Edwards used his law enforcement credentials to gain access  
13 to the Winek household, carry out the murders, and kidnap R.W.

14 70. As a result of Defendant WCSO's negligence in hiring, supervising, and/or  
15 retaining Edwards, Plaintiffs lost their loved ones and suffered harm.

16 71. Plaintiffs bring this claim in their individual and representative capacities and seek  
17 both survival damages and wrongful death damages.

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**PRAYER FOR RELIEF**

WHEREFORE, Plaintiffs request entry of judgment in their favor and against Defendants as follows:

- A. For wrongful death damages, in an amount to be proven at trial;
- B. For survival damages, including pre-death pain and suffering damages, in an amount to be proven at trial;
- C. For loss of life damages, in an amount to be proven at trial;
- D. For statutory damages pursuant to Cal. Civil Code § 52.1, in an amount to be proven at trial;
- E. For interest;
- F. For reasonable costs of this suit and attorneys’ fees; and
- G. For such further other relief as the Court may deem just, proper, and appropriate.

Dated: November 16, 2023

**TAYLOR & RING**

By: /s/ Neil K. Gehlawat  
David M. Ring  
Neil K. Gehlawat  
Attorneys for Plaintiffs

Dated: November 16, 2023

**SAROS LAW, APC**

By: /s/ Alison P. Saros  
Alison P. Saros  
Attorneys for Plaintiff

**DEMAND FOR JURY TRIAL**

Plaintiffs hereby demand a trial by jury.

Dated: November 16, 2023

**TAYLOR & RING**

By: /s/ Neil K. Gehlawat  
David M. Ring  
Neil K. Gehlawat  
Attorneys for Plaintiffs

Dated: November 16, 2023

**SAROS LAW, APC**

By: /s/ Alison P. Saros  
Alison P. Saros  
Attorneys for Plaintiff

# **EXHIBIT A**

1 David M. Ring, State Bar No. 151124  
 2 Neil K. Gehlawat, State Bar No. 289388  
 3 Peter A. Reagan, State Bar No. 327596  
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9 *Attorneys for Plaintiffs Mychelle Blandin and minor B.W.*

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 11 UNITED STATES DISTRICT COURT  
 12 CENTRAL DISTRICT OF CALIFORNIA  
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14 MYCHELLE BLANDIN, individually and  
 15 as successor-in-interest to Mark Winek and  
 Sharon Winek, deceased; B.W., a minor, by  
 16 and through their guardian *ad litem*,  
 Mychelle Blandin, individually and as  
 17 successor-in-interest to Brooke Winek,  
 18 deceased,

19  
 20 Plaintiffs,

21 vs.

22 WASHINGTON COUNTY SHERIFF'S  
 OFFICE, a public entity;  
 23 ESTATE OF AUSTIN LEE EDWARDS, an  
 24 estate; and DOES 1-20, inclusive,

25 Defendants.  
 26

CASE NO.

**DECLARATION OF MYCHELLE  
 BLANDIN PURSUANT TO CCP §  
 377.32**

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**DECLARATION OF MYCHELLE BLANDIN**

I, Mychelle Blandin, declare:

1. I am the biological daughter of Decedents Mark Winek and Sharon Winek.
2. Mark Winek passed away on November 25, 2022 in Riverside, California.
3. Sharon Winek passed away on November 25, 2022 in Riverside, California.
4. No proceeding is now pending in California for administration of the estate of Mark Winek.
5. No proceeding is now pending in California for administration of the estate of Sharon Winek.
6. I am the successor-in-interest to Mark Winek and Sharon Winek.
7. No other person has a superior right to commence the action or proceeding or to be substituted for the Decedents in the pending action or proceeding.
8. A certified copy of the Mark Winek’s death certificate is attached hereto as “Exhibit 1.”
9. A certified copy of the Sharon Winek’s death certificate is attached hereto as “Exhibit 2.”

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on November <sup>14</sup>\_\_\_\_, 2023, in Riverside, California.

