7th. Judicial Circuit 707 Rk# Arrest # Charging Affidavit - Volusia Court Case Number: AFFIDAVIT c.c. ADULT | JUVENILE ARREST NOTICE TO APPEAR Agency Case Number: FL0640100 DAYTONA BEACH POLICE DEPARTMENT 120000733 (ORI) FL: ILC B Time of Date X Yes □ No OBTS# FCIC/NCIC Check? Arrest: Arrested: ADDRESS OF ARREST (Street, City, State, Zip): Arrested: iD By: Number (Middle) A.K.A.: Race: NAME (Last) (First) DEFENDANT w Szabo Stephen Driver's Lic./ State: S.S.# -Expires 09-18-1982 Weight Hair Eves: Height: Yes 🔲 No 🔀 (City, State, Country): BRO Business & Citizenshin: Scars, Marks, Occupation Yes No Tattoos: English: Deaf/Mute: Sexual Predator: Probation: Yes No X Yes 🗙 No 🗌 □ No 🔀 Yes No (STATE) (STREET, APT. NUMBER) (CITY) ZIP CODE RESIDENCE PHONE Address - Mailing/Permanent SOUTH DAYTONA FL 32119 2554 Yale Rd ZIP CODE (STREET, APT. NUMBER) (STATE) RESIDENCE PHONE Address - Local (STREET, APT, NUMBER) (CITY) (STATE) ZIP CODE BUS/SCHOOL PHONE Address - Other (Employer/School) Report Traffic Infraction(s) Statement(s) **CHARGES** Attachments: Affidavit(s)? NTA Schedule Charge: FS/ORD: Citation No.: Bond FEL MISD X ORD Battery Touch/Strike FS/ORD: Citation No.: Bond: Charge: FEL MISD ORD Charge: FS/ORD: Citation No.: Bond: FEL MISD ORD Co-Def #1. Arrested? Y N Fel. Misd. Traf. Ord. NTA Co-Def #2. Arrested? Y N Fel. Misd. Traf. Ord. NTA CO-DEFENDANT DOB: Race: Sex Age: #1 NAME (Last) (First) (Middle) DOB: Sex: #2 NAME **NARRATIVE** The undersigned certifies and swears that there is probable cause to believe the above-named defendant, on the ____15__ day of _ 2012 1240 **X**a.m. □ p.m. January __ , at approximately _ DAYTONA BEACH at 512 Seabreeze Blvd ___ within Volusia ___ County, violated the law and did then and there: did unlawfully actually and intentionally touch or strike another person, (V-1) Johnson, against his will or did intentionally cause bodily harm to that 2 3 On the above date and time DBPD officers responded to "Bishop's Tavern" in reference to some type of disturbance. Officers interviewed witnesses and attempted to interview the victim. (V-1) was then subsequently transported to Halifax Hospital after the disturbance. On 1/31/12 this writer conducted a interview with (V-1) at 129 Valor Blvd (CID). Further, (V-1) explained that he was at the bar and approached a witness (Martinelli) to 5 dance with him. (V-1) relayed he grabbed Martinelli's hand and proceeded to the dance floor. While dancing with Martinelli, (V-1) suddenly fell to the 6 floor after being struck in the left side of his face. (V-1) explained that he could not tell how he was struck in his face but did see club management 7 holding back (S-1) Szabo. (V-1) stated that he did not provoke the fight with (S-1) and that Martinelli walked voluntarily to the dance floor with him. (V-1) told this writer that he 9 was provided (S-1)'s name from friends and confirmed his identity via Facebook profile photo. (V-1) stated that he does wish to prosecute in this 10 case. The interview was recorded to DVD and a copy was submitted into evidence. Photographs of the victims injuries were also submitted into 11 evidence by this writer. An interview was also conducted with witness (Cummings) at DBPD. Cummings explained that (V-1) was dancing with 12 several people and noticed that he suddenly fell to the floor. Cummings told this writer that (V-1) did not provoke a fight nor did he grab on any 13 females with his hands. The interview was recorded to DVD and a copy was submitted into evidence. This police report also contains a conflicting 14 statement of the incident from a witness on 1/26/12. NOTICE TO APPEAR APPEARANCE YOU NEED NOT APPEAR IN COURT BUT MUST COMPLY WITH INSTRUCTIONS ON THE REVERSE SIDE OF YOUR COPY FINE, AND COSTS I AGREE TO APPEAR IN COURT HEREIN 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 SETTLE DE THE JUNECUIT COURT CLERK OF TH DISPLY FLORIDA SIGNATURE OF JUVENILE PARENT OR CUSTOMIUSIA No. SIGNATURE OF DEFENDANT RELATIONSHIP TO JUVENILE 5813 OFFICER'S/COMPLAINANT'S SIGNATURE Notary Public Enforcement or Corrections Officer MEHALKO, MATTHEW D58193 Personally Known Produced Identification Type of Identification. Inmate Number OFFICIAL USE ONLY

