

Broward County Sheriff's Office

17 004453MM10A MV





CIS#	571701793			BCCN# 13280			7		Boo	king Shee	t Control Date	and Tim	ne
OBTS	608243301 Print Clearance 05/13/17 05 44 06 Prints Yes							Yes	05/13/17 07 51 08				
Arrest #	FL 1701793 Offense Report # 34-1705-075771						Agency FORT LAUDERDALE						
Last Name First Middle	MICH	ALZIK	, PAUL	JAY				****	SSI	N #		~\\	
Race	Sex	Height	Weight	Eyes	Haır	Comp	Age Admitted	DOB	Pla	ce of Birth	State		FDLE
W	М	511	230	HAZ	BRO	LGT	51	7/6/1965	BRO	OKLYN	NEW	YORK	1929163
Permanent Address 624 SE 4TH AVE FT LAUD FL 33304								Months of Residence 384					
Arrest Date	e 05/13/17 04 18 00 Place of Arrest 624 SE 4 AVE Arresting Officer 1893 SALAH							-					
Inmate Logo	ged Date	05/13/1	7 05 15 1	15	Inmate I	Log Type	FULL INTAKE	~S.1	Place Ad	dmitted	MAIN		
Intake Com	ments SP/C0	0/29/54 -	11107 W	VC - 433	8			(3)	9	>			
Alias Last n	name, First, Mi	ddle, DO	B VIRO	GA, PAU	L, JAY,0	7/06/1965					33	بصب	
Alias Last n	name, Fırst, Mı	ddle DO	B VIE	SA, PAU	L, ,07/06	71966					덮	7 M.B.Y	δο —
Alias Last n	name, First Mi	ddle, DO	B VIRO	GA, PAU	L, J 07/0	6/1965					DROW'S		7
Alias Last n	name, Fırst, Mı	ddle, DO	B VIRO	SA, PAU	L, ,07/06	3/1965					25	=	\Box
Warrants Of	fficer ld bs043	38									(- , · - ,	===	三
Scars,Marks	s,Tattoos		~~									, <u>=</u>	CEMINAT
Release Date/Time Release Reason							Release Authorized By						
Charge No	Charge	Initiation	n Date	Stat	ute	,	Warrant/Capias	Level	мс	В Туре	•	Bond	Amount
1		5/13/17 0			03-1a2(I	•	_	1M	D	HOLD F	FOR MAG	\$0 00	
Charges	BATTERY-C	550	ODILY HA			C VIOL	Comments	_					
Booking O	ff ID bs121:	20		Con	nty			Judg	_				