  
\_\_\_\_\_  
Mychelle Blandin



# **EXHIBIT 1**

**STATE OF CALIFORNIA**  
**CERTIFICATION OF VITAL RECORD**

**COUNTY OF RIVERSIDE**

RIVERSIDE, CALIFORNIA

3052022283475

**CERTIFICATE OF DEATH**

3202233018424

STATE FILE NUMBER		LOCAL REGISTRATION NUMBER	
1. NAME OF DECEDENT—FIRST (Given) <b>MARK</b>		2. MIDDLE <b>JAMES</b>	
3. LAST (If family) <b>WINEK</b>		4. DATE OF BIRTH mm/dd/yyyy <b>09/22/1953</b>	
AKA: ALSO KNOWN AS— Include full AKA (FIRST, MIDDLE, LAST)		5. AGE Yrs. <b>69</b>	
6. BIRTH STATE/FOREIGN COUNTRY <b>WI</b>		7. DATE OF DEATH mm/dd/yyyy <b>11/25/2022</b>	
10. SOCIAL SECURITY NUMBER <b>569-74-3106</b>		11. EVER IN U.S. ARMED FORCES? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK	
13. EDUCATION— Highest Level/Degree <b>HS GRADUATE</b>		14. WAS DECEDENT HISPANIC/LATINO/SPANISH? (If yes, see worksheet on back) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
15. USUAL OCCUPATION— Type of work for most of life. DO NOT USE RETIRED <b>HIGH SCHOOL COACH</b>		16. DECEDENT'S RACE— Up to 3 races may be listed (see worksheet on back) <b>CAUCASIAN</b>	
17. USUAL OCCUPATION— Type of work for most of life. DO NOT USE RETIRED <b>HIGH SCHOOL COACH</b>		18. KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, road construction, employment agency, etc.) <b>EDUCATION</b>	
19. YEARS IN OCCUPATION <b>10</b>		20. DECEDENT'S RESIDENCE (Street and number, or location) <b>11261 PRICE CT</b>	
21. CITY <b>RIVERSIDE</b>		22. COUNTY/PROVINCE <b>RIVERSIDE</b>	
23. ZIP CODE <b>92503</b>		24. YEARS IN COUNTY <b>33</b>	
25. STATE/FOREIGN COUNTRY <b>CA</b>		26. INFORMANT'S NAME, RELATIONSHIP <b>MYCHELLE BLANDIN, DAUGHTER</b>	
27. INFORMANT'S MAILING ADDRESS (Street and number, or rural route number, city, or town, state and zip) <b>8571 ROSEMARY DR, RIVERSIDE, CA 92508</b>		28. NAME OF SURVIVING SPOUSE/SPO/—FIRST <b>SHARON</b>	
29. MIDDLE <b>ANNE</b>		30. LAST (BIRTH NAME) <b>HOFTSTETTER</b>	
31. NAME OF FATHER/PARENT—FIRST <b>JAMES</b>		32. MIDDLE <b>JOSEPH</b>	
33. LAST <b>WINEK</b>		34. BIRTH STATE <b>WI</b>	
35. NAME OF MOTHER/PARENT—FIRST <b>ELIZABETH</b>		36. MIDDLE <b>BERYL</b>	
37. LAST (BIRTH NAME) <b>MONGOVEN</b>		38. BIRTH STATE <b>WI</b>	
39. DISPOSITION DATE mm/dd/yyyy <b>12/09/2022</b>		40. PLACE OF FINAL DISPOSITION <b>RIVERSIDE NATIONAL CEMETERY 22495 VAN BUREN BLVD, RIVERSIDE, CA 92518</b>	
41. TYPE OF DISPOSITION(S) <b>CREMATE/BURIAL</b>		42. SIGNATURE OF EMBALMER <b>NOT EMBALMED</b>	
43. LICENSE NUMBER <b>-</b>		44. NAME OF FUNERAL ESTABLISHMENT <b>ARLINGTON MORTUARY</b>	
45. LICENSE NUMBER <b>FD1033</b>		46. SIGNATURE OF LOCAL REGISTRAR <b>Geoffrey Leung, M.D., ED. M.</b>	
47. DATE mm/dd/yyyy <b>12/09/2022</b>		48. SIGNATURE OF LOCAL REGISTRAR <b>Geoffrey Leung, M.D., ED. M.</b>	
101. PLACE OF DEATH <b>RESIDENCE</b>		102. IF HOSPITAL, SPECIFY ONE <input type="checkbox"/> P <input type="checkbox"/> ER/ICU <input type="checkbox"/> OCA <input type="checkbox"/> Hospice <input type="checkbox"/> Nursing Home/LTC <input checked="" type="checkbox"/> Decedent's Home <input type="checkbox"/> Other	
104. COUNTY <b>RIVERSIDE</b>		105. FACILITY ADDRESS OR LOCATION WHERE FOUND (Street and number, or location) <b>11261 PRICE CT</b>	
106. CITY <b>RIVERSIDE</b>		107. CAUSE OF DEATH Enter the chain of events— disease, injury, or complications— that directly caused death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. IMMEDIATE CAUSE (A) <b>PENDING</b>	
108. DEATH REPORTED TO CORONER (AT) <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO INTERNAL NUMBER <b>2022-10105</b>		109. BIOPSY PERFORMED? (BT) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
110. ALTOPSY PERFORMED? (CT) <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		111. USED IN DETERMINING CAUSE? (DT) <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
112. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN 107 <b>NONE</b>		113. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? (If yes, list type of operation and date.) <b>NO</b>	
113A. DECEDENT PREGNANT IN LAST YEAR <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK		114. CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED. Decedent Attended Since (A) mm/dd/yyyy Decedent Last Seen Alive (B) mm/dd/yyyy	
115. SIGNATURE AND TITLE OF CERTIFIER <b>Geoffrey Leung</b>		116. LICENSE NUMBER <b>567</b>	
117. DATE mm/dd/yyyy <b>12/05/2022</b>		118. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE	
119. I CERTIFY THAT IN MY OPINION DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED. MANNER OF DEATH: <input type="checkbox"/> Natural <input type="checkbox"/> Accident <input type="checkbox"/> Homicide <input type="checkbox"/> Suicide <input checked="" type="checkbox"/> Pending investigation <input type="checkbox"/> Could not be determined		120. INJURED AT WORK? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK	
121. INJURY DATE mm/dd/yyyy		122. HOUR (24 Hour)	
123. PLACE OF INJURY (e.g., home, construction site, wooded area, etc.)		124. DESCRIBE HOW INJURY OCCURRED (Events which resulted in injury)	
125. LOCATION OF INJURY (Street and number, or location, and city, and zip)		126. SIGNATURE OF CORONER / DEPUTY CORONER <b>NADINE TOWNSEND</b>	
127. DATE mm/dd/yyyy <b>12/05/2022</b>		128. TYPE NAME, TITLE OF CORONER / DEPUTY CORONER <b>NADINE TOWNSEND, DEP CORONER</b>	
STATE REGISTRAR		FAX AUTH.#	
CENSUS TRACT		CENSUS TRACT	