STATE VS.				
Name	(L,F,M):		DOB:	Court Case Number:
FIRST APPEARA	NCE DATE:	·		
Defendant (Defendant (s advised of his/her rights are) requested and was appoin) not indigent, has or will re- mined the sworn complaint	ted a Public Defende etain	-	
	CHARGE			
	Probable Cause Found			
	PC Undet 72 hours			
	PC Undet 96 hours			
	Insufficient PC			
	BOND SET AT			
	ROR			
	PTR			
	Other			
ASA:			.PD	
Plea:				
Sentence:				
Notes.				
			 	
Special Conditions () No contact () No violent () Do not con () Do not con () Submit to u () Substance, a	Release Monitoring - May require de	witness(es), & co-def	-	nipment.
				Judge

Arrest Witness/Victim/Evidence **Affidavit** X Adult Form 707-A **Court Case** Juvenile Notice to Appear Number: Page # 3 of 3 Defendant (Last) Agency Case 120000733 Name: Szabo Stephen w Number (First) (Middle) DOB: SSN: Age: м 🔀 ғ 🗌 Wit Johnson Keith Ryan w 29 05-19-1982 Address Statement: Zip: Home. X Yes ∏ No (#, Street, City, State): 1715 Victory Palm Dr **EDGEWATER** 32132 Phone: (407) 756-3110 Bus/School Zip: Address: Phone Relative/Contact Relative/ Phone: Contact Name Address: Name: (Last) (First) (Middle) DOB: SSN: Vic Race: Age: M 🗙 F 🗌 Wit Marshlack David W Address Zip: Home Statement Yes **⋈** № (#, Street, City, State): 512 Seabreeze Blvd Phone: (727) 433-2222 DAYTONA BEACH FL 32118 Bus/School Zip. Bus. Address Phone Relative/ Relative/Contact Phone: Contact Name Address (First) (Middle) DOR: SSN: Name: (Last) Vic Race: 冈 м 💢 ғ 🗌 Wit W Stavris Stephen Address Statement: Zip. Home: (#, Street, City, State): 512 Seabreeze Blvd DAYTONA BEACH Yes **⊠** No 32118 FL Phone: (386) 341-1444 Bus/School Zip. Rus Address: Phone Relative Relative/Contact Phone: Contact Name Address. Name: (Last) (First) (Middle) Race DOB: SSN: Vic Age: 冈 м 🗌 ғ 🔀 Wit Butterback W Joanne Address Statement: Zip: Home. Yes **⋈** № (#, Street, City, State): 223 N Hollywood Av #1 DAYTONA BEACH FL 32118 Phone: (352) 430-7900 Bus/School Żıp: Bus: Address Phone Relative Relative/Contact Phone: Contact Name Address Name: (First) Race: DOB: SSN: Vic Sex: Age: м 🗌 ғ 🔀 Marttinelli Megan 20 10-25-1991 Address Zıp: Statement: Yes No (#, Street, City, State): 822 Bayridge Lane PORT ORANGE FL 32127 Phone: (386) 366-3945 Bus/School Zip: Bus: Address: Phone: Relative/ Relative/Contact Phone. Contact Name Address Name. SSN: (Last) (First) (Middle) Vic DOB Race Sex Age: м 🗌 ғ 🔀 Wit 冈 Cummings Megan W 24 04-05-1987 Address Statement: Zip: Home: (#, Street, City, State): 549 Hamlet Drive PORT ORANGE X Yes ∏ No FL Phone 32127 Bus/School Zip: Bus: Address: Phone: Relative/ Relative/Contact Phone: Contact Name Address: **EVIDENCE COLLECTED** Description of Evidence Date Recovered Model Senal/I.D. Number Drug Amount 2 DVD Interviews 01-31-2012 Owner Name (Last) (First) (Address) Value (Phone) DBPD 129 Valor Blvd DAYTONA BEACH FL 671-5100 Description of Evidence Date Recovered Model Serial/I.D. Number Drug Amount Photgraphs of Injury 01-31-2012 (Address) Owner Name (Last) (First) (Phone) Value DBPD 129 Valor Blvd DAYTONA BEACH FL 671-5100 Description of Evidence Model Senal/I.D. Number Date Recovered **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**

Investigating Officer
707-A COURT COPY

MEHALKO, MATTHEW

Date Recovered

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Description of Evidence

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Drug Amount

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Model Serial/I.D. Number

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