

# 0521340

210F1274 MB

# 3736

ARREST / NOTICE TO APPEAR

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

3

JUVENILE

OBTS Number	Agency ORI Number <b>0500400</b>		Agency Name <b>Delray Beach Police Department</b>		Agency Report Number (N.T.A.'s only) <b>4 0 21-000990</b>	
Charge Type: Check as many as apply	<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	If Weapon Seized	Enter Type <b>Hands/fist/feet/teeth</b>	Multiple Clearance Indicator <b>1</b>
Location of Arrest (Including Name of Business) <b>300 W ATLANTIC AVE, DELRAY BEACH, FL 33444</b>			Location of Offense (Business Name, Address) <b>290 E ATLANTIC AVE, DELRAY BEACH, FL 33444</b>			
Date of Arrest <b>2/10/21</b>	Time of Arrest <b>1300</b>	Booking Date <b>02/10/2021</b>	Booking Time <b>13:32</b>	Jail Date	Jail Time	Location of Vehicle
Name (Last, First, Middle) <b>OKTAVEC, GREGORY GERING</b>						
Alias: _____ Alias (Name, DOB, Soc. Sec. #, Etc.)						
Race W - White B - Black	Sex <b>M</b>	Date of Birth <b>01/31/1979</b>	Height <b>6'00</b>	Weight <b>180</b>	Eye Color <b>BROWN</b>	Hair Color <b>BROWN</b>
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)			Complexion <b>LIGHT</b>	Build <b>MEDIUM</b>	Indication of Alcohol Influence Yes <input type="checkbox"/> No <input type="checkbox"/> Unk. <input checked="" type="checkbox"/>	
Local Address (Street, Apt. Number) <b>311 SW 15TH ST A, FT LAUDERDALE, FL 33315</b>			City	State	Zip	Phone <b>(954) 646-2014</b>
Permanent Address (Street, Apt. Number) <b>311 SW 15TH ST A, FT LAUDERDALE, FL 33315</b>			City	State	Zip	Phone <b>(954) 646-2014</b>
Business Address (Name, Street)			City	State	Zip	Phone
D/L Number, State <b>0231287790310 /</b>		Soc. Sec. Number	INS Number	Place of Birth (City, State) <b>JACKSONVILLE, FL</b>		Citizenship
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 <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor	
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 <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor	
<input type="checkbox"/> Parent <input type="checkbox"/> Other: _____ Name (Last, First, Middle)						Residence Phone
<input type="checkbox"/> Legal Custodian _____ Name (Last, First, Middle)						Business Phone
Address (Street, Apt. Number)						City
State						Zip
Notified by: (Name)						Time
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 _____ Value of Property _____
<input type="checkbox"/> Yes, by: _____ <input type="checkbox"/> No: _____						Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Description of Property _____
Drug Activity	S. Sell N. N/A P. Possess	R. Smuggle D. Deliver E. Use	K. Disperse/ 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. Parapharmat./ Equipment S. Synthetic U. Unknown Z. Other
Charge Description <b>AGGRAVATED BATTERY ON 65 YOA/OLDER</b>						Statute Violation Number <b>784.08(2A)</b> Violation of ORD # _____
Drug Activity	Drug Type <b>N</b>	Amount / Unit	Offense #	Counts <b>1</b>	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant / Capias Number
Charge Description						Statute Violation Number
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Warrant / Capias Number
Charge Description						Statute Violation Number
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Warrant / Capias Number
Health / Apparent Physical Condition of Defendant						Any knowledge of the following: <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"/> Released to Parent/Guardian <input checked="" type="checkbox"/> T.O.T. County Jail						PROPERTY - Received By _____ Released By _____ 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 COMTEMPT 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 <i>[Signature]</i>		Name Verification (Printed by Arrestor)	
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other			Name of Arresting Officer (Print) <b>MORALES, WILLIAM</b>		I.D. # <b>1146</b>	
Intake Deputy <i>[Signature]</i>			Transporting Officer <b>MORALES</b>		Agency <b>DBPD</b>	
I.D. #			I.D. # <b>1146</b>		Agency <b>DBPD</b>	
<input type="checkbox"/> COURT <input type="checkbox"/> STATE ATTORNEY <input type="checkbox"/> AGENCY <input type="checkbox"/> CENTRAL RECORDS <input type="checkbox"/> JAIL <input type="checkbox"/> CRIME ANALYSIS <input type="checkbox"/> P. I. O. <input type="checkbox"/> DEFENDANT						SCANNED FEB 11 2021 PAGE 1 OF 1