CERTIFIED COPY OF VITAL RECORD

STATE OF CALIFORNIA }  
COUNTY OF RIVERSIDE } SS

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DATE ISSUED **Nov 15, 2023** 1/2

Dr. Geoffrey Leung, M.D., Ed M., County Health Officer  
RIVERSIDE COUNTY, CALIFORNIA

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**STATE OF CALIFORNIA**

**CERTIFICATION OF VITAL RECORD**

**COUNTY OF RIVERSIDE**

RIVERSIDE, CALIFORNIA

**PHYSICIAN/CORONER'S AMENDMENT**

3052022283475

STATE FILE NUMBER

1.1

NO ERASURES, WHITEOUTS, PHOTOCOPIES, OR ALTERATIONS

3202233018424

LOCAL REGISTRATION NUMBER

BIRTH  DEATH  FETAL DEATH

TYPE OR PRINT CLEARLY IN BLACK INK ONLY - THIS AMENDMENT BECOMES AN ACTUAL PART OF THE OFFICIAL RECORD

**PART I INFORMATION TO LOCATE RECORD**

INFORMATION AS IT APPEARS ON ORIGINAL RECORD	1A. NAME—FIRST MARK	1B. MIDDLE JAMES	1C. LAST WINEK	2. SEX M
	3. DATE OF EVENT—MM/DD/CCYY 11/25/2022	4. CITY OF EVENT RIVERSIDE	5. COUNTY OF EVENT RIVERSIDE	

**PART II STATEMENT OF CORRECTIONS**

6. CERTIFICATE ITEM NUMBER	7. INFORMATION AS IT APPEARS ON ORIGINAL RECORD	8. INFORMATION AS IT SHOULD APPEAR
107A	PENDING	ASPHYXIA DUE TO OCCLUSION OF AIRWAY
107AT	-	MINUTES
119	PENDING INVESTIGATION	HOMICIDE
120		N
121		11/25/2022
122		UNK
123		HOME
124		VICTIM OF HOMICIDAL VIOLENCE
125		11261 PRICE CT, RIVERSIDE, CA 92503

LIST ONE ITEM PER LINE

I HEREBY DECLARE UNDER PENALTY OF PERJURY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

DECLARATION OF CERTIFYING PHYSICIAN OR CORONER	9. SIGNATURE OF CERTIFYING PHYSICIAN OR CORONER AMAWRI VASQUEZ	10. DATE SIGNED—MM/DD/CCYY 10/27/2023	11. TYPED OR PRINTED NAME AND TITLE/DEGREE OF CERTIFIER AMAWRI VASQUEZ, DEP CORONER	
	12. ADDRESS—STREET and NUMBER 800 SOUTH REDLANDS AVE	13. CITY PERRIS	14. STATE CA	15. ZIP CODE 92570-2478
STATE/LOCAL REGISTRAR USE ONLY	16. OFFICE OF VITAL RECORDS OR LOCAL REGISTRAR CDPH-VR	17. DATE ACCEPTED FOR REGISTRATION—MM/DD/CCYY 10/30/2023		

STATE OF CALIFORNIA, DEPARTMENT OF PUBLIC HEALTH, OFFICE OF VITAL RECORDS

FORM VS 24Aa (REV. 1/08)

1.1

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STATE OF CALIFORNIA }  
COUNTY OF RIVERSIDE } SS

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RIVERSIDE COUNTY, CALIFORNIA