BROWARD COUNTY ARREST# 17-01793

COMPLAINT AFFIDAVIT

SHADED FIELDS MUST BE ANSWERED IF DEFENDANT NOT IN CUSTODY

29-54

ARREST FORM

OBTS#

Offense Report 34-1705-075771 Local ID# FDLE FRI FT LAUDERDALE PD Defendant s Last Name Middle SUF Alias/Street Name Citizenship VIRGA **MICHALZIK** PAUL JAY Race Sex Wat DOB Age W M 6'00 51 07/06/1965 Permanent Address Scars Marks TT 624 SE 4TH AV, FORT LAUDERDALE, FL 33304 Residence Type (1) City Local Address 624 NE 4TH AV, FORT Place of Employment Lenath (2) County (4) Out of State (RESTAURANT) ARUBA LAUDERDALE, FL 33304 How long defendant in Breathalyser By/CCN Date/Time Arrested Arresting Officer(s) CCN Reading Place of Arrest Broward County 51 Y 624 SE 4TH AV 05/13/2017 04 18 SALAH, COREY A (1893)Officer Injured Y N X Unit PMD Y N X Zone Shift Beat Trans Unit Transporting Officer/CCN Pick-up Time Time Arrived/BSO 99 70 24 9507 Δ 04 23 04 18 1893 E-Heroin P-Paraphernalia Activity M-Manufacture/ TYPE / ACTIVITY Type N N/A T Traffic N Indication of UK H-Hallucinogen Equipment N-N/A Produce/Cultivate Alcohol Influence X A-Smuagle P-Possess A-Amphetamine M-Marijuana K-Dispense/ S-Synthetic D-Deliver N Drug Influence 🗵 🗌 B-Barbiturate O-Opium/Deriv U Unknown S-Sell Distribute E-Use C Cocaine Z-Other B-Buy Z-Other VIN# Defendant's Vehicle Make Year Color ___ Attach Defendant's Vehicle Towed To Other identifiers or remarks Photo Offenses Charged Count # WC# / Citation # (if applicable) FS or Capias/Warrant # BATTERY-CAUSE BODILY HARM - DOMESTIC VIOLENCE 784 03-1A2(HG) **Probable Cause Affidavit** Before me this date personally appeared <u>SALAH, COREY A</u> (1893)who being first duly sworn deposes and says that on 2017 at 624 SE 4TH AV, FORT LAUDERDALE, FL 33301 (crime location) , (year) the above named defendant committed the above offenses charged and the facts showing probable cause to believe the same are as follows On 5/13/17 at approximately 0245 I responded to 624 NE 4th Ave in reference to a domestic disturbance. Upon arrival I made contact with Paul Michalzik who immediately stated that he "didn't touch her". I then made contact with that Paul Michalzik did choked her from behind pinning her neck between his bicep and stated that Michalzik attacked her forearm causing her to lose consciousness. against her will and she signed an Affidavit of Prosecution indicating that she does * * Continued * Under penalties of perund I declare that I have read the foregoing and that the facts stated therein are true and correct to the best of my knowledge and belief SALAH, COREY A (1893) Patrol Officer/Afflant's Signature Officer's Name/CCN Officer's Division STATE OF FLORIDA COUNTY OF BROWARD Sworn to (or affirmed) and subscribed before me this _ 13 day of May OFFICER SALAH, COREY A _ (name and title), who is personally known to me or has produced L EO Title/Rank and CCN Notary Public Deputy Clerk of the Court or Assistant State Attorney (SEAL) Print Type or Stamp Commissioned Name of Notary Public Seventeenth Judicial Circuit FIRST APPEARANCE/ARREST FORM Orig -Court

Broward County

BSO DB-#2 (Revised 05/00)

State of Florida

(SHOULD ADDITIONAL SPACE BE NEEDED, USE THE PROBABLE CAUSE AFFIDAVIT CONTINUATION (BSO DB#2a))

State Attorney 2nd Filing Agency Arresting Agency

COURT COPY

BROWARD CONTY	-2-	☐ COI PROBABLE C				
ARREST # 17-01793	<u> </u>		OBTS#			
Filing Agency FT LAUDERDALE PD	Offense Report 34-1705-075771	Local ID#	FDLE	FBI	SS #	
Defendant s Last Name	54-1703-073771 First	Middle	e SUF	Alias/Street Name		Citizenship
MICHALZIK	ſ	L JAY	6 551	Allas offeet Harife		Gitizeriariip
Name of victim(s) (if corporation exact 1						
				1		
Count #	Offenses (Charged		WC# / Citation # (if a	applicable) FS	S or Capias/Warrant #
	*	* * CF	EDAC	E 1 * * *		
		SEI	CFAU			
					-	
		Proba	able Cause Affid	avit		
Before me this date personally app	eared SALAH CORE	L			a first duly sworn den	oses and says that on
13 day of May (yea			T LAUDERDALE		g mor day orrow, dep	(crime location)
he above named defendant comm					as follows	(Crime location)
desire prosecution	. I observed	red marks	on both s	ides of	neck. P	aul
Michalzik stated t						
				ed medical treat		de baonea
iim. michailin m	ia no rrebn ma	176 011 11111	una rerub	od modical broa	J	
		PUB			CLO BRIME B COUNTY	1 & MIENIKAL
wear the above statement is confident for the above statement is confident. Ifficer/Affiant's Signature TATE OF FLORIDA	2 act and true to the best of n	ny knowledge and bu SALAH, COL Officer's Name/C	REYA (1893)		Officer's Division	<i>Patrol</i>
COUNTY OF BROWARD						
Sworn to (or affirmed) and subscrib	ed before me this	13 day of	<u>May</u>		·)	

Print Type or Stamp Commissioned Name of Notary Public

Seventeenth Judicial Circuit **Broward County**

State of Florida

BSO DB-#2a (Revised 05/00)

FIRST APPEARANCE/ARREST FORM

_____ (name and title) who is personally known to me or has produced

Title/Rank and CCN

(SEAL)

COURT COPY

ORIGINAL as identification

State Attorney Filing Agency

Arresting Agency