PROBABLE CAUSE AFFIDAVIT

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

1

JUVENILE

OBTS Number	Agency ORI Number <b>FL 0500400</b>		Agency Name <b>DELRAY BEACH POLICE DEPARTMENT</b>	Agency Report Number <b>4 0 21-000990</b>
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Charge Type Check as many as apply	<input checked="" type="checkbox"/> 1. Felony	<input type="checkbox"/> 3. Misdemeanor	<input type="checkbox"/> 5. Ordinance	Special Notes:
	<input type="checkbox"/> 2. Traffic Felony	<input type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 6. Other	

Name (Last, First, Middle) <b>OKTAVEC, GREGORY GERING</b>	Alias	Race <b>W</b>	Sex <b>M</b>	Date of Birth <b>01/31/1979</b>
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Charge Description <b>784.08(2A) AGGRAVATED BATTERY ON 65 YOA/OLDER</b>	Charge Description
Charge Description	Charge Description

Victim's Name (Last, First, Middle) <b>SACK, MATTHEW ALLAN</b>	Race <b>W</b>	Sex <b>M</b>	Date of Birth <b>10/06/1951</b>
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Local Address (Street, Apt. Number) (City) (State) (Zip) <b>55 TROPIC ISLE DR 31, DELRAY BEACH, FL 33483</b>	Phone <b>(908) 693-3524</b>	Address Source
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Business Address (Name, Street) (City) (State) (Zip)	Phone	Occupation
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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 7 day of February, 2021 at 23:49 (Specifically include facts constituting cause for arrest.)

This incident occurred in the City of Delray Beach, Palm Beach County, FL:

On 01/23/2021 I responded to 290 E Atlantic Ave (Vic and Angelo's) in reference to a disturbance.

Upon arrival, I made contact with Jennifer Sherm and victim Matthew Sack. Sherm advised that she was in a verbal argument with her boyfriend Gregory Oktavec while seated at the outside bar. She advised that at some point during their argument, Oktavec struck Sack for an unknown reason. Sherm was unable to provide the reason for their argument due to her level of intoxication. Sherm was also unable to provide further information about the altercation as well.

I then spoke with Sack about what happened and he was unable to advise what happened due to his injuries he was barely coherent.

A patron of the restaurant requested anonymous stated that the subject Oktavec struck Sack causing him to fall to the ground. The patron also stated that Sack was unable to stand up right away.

I then escorted Sack to the sidewalk and at which point I noticed that Sack's left eye was dark red around his pupil. Officer Bruno observed Sack not able to articulate full sentences and thoughts. Sack also was very drowsy with slurred speech which was not consistent with his single unfinished alcoholic beverage that he was served. The staff advised that he was only seated at the bar for a few minutes and did not finish the only drink that he had ordered.

DBFR responded to the scene to evaluate Sack reference DBFR run number 21000964. DBFR Captain Mahoney told me that Sack had a "blown pupil." DBFR personnel also stated they

SWORN AND SUBSCRIBED BEFORE ME	SIGNATURE OF ARRESTING / INVESTIGATING OFFICER <i>[Signature]</i>
<b>SCHMIDT, JAMES</b> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)	<b>MORALES, WILLIAM (1146)</b> NAME OF OFFICER (PLEASE PRINT)
<u>02/07/2021</u> DATE	<u>02/07/2021</u> DATE

<b>OBTS Number</b>	<b>Agency ORI Number</b> <b>FL 0500400</b>	<b>Agency Name</b> <b>DELRAY BEACH POLICE DEPARTMENT</b>	<b>Agency Report Number</b>
			<b>4   0   21-000990</b>

<b>Charge Type</b> 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	<b>Special Notes</b>
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<b>Name (Last, First, Middle)</b> <b>OKTAVEC, GREGORY GERING</b>	<b>Alias</b>	<b>Race</b> <b>W</b>	<b>Sex</b> <b>M</b>	<b>Date of Birth</b> <b>01/31/1979</b>
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were classifying Sack as a trauma alert.