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# **EXHIBIT 2**



**STATE OF CALIFORNIA**  
**CERTIFICATION OF VITAL RECORD**

**COUNTY OF RIVERSIDE**  
**RIVERSIDE, CALIFORNIA**

3052022283788

**CERTIFICATE OF DEATH**

3202233018430

STATE FILE NUMBER		LOCAL REGISTRATION NUMBER	
1. NAME OF DECEDENT - FIRST (Given) <b>SHARON</b>		3. LAST (Family) <b>WINEK</b>	
2. MIDDLE <b>ANNE</b>		4. DATE OF BIRTH mm/dd/yyyy <b>05/07/1957</b>	
AKA. ALSO KNOWN AS - Include full AKA (FIRST, MIDDLE, LAST) <b>SHARIE ANNE WINEK</b>		5. AGE Yrs <b>65</b>	
9. BIRTH STATE/FOREIGN COUNTRY <b>OH</b>		10. SOCIAL SECURITY NUMBER <b>569-74-3182</b>	
11. EVER IN U.S. ARMED FORCES? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK		12. MARITAL STATUS/SDRP (at Time of Death) <b>WIDOWED</b>	
13. EDUCATION - Highest Level/Degree <b>HS GRADUATE</b>		14/15. WAS DECEDENT HISPANIC/LATINO(A)/SPANISH? (if yes, see worksheet on back) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
16. DECEDENT'S RACE - Up to 3 races may be listed (see worksheet on back) <b>CAUCASIAN</b>		7. DATE OF DEATH mm/dd/yyyy <b>11/25/2022</b>	
17. USUAL OCCUPATION - Type of work for most of life. DO NOT USE RETIRED <b>ACCOUNTING CLERK</b>		18. KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, road construction, employment agency, etc.) <b>BUSINESS</b>	
20. DECEDENT'S RESIDENCE (Street and number, or location) <b>11261 PRICE CT</b>		19. YEARS IN OCCUPATION <b>30</b>	
21. CITY <b>RIVERSIDE</b>		22. COUNTY/PROVINCE <b>RIVERSIDE</b>	
23. ZIP CODE <b>92503</b>		24. YEARS IN COUNTY <b>33</b>	
25. STATE/FOREIGN COUNTRY <b>CA</b>		26. INFORMANT'S NAME, RELATIONSHIP <b>MYCHELLE BLANDIN, DAUGHTER</b>	
27. INFORMANT'S MAILING ADDRESS (Street and number, or rural route number, city, or town, state and zip) <b>8571 ROSEMARY DR, RIVERSIDE, CA 92508</b>		28. NAME OF SURVIVING SPOUSE/SDRP - FIRST <b>-</b>	
29. MIDDLE <b>-</b>		30. LAST (BIRTH NAME) <b>-</b>	
31. NAME OF FATHER/PARENT - FIRST <b>HAROLD</b>		32. MIDDLE <b>-</b>	
33. LAST <b>HOFSTETTER</b>		34. BIRTH STATE <b>OH</b>	
35. NAME OF MOTHER/PARENT - FIRST <b>KATHLEEN</b>		36. MIDDLE <b>ANNE</b>	
37. LAST (BIRTH NAME) <b>MCPEEK</b>		38. BIRTH STATE <b>OH</b>	
39. DISPOSITION DATE mm/dd/yyyy <b>12/09/2022</b>		40. PLACE OF FINAL DISPOSITION <b>RES OF MYCHELLE BLANDIN 8571 ROSEMARY DR, RIVERSIDE, CA 92508</b>	
41. TYPE OF DISPOSITION(S) <b>CREMATE/RESIDENCE</b>		42. SIGNATURE OF EMBALMER <b>NOT EMBALMED</b>	
43. LICENSE NUMBER <b>-</b>		44. NAME OF FUNERAL ESTABLISHMENT <b>ARLINGTON MORTUARY</b>	
45. LICENSE NUMBER <b>FD1033</b>		46. SIGNATURE OF LOCAL REGISTRAR <b>GEOFFREY LEUNG, M.D., ED. M.</b>	
47. DATE mm/dd/yyyy <b>12/09/2022</b>		101. PLACE OF DEATH <b>OUTSIDE OF OWN RESIDENCE</b>	
102. IF HOSPITAL, SPECIFY ONE <input type="checkbox"/> IP <input type="checkbox"/> EP/OP <input type="checkbox"/> DCA		103. IF OTHER THAN HOSPITAL, SPECIFY ONE <input type="checkbox"/> Hospice <input type="checkbox"/> Nursing Home/LTC <input type="checkbox"/> Decedent's Home <input checked="" type="checkbox"/> Other	
104. COUNTY <b>RIVERSIDE</b>		105. FACILITY ADDRESS OR LOCATION WHERE FOUND (Street and number, or location) <b>11261 PRICE CT</b>	
106. CITY <b>RIVERSIDE</b>		107. CAUSE OF DEATH Enter the chain of events --- disease, injuries, or complications --- that directly caused death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. <b>(A) PENDING</b>	
108. DEATH REPORTED TO CORONER? Time Interval Between Death and Report <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <b>2022-10107</b>		109. BIOPSY PERFORMED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
110. AUTOPSY PERFORMED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		111. USED IN DETERMINING CAUSE? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
112. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN 107 <b>NONE</b>			
113. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? (if yes, list type of operation and date) <b>NO</b>			
114. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED. Decedent Attended Since (A) mm/dd/yyyy (B) mm/dd/yyyy		115. SIGNATURE AND TITLE OF CERTIFIER <b>GEOFFREY LEUNG, M.D., ED. M.</b>	
116. LICENSE NUMBER		117. DATE mm/dd/yyyy	
118. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE		119. I CERTIFY THAT IN MY OPINION DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED. MANNER OF DEATH <input type="checkbox"/> Natural <input type="checkbox"/> Accident <input type="checkbox"/> Homicide <input type="checkbox"/> Suicide <input checked="" type="checkbox"/> Pending Investigation <input type="checkbox"/> Could not be determined	
120. INJURED AT WORK? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK		121. INJURY DATE mm/dd/yyyy	
122. HOUR (24 Hours)		123. PLACE OF INJURY (e.g., home, construction site, wooded area, etc.)	
124. DESCRIBE HOW INJURY OCCURRED (events which resulted in injury)			
125. LOCATION OF INJURY (Street and number, or location, and city, and zip)			
126. SIGNATURE OF CORONER / DEPUTY CORONER <b>NADINE TOWNSEND</b>		127. DATE mm/dd/yyyy <b>12/05/2022</b>	
128. TYPE NAME, TITLE OF CORONER / DEPUTY CORONER <b>NADINE TOWNSEND, DEP CORONER</b>		FAX AUTH.#	
CENSUS TRACT		STATE REGISTRAR	

**CERTIFIED COPY OF VITAL RECORD**

STATE OF CALIFORNIA }  
 COUNTY OF RIVERSIDE } SS

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DATE ISSUED **Nov 15, 2023** 1/2

Dr. Geoffrey Leung, M.D., Ed.M., County Health Officer  
 RIVERSIDE COUNTY, CALIFORNIA

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**STATE OF CALIFORNIA**  
**CERTIFICATION OF VITAL RECORD**

**COUNTY OF RIVERSIDE**  
 RIVERSIDE, CALIFORNIA

3052022283788  
 STATE FILE NUMBER  
 1.1

**PHYSICIAN/CORONER'S AMENDMENT**  
 NO ERASURES, WHITEOUTS, PHOTOCOPIES,  
 OR ALTERATIONS

3202233018430  
 LOCAL REGISTRATION NUMBER

BIRTH  DEATH  FETAL DEATH

TYPE OR PRINT CLEARLY IN BLACK INK ONLY - THIS AMENDMENT BECOMES AN ACTUAL PART OF THE OFFICIAL RECORD

**PART I INFORMATION TO LOCATE RECORD**

INFORMATION AS IT APPEARS ON ORIGINAL RECORD	1A. NAME—FIRST SHARON	1B. MIDDLE ANNE	1C. LAST WINEK	2. SEX F
	3. DATE OF EVENT—MM/DD/CCYY 11/25/2022	4. CITY OF EVENT RIVERSIDE	5. COUNTY OF EVENT RIVERSIDE	

**PART II STATEMENT OF CORRECTIONS**

6. CERTIFICATE ITEM NUMBER	7. INFORMATION AS IT APPEARS ON ORIGINAL RECORD	8. INFORMATION AS IT SHOULD APPEAR
101	OUTSIDE OF OWN RESIDENCE	RESIDENCE
103	OTHER	DECEDENT'S HOME
107A	PENDING	ASPHYXIA DUE TO OCCLUSION OF AIRWAY
107AT	-	MINUTES
119	PENDING INVESTIGATION	HOMICIDE
120		N
121		11/25/2022
122		UNK
123		HOME
124		VICTIM OF HOMICIDAL VIOLENCE
125		11261 PRICE CT, RIVERSIDE, CA 92503

I HEREBY DECLARE UNDER PENALTY OF PERJURY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

DECLARATION OF CERTIFYING PHYSICIAN OR CORONER	9. SIGNATURE OF CERTIFYING PHYSICIAN OR CORONER AMAWRI VASQUEZ	10. DATE SIGNED—MM/DD/CCYY 10/27/2023	11. TYPED OR PRINTED NAME AND TITLE/DEGREE OF CERTIFIER AMAWRI VASQUEZ, DEP CORONER	
	12. ADDRESS—STREET and NUMBER 800 SOUTH REDLANDS AVE	13. CITY PERRIS	14. STATE CA	15. ZIP CODE 92570-2478
STATE/LOCAL REGISTRAR USE ONLY	16. OFFICE OF VITAL RECORDS OR LOCAL REGISTRAR CDPH-VR		17. DATE ACCEPTED FOR REGISTRATION—MM/DD/CCYY 10/30/2023	