Later that evening on 01/23/2021 Officer Bruno and I made contact with bar tender Carlos Dorte who was Sack and Oktavec's server during the time of the altercation. Officer Bruno administered a blind photo line up consisting of six photographs that were placed in no particular order. Officer Bruno stated to me that Dorte upon viewing the photo line up he selected photograph number five as the suspect/boyfriend in this incident. The identity of the subject in photograph number five is Gregory Gering Oktavec which is the same name that Sherm provided me of the suspect that struck Sack. Dorte also stated that Sack was seated directly next to the victim.

The following day, Oktavec called DBPD communications to speak with me on his own accord. I spoke with Oktavec via landline to find out his side of what happened. He claimed that Sack grabbed his arm which caused Oktavec to defend himself. Oktavec said that he was defending himself which is why he elbowed Sack. Oktavec stated that he left to get away from his girlfriend and did not intentionally strike Sack.

On 02/05/2021 I responded back to 290 E Atlantic Ave (Vic and Angelos) and retrieved the video surveillance of the incident that was ready for pick up. Upon viewing the footage I observed Sherm sitting at the outside bar and directly to her left is Oktavec. During the surveillance footage, Oktavec is speaking to Sherm and during that conversation, Oktavec looks to his left where the victim was seated. While looking at the victim you can clearly see that he is an elderly citizen which Oktavec would have seen each time he looked at him. During the conversation, Sack gently placed his hand on Oktavec's arm in a non threatening manor. As soon as Sherm placed his hand on Oktavec's left arm, Oktavec immediately looks at Sherm and violently pulls his left arm upward and delivers an aggressive elbow strike to Sherm. Immediately following the strike, an anonymous patron pushed Oktavec out of the bar to prevent further conflict. At no point, did Oktavec make an effort to return to the scene to see if Sherm was okay and speak to the police about this altercation. After viewing this surveillance footage, it was very clear that what Oktavec told me via landline what transpired was false. The surveillance footage clearly shows that Sack did not grab his arm and that Oktavec maliciously attacked Sack causing severe injury.

On 02/10/2021 I met with Oktavec in the DBPD front lobby and conducted an interview. During the interview, I read Oktavec his Miranda Warnings and then proceeded with the interview. Oktavec claims that he was grabbed aggressively by the victim and that he was defending himself. I then showed Oktavec the video surveillance of the incident which clearly showed a different situation from what Oktavec stated.

Due to the above stated facts, I find probable cause to charge Gregory Oktavec with Aggravated Battery On A Subject 65 Years Or Older pursuant to FSS 784.08 (2A).

SWORN AND SUBSCRIBED BEFORE ME  <div style="text-align: center;">   <b>SCHMIDT, JAMES</b>          NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)   <b>02/07/2021</b>          DATE       </div>	<div style="text-align: center;">           SIGNATURE OF ARRESTING / INVESTIGATING OFFICER   <b>MORALES, WILLIAM (1146)</b>          NAME OF OFFICER (PLEASE PRINT)   <b>02/07/2021</b>          DATE       </div>
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**Palm Beach County Sheriff's Office – Arrests Only**

	X	Florida State Statute	Description	Page Number(s)
<b>L/E Exemptions</b>	<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.	
<b>Public Info. Exemptions</b>	<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.	
<b>Florida Rules of Judicial Administration 2.420 (Rule of 23)</b>	<input checked="" type="checkbox"/>	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	<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"/>			
<b>Other</b>	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2021003445	Date: 2/11/2021
	Specialist Name/ID: J. Beck/9007