STATE OF CALIFORNIA, DEPARTMENT OF PUBLIC HEALTH, OFFICE OF VITAL RECORDS FORM VS 24Ae (REV. 1/08) 1.1

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STATE OF CALIFORNIA }  
 COUNTY OF RIVERSIDE } SS

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\* 002261688 \*

DATE ISSUED **Nov 15, 2023** 2/2

*Geoffrey Leung*  
 Dr. Geoffrey Leung, M.D., Ed M., County Health Officer  
 RIVERSIDE COUNTY, CALIFORNIA

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# **EXHIBIT B**



1 David M. Ring, State Bar No. 151124  
 2 Neil K. Gehlawat, State Bar No. 289388  
 3 Peter A. Reagan, State Bar No. 327596  
**TAYLOR & RING, LLP**  
 4 1230 Rosecrans Avenue, Suite 360  
 Manhattan Beach, California 90266  
 Telephone: (310) 209-4100  
 5 Email: ring@tayloring.com; gehlawat@tayloring.com

6 Alison P. Saros, State Bar No. 185021  
**SAROS LAW, APC**  
 7 360 N. Pacific Coast Hwy., Suite 1000  
 El Segundo, CA 90245  
 Telephone: (310) 341-3466  
 8 Email: alison@saroslaw.com

9 *Attorneys for Plaintiffs Mychelle Blandin and minor B.W.*

11 UNITED STATES DISTRICT COURT  
 12 CENTRAL DISTRICT OF CALIFORNIA

14 MYCHELLE BLANDIN, individually and  
 15 as successor-in-interest to Mark Winek and  
 16 Sharon Winek, deceased; B.W., a minor, by  
 and through their guardian *ad litem*,  
 17 Mychelle Blandin, individually and as  
 18 successor-in-interest to Brooke Winek,  
 deceased,

19  
 20 Plaintiffs,

21 vs.

22 WASHINGTON COUNTY SHERIFF'S  
 23 OFFICE, a public entity;  
 24 ESTATE OF AUSTIN LEE EDWARDS, an  
 estate; and DOES 1-20, inclusive,

25 Defendants.  
 26

CASE NO.

**DECLARATION OF MYCHELLE  
 BLANDIN ON BEHALF OF MINOR  
 B.W. PURSUANT TO CCP § 377.32**

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**DECLARATION OF MYCHELLE BLANDIN ON BEHALF OF MINOR B.W.**

I, Mychelle Blandin, declare:

1. I am the maternal aunt and legal guardian for minor B.W., who is the biological daughter of Decedent Brooke Winek.
2. Brooke Winek passed away on November 25, 2022 in Riverside, California.
3. No proceeding is now pending in California for administration of the estate of Brooke Winek.
4. B.W. is a successor-in-interest to Brooke Winek.
5. No other person has a superior right to commence the action or proceeding or to be substituted for the Decedent in the pending action or proceeding.
6. A certified copy of the Brooke Winek’s death certificate is attached hereto as “Exhibit 3.”

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on November <sup>14</sup>\_\_\_\_, 2023, in Riverside, California.

  
\_\_\_\_\_  
Mychelle Blandin, on behalf of minor B.W.

# **EXHIBIT 3**



**STATE OF CALIFORNIA**  
**CERTIFICATION OF VITAL RECORD**

**COUNTY OF RIVERSIDE**  
RIVERSIDE, CALIFORNIA

32052022278615

**CERTIFICATE OF DEATH**

3202233018218

STATE FILE NUMBER		STATE OF CALIFORNIA USE BLACK INK ONLY NO ERASURES, HYPHENS OR ALTERATIONS VS-11 (REV. 3/02)		LOCAL REGISTRATION NUMBER	
1. NAME OF DECEDENT - FIRST (Given) <b>BROOKE</b>		2. MIDDLE <b>ELIZABETH</b>		3. LAST (Family) <b>WINEK</b>	
AKA - ALSO KNOWN AS - include full AKA (FIRST, MIDDLE, LAST)					
4. DATE OF BIRTH mm/dd/yyyy <b>09/21/1984</b>		5. AGE Yrs. <b>38</b>		6. SEX <b>F</b>	
9. BIRTH STATE/FOREIGN COUNTRY <b>CA</b>		10. SOCIAL SECURITY NUMBER <b>602-05-4898</b>		11. EVER IN U.S. ARMED FORCES? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK	
12. MARITAL STATUS/SRDP* (at Time of Death) <b>DIVORCED</b>		7. DATE OF DEATH mm/dd/yyyy <b>11/25/2022</b>		8. HOUR 24 hours <b>1127 FND</b>	
13. EDUCATION - Highest Level/Degree (see worksheet on back) <b>SOME COLLEGE</b>		14/15. WAS DECEDENT HISPANIC/LATINO(A)/SPANISH? (if yes, see worksheet on back) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		16. DECEDENT'S RACE - Up to 3 races may be listed (see worksheet on back) <b>CAUCASIAN</b>	
17. USUAL OCCUPATION - Type of work for most of life. DO NOT USE RETIRED <b>HOMEMAKER</b>			18. KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, road construction, employment agency, etc.) <b>OWN HOME</b>		19. YEARS IN OCCUPATION <b>15</b>
20. DECEDENT'S RESIDENCE (Street and number, or location) <b>11261 PRICE CT</b>					
21. CITY <b>RIVERSIDE</b>		22. COUNTY/PROVINCE <b>RIVERSIDE</b>		23. ZIP CODE <b>92503</b>	
24. YEARS IN COUNTY <b>33</b>		25. STATE/FOREIGN COUNTRY <b>CA</b>			
26. INFORMANT'S NAME, RELATIONSHIP <b>MYCHELLE BLANDIN, SISTER</b>			27. INFORMANT'S MAILING ADDRESS (Street and number, or rural route number, city or town, state and zip) <b>8571 ROSEMARY DR, RIVERSIDE, CA 92508</b>		
28. NAME OF SURVIVING SPOUSE/SRDP - FIRST <b>-</b>		29. MIDDLE <b>-</b>		30. LAST (BIRTH NAME) <b>-</b>	
31. NAME OF FATHER/PARENT - FIRST <b>MARK</b>		32. MIDDLE <b>JAMES</b>		33. LAST <b>WINEK</b>	
34. BIRTH STATE <b>WI</b>		35. NAME OF MOTHER/PARENT - FIRST <b>SHARIE</b>		36. MIDDLE <b>ANNE</b>	
37. LAST (BIRTH NAME) <b>HOFSTETTER</b>		38. BIRTH STATE <b>OH</b>			
39. DISPOSITION DATE mm/dd/yyyy <b>12/07/2022</b>		40. PLACE OF FINAL DISPOSITION <b>OLIVEWOOD MEMORIAL PARK 3300 CENTRAL AVE, RIVERSIDE, CA 92506</b>			
41. TYPE OF DISPOSITION(S) <b>CREMATE/BURIAL</b>		42. SIGNATURE OF EMBALMER <b>NOT EMBALMED</b>		43. LICENSE NUMBER <b>-</b>	
44. NAME OF FUNERAL ESTABLISHMENT <b>ARLINGTON MORTUARY</b>		45. LICENSE NUMBER <b>FD1033</b>		46. SIGNATURE OF LOCAL REGISTRAR <b>GEOFFREY LEUNG, M.D., ED. M.</b>	
47. DATE mm/dd/yyyy <b>12/06/2022</b>					
101. PLACE OF DEATH <b>RESIDENCE</b>		102. IF HOSPITAL, SPECIFY ONE <input type="checkbox"/> IP <input type="checkbox"/> ER/OP <input type="checkbox"/> DCA		103. IF OTHER THAN HOSPITAL, SPECIFY ONE <input type="checkbox"/> Hospice <input type="checkbox"/> Nursing Home/LTC <input checked="" type="checkbox"/> Decedent's Home <input type="checkbox"/> Other	
104. COUNTY <b>RIVERSIDE</b>		105. FACILITY ADDRESS OR LOCATION WHERE FOUND (Street and number, or location) <b>11261 PRICE CT</b>		106. CITY <b>RIVERSIDE</b>	
107. CAUSE OF DEATH Enter the chain of events - diseases, injuries, or complications - that directly caused death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. IMMEDIATE CAUSE (Final disease or condition resulting in death) → <b>(A) PENDING</b>		108. DEATH REPORTED TO CORONER? (A) <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Date Reported: <b>2022-10-106</b>		109. BICOPSY PERFORMED? (B) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Sequentially list conditions, if any, leading to cause on Line A. Enter UNDERLYING CAUSE (disease or injury that initiated the events resulting in death) LAST.		110. ALTOPSY PERFORMED? (C) <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		111. USED IN DETERMINING CAUSE? (D) <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
112. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN 107 <b>NONE</b>					
113. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? (if yes, list type of operation and date) <b>NO</b>					
114. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED. Decedent Attended Since: _____ Decedent Last Seen Alive: _____		115. SIGNATURE AND TITLE OF CERTIFIER <b>NADINE TOWNSEND</b>		116. LICENSE NUMBER 117. DATE mm/dd/yyyy	
(A) mm/dd/yyyy (B) mm/dd/yyyy		118. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE			
119. I CERTIFY THAT IN MY OPINION DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED. MANNER OF DEATH <input type="checkbox"/> Natural <input type="checkbox"/> Accident <input type="checkbox"/> Homicide <input type="checkbox"/> Suicide <input checked="" type="checkbox"/> Pending Investigation <input type="checkbox"/> Could not be determined		120. INJURED AT WORK? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK		121. INJURY DATE mm/dd/yyyy	
122. HOUR (24 hours)					
123. PLACE OF INJURY (e.g., home, construction site, wooded area, etc.)					
124. DESCRIBE HOW INJURY OCCURRED (Events which resulted in injury)					
125. LOCATION OF INJURY (Street and number, or location, and city, and zip)					
126. SIGNATURE OF CORONER / DEPUTY CORONER <b>NADINE TOWNSEND</b>		127. DATE mm/dd/yyyy <b>12/06/2022</b>		128. TYPE NAME, TITLE OF CORONER / DEPUTY CORONER <b>NADINE TOWNSEND, DEP CORONER</b>	
STATE REGISTRAR		FAX AUTH#		CENSUS TRACT	

CERTIFIED COPY OF VITAL RECORD

STATE OF CALIFORNIA } SS  
COUNTY OF RIVERSIDE

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DATE ISSUED **Nov 15, 2023** 1/2

Dr. Geoffrey Leung, M.D., Ed.M., County Health Officer  
RIVERSIDE COUNTY, CALIFORNIA

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\* 002261685 \*



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**STATE OF CALIFORNIA**

**CERTIFICATION OF VITAL RECORD**

**COUNTY OF RIVERSIDE**

RIVERSIDE, CALIFORNIA

**PHYSICIAN/CORONER'S AMENDMENT**

NO ERASURES, WHITEOUTS, PHOTOCOPIES,  
OR ALTERATIONS

3052022278615

STATE FILE NUMBER

1.1

3202233018218

LOCAL REGISTRATION NUMBER

BIRTH  DEATH  FETAL DEATH

TYPE OR PRINT CLEARLY IN BLACK INK ONLY - THIS AMENDMENT BECOMES AN ACTUAL PART OF THE OFFICIAL RECORD

**PART I INFORMATION TO LOCATE RECORD**

INFORMATION AS IT APPEARS ON ORIGINAL RECORD	1A. NAME—FIRST BROOKE	1B. MIDDLE ELIZABETH	1C. LAST WINEK	2. SEX F
	3. DATE OF EVENT—MM/DD/CCYY 11/25/2022	4. CITY OF EVENT RIVERSIDE	5. COUNTY OF EVENT RIVERSIDE	

**PART II STATEMENT OF CORRECTIONS**

6. CERTIFICATE ITEM NUMBER	7. INFORMATION AS IT APPEARS ON ORIGINAL RECORD	8. INFORMATION AS IT SHOULD APPEAR
107A	PENDING	STAB WOUND OF THE CERVICAL SPINAL CORD
107AT	-	RAPID
119	PENDING INVESTIGATION	HOMICIDE
120		N
121		11/25/2022
122		UNK
123		HOME
124		STABBED BY KNOWN ASSAILANT
125		11261 PRICE CT, RIVERSIDE, CA 92503

I HEREBY DECLARE UNDER PENALTY OF PERJURY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

DECLARATION OF CERTIFYING PHYSICIAN OR CORONER	9. SIGNATURE OF CERTIFYING PHYSICIAN OR CORONER AMAWRI VASQUEZ	10. DATE SIGNED—MM/DD/CCYY 10/27/2023	11. TYPED OR PRINTED NAME AND TITLE/DEGREE OF CERTIFIER AMAWRI VASQUEZ, DEP CORONER	
	12. ADDRESS—STREET and NUMBER 800 SOUTH REDLANDS AVE	13. CITY PERRIS	14. STATE CA	15. ZIP CODE 92570-2478
STATE/LOCAL REGISTRAR USE ONLY	16. OFFICE OF VITAL RECORDS OR LOCAL REGISTRAR CDPH-VR	17. DATE ACCEPTED FOR REGISTRATION—MM/DD/CCYY 10/30/2023	FORM VS 24Ae (REV. 1/08)	

STATE OF CALIFORNIA, DEPARTMENT OF PUBLIC HEALTH, OFFICE OF VITAL RECORDS

CERTIFIED COPY OF VITAL RECORD

STATE OF CALIFORNIA }  
COUNTY OF RIVERSIDE } SS

This is a true and exact reproduction of the document officially registered and placed on file by the Riverside University Health System, Department of Public Health.

DATE ISSUED **Nov 15, 2023** 2/2

This copy is not valid unless prepared on an engraved border, displaying the date, seal, and signature of the Registrar.

Dr. Geoffrey Leung, M.D., Ed.M., County Health Officer  
RIVERSIDE COUNTY, CALIFORNIA

*Geoffrey Leung*



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE