

J#0546907

24 CT 2164

7#255

A D M I N I S T R A T I O N	ORIS Number		ARREST / NOTICE TO APPEAR		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1		JUVENILE	
	Agency ORI Number 0500400		Agency Name Delray Beach Police Department		Agency Report Number (N.T.A.'s only) 4, 0, 24-001701							
	Charge Type Check as many as apply ☐ 1. Felony ☐ 2. Traffic Felony ☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other		If Weapon Seized Enter Type UNARMED		Multiple Clearance Indicator 1							
	Location of Arrest (Including Name of Business) 100-BLK SE 6TH AVE, Delray Beach, FL 33444				Location of Offense (Business Name, Address) 100 SE 6TH AVE BLK, DELRAY BEACH, FL 33483							
	Date of Arrest 02/07/2024		Time of Arrest 02:15		Booking Date 02/07/2024		Booking Time 04:06		Jail Date 2/7/24		Jail Time 4:00	
	Name (Last, First, Middle) HOROSCHAK, DAVID		Sex M		Date of Birth 09/24/1974		Height 5'08		Weight 250		Eye Color BROWN	
	Race W - White B - Black O - Oriental/Asian		Complexion LIGHT		Build LARGE		Hair Color BROWN		Indication of Alcohol Influence Yes ☐ No ☒ Unk ☐		Indication of Drug Influence Yes ☐ No ☒ Unk ☐	
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)				Marital Status U		Religion					
	Local Address (Street, Apt. Number) 3828 NANLYN FARM CIR, DOYLESTOWN, PA 18902				(City) (State) (Zip)		Phone		Residence Type: 1. City 2. County 3. Florida 4. Out of State 4			
	Permanent Address (Street, Apt. Number) 3828 NANLYN FARM CIR, DOYLESTOWN, PA 18902				(City) (State) (Zip)		Phone		Address Source VERBAL			
Business Address (Name, Street) (City) (State) (Zip)				Phone		Occupation						
D/L Number, State 23388957 / PA		Sec. Sec. Number		INS Number		Place of Birth (City, State) GLENRIDGE, NJ		Citizenship US				
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile				
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile				
☐ Parent ☐ Legal Custodian		Name (Last, First, Middle)		Residence Phone								
Address (Street, Apt. Number)		(City) (State) (Zip)		Business Phone								
Notified by (Name)		Date		Time		JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated						
Released To (Name)		Relationship		Date		Time						
The above address was provided by ☐ defendant and/or ☐ 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				
☐ Yes, by: ☐ No						Property Crime? ☐ Yes ☒ No		Description of Property		Value of Property		
Drug Activity N. N/A P. Possess		S. Sell B. Buy T. Traffic		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/Derv		P. Paraphernalia/ Equipment S. Synthetic		U. Unknown Z. Other				
Charge Description DRIVING WHILE UNDER INFLUENCE		Statute Violation Number 316.193(1)A		Violation of ORD #								
Drug Activity		Drug Type N		Amount / Unit		Offense #		Counts		Domestic Violence ☐ Y ☒ N		
Charge Description		Statute Violation Number		Violation of ORD #								
Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence ☐ Y ☐ N		
Charge Description		Statute Violation Number		Violation of ORD #								
Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence ☐ Y ☐ N		
Health / Apparent Physical Condition of Defendant						Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries Explain:						
Check which applies ☐ Released O.R. ☐ Released to Parent/Guardian ☒ T.O.T. County Jail ☐ Posted Bond ☐ South County Mental Health						PROPERTY - Received By		Released By		Released To		
Transported By STROUD						Date Transported 02/07/2024		Time Transported 03:59		Other		
☒ INSTRUCTION NO. 1 - Mandatory appearance in court ☐ INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.						Location (Court, Room) South County 200 W Atlantic Ave Delray Beach, FL 33444		Court Date and Time 02/29/2024 08:30:00		No Photo Available		
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 CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.												
Signature of Defendant (or Juvenile and Parent/Custodian)						Date Signed						
HOLD for Other Agency						Signature of Arresting Officer		Name Verification (Printed by Arrestee)				
☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other						Name of Arresting Officer (Print) STROUD, ELIZABETH		ID # 1191		(PRINT)		
Initial Deputy Bunillo 18312						Pouch #		Transporting Officer ELIZABETH STROUD		ID # 1191		
						Agency DBPD		Witness here if subject signed with an "X".		PAGE 1 OF 1		

☐ COURT ☐ STATE ATTORNEY ☐ AGENCY ☐ CENTRAL RECORDS ☐ JAIL ☐ CRIME ANALYSIS ☐ P.I.O. ☐ DEFENDANT

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 7th DAY OF February, 2024 AT 02:00 ☒ AM ☐ PM
IN THE CITY OF DELRAY BEACH, COUNTY OF PALM BEACH, STATE OF FLORIDA

Case No: 24001701 Defendant: David Horoschak
Agency: Delray Beach Police Arresting Ofc: ELIZABETH STROUD

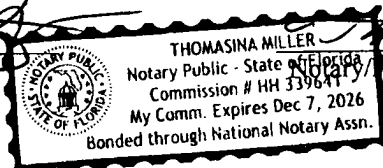
PERSONAL CONTACT/DRIVING PATTERN/OBSERVATIONS OF DRIVER:

On 02/07/2024 at 0200 hours, Officer Uplegger was traveling northbound in the 100 block of SE 6th Ave, in her marked patrol vehicle, when she noticed a vehicle (2024 Kia Niro FL Tag: 60BKSX) driving southbound on SE 6th Ave. SE 6th Ave is a two-lane roadway made for northbound, one-way traffic only. She activated her lights and made contact with white male David Horoschak (sole occupant). As she approached the driver, she noticed his slurred speech and asked the driver where he was coming from. He told her that he was coming from a friend's house. She then asked the driver if he knew he was driving down the wrong side of the road and he stated that he is not from the area. She noticed a pink wristband on his wrist which was from the Silverball Retro Arcade located at 19 NE 3rd Ave, Delray Beach. She then asked when he was at the arcade in which he stated two hours prior. She asked the driver if he had consumed any alcoholic beverages in which he stated he had a couple while at the arcade.

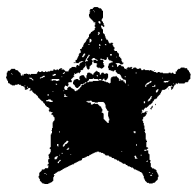
Upon my arrival, I made contact with the Horoschak who was still seated inside of the vehicle. His vehicle had been facing southbound in the northbound left lane. Horoschak advised me that he had been coming from a friend's house and was not familiar with the area. When he spoke, his speech was slurred. I asked him to step out of the vehicle and noticed that he had been unsteady. I asked if he would submit to roadside tasks, and he agreed after he was read his taylor warnings. While outside of the vehicle, I could smell an odor of an unknown alcoholic beverage emanating from his breathe as he spoke.

The foregoing instrument was sworn to before me this 7th day of February, 2024
by Officer ELIZABETH STROUD

Arresting Officer



Police Officer (FSS 117.10)



PALM BEACH COUNTY SHERIFF'S OFFICE
DUI TESTING FACILITY
INFORMATION SHEET

PBSO CASE #: 24-032178 PBSO ZONE: 4-11

AGENCY CASE #: 24001701 DHSMV CRASH #: _____

TIME OF CRASH/STOP: 0200 DATE: 02/07/2024 DAY: Wednesday

DEFENDANT: David Horoschak RACE: W SEX: M

HGT: 508 WGT: 250 DOB: 09/24/1974

LOCATION: 100-blk SE 6th Ave

ARRESTING OFC: ELIZABETH STROUD ID: 1191 AGENCY: Delray Beach Police

DIVISION: Patrol

NOTIFIED BY COMM: Y

ARRIVAL AT FACILITY: 0248

TIME OF ARREST: 0215

BREATH RESULTS:

1. .108
2. .111
3. N/A
4. N/A

TESTING OFC. ID: 41017

PBSO VIDEOTAPE #: N/A

SUBJECT: _____ CASE NUMBER: _____

IMPLIED CONSENT FOR DUI IN A MOTOR VEHICLE

NOTE: READ ONLY THE PARAGRAPH APPLICABLE TO THE TYPE OF TEST YOU ARE REQUESTING.

I am now requesting that you submit to a lawful test of your **BREATH** for the purpose of determining its alcohol content.

OR

I am now requesting that you submit to a lawful test of your **URINE** for the purpose of determining the presence of chemical or controlled substances.

NOTE: READ ONLY IF THE SUBJECT DOES NOT COMPLY WITH YOUR REQUEST.

I am _____ of the _____

If you refuse to take the test I have requested of you, your driving privilege will be suspended for a period of one (1) year for a FIRST REFUSAL, or eighteen (18) months if your driving privilege has been PREVIOUSLY SUSPENDED, or if you have been PREVIOUSLY FINED under s. 327.35215, for refusing to submit to a lawful test of your breath, urine, or blood. Additionally, if you refuse to take the test I have requested of you, and if your driving privilege has been previously suspended, or if you have been previously fined under s. 327.35215, for a refusal to submit to a lawful test of your **breath, urine** or blood, you will be committing a misdemeanor, in addition to any other penalties which can be imposed by law.

Refusal to submit to the test I have requested is admissible into evidence in any criminal proceeding.

Do you understand what I have just read to you? YES <or> NO Do you still refuse to submit to this test? YES <or> NO

NOTE: IF THE SUBJECT POSSESSES A COMMERCIAL DRIVER'S LICENSE (CDL), READ THE FOLLOWING,

If you are a Commercial Driver License (CDL) holder or were driving a Commercial Motor Vehicle (CMV), your refusal to submit to testing will result in the loss of your commercial driving privilege for a period of one year from today. If this is your SECOND REFUSAL, you will be permanently disqualified from holding a CDL or operating a CMV.

Do you understand what I have just read to you? YES <or> NO Do you still refuse to submit to this test? YES <or> NO

SUBJECTS SIGNATURE: (X) _____

CONSTITUTIONAL WARNINGS

I AM REQUIRED TO WARN YOU BEFORE YOU MAKE ANY STATEMENTS THAT YOU HAVE THE FOLLOWING RIGHTS:

1. You have the right to remain silent and not answer any questions.
2. Any statement must be freely and voluntarily given.
3. You have the right to the presence of a lawyer of your choice before you make any statement and during any questioning.
4. If you cannot afford a lawyer, you are entitled to the presence of a court appointed lawyer before you make any statements and during any questioning.
5. If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.
6. I can make no threats or promises to induce you to make a statement. This must be of your own free will.
7. Any statement can and will be used against you in a court of law.

SUSPECT'S SIGNATURE: (X) _____

WHITE: STATE ATTY.

YELLOW: DHSMV

PINK: CENTRAL RECORDS

GOLD: JAIL

SUBJECT: _____ CASE NUMBER: _____

QUESTIONS AND ANSWERS

I AM NOW GOING TO ASK YOU SOME QUESTIONS. WITH THESE RIGHTS IN MIND, YOU MAY ANSWER SOME OF, ALL OF, OR NONE OF THE FOLLOWING QUESTIONS AS YOU LIKE.

WERE YOU OPERATING A MOTOR VEHICLE AT THE TIME OF THE STOP/ACCIDENT? _____

WHERE WERE YOU GOING? _____

WHAT STREET OR HIGHWAY WERE YOU ON? _____

DIRECTION OF TRAVEL? _____ WHERE DID YOU START? _____

WHAT TIME DID YOU START? _____ WHAT TIME IS IT NOW? _____

WHAT IS TODAY'S DATE? _____ WHAT DAY OF THE WEEK IS IT? _____

WHAT COUNTY AND CITY ARE YOU IN NOW? _____

WHEN DID YOU LAST EAT? _____ WHAT DID YOU EAT? _____

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? _____

HOW MUCH DO YOU WEIGH? _____ HAVE YOU BEEN DRINKING? _____ WHAT? _____

HOW MUCH? _____ WHERE? _____ WITH WHOM? _____

WHEN DID YOU HAVE YOUR FIRST DRINK? _____ AND YOUR LAST DRINK? _____

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? _____

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? _____ ARE YOU UNDER THE INFLUENCE? _____

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? _____ HOW MUCH? _____

WHAT? _____ WHERE? _____ WHEN? _____

WHAT LINE OF WORK ARE YOU IN? _____ WHEN DID YOU LAST WORK? _____

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? _____ WHAT? _____

ARE YOU SICK OR INJURED? _____ WHAT'S WRONG? _____

DO YOU LIMP? _____ DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? _____

WERE YOU IN AN ACCIDENT TODAY? _____

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? _____ WHEN? _____

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? _____ WHO? _____ WHY? _____

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? _____ WHAT? _____ WHEN? _____

DO YOU HAVE: ☒ EPILEPSY? _____
☐ GLASS EYE? _____
☐ FALSE TEETH? _____
☐ EAR INFECTION? _____
☐ INNER EAR TROUBLE? _____
☐ DIABETES? _____

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? _____

DO YOU TAKE INSULIN? _____ IF SO, WHEN WAS YOUR LAST INJECTION? _____

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? _____ WHERE? _____

INTERVIEWER: _____

ROADSIDE TASKS

Case No: 24001701

Defendant: David Horoschak

HORIZONTAL GAZE NYSTAGMUS:

6 of 6 clues

Left Eye:

- ☒ Lack of smooth pursuit
- ☒ Distinct & sustained nystagmus at maximum deviation
- ☒ Onset prior to 45 degrees

Right Eye:

- ☒ Lack of smooth pursuit
- ☒ Distinct & sustained nystagmus at maximum deviation
- ☒ Onset prior to 45 degrees

Notes:

No clues observed

WALK AND TURN: 1 of 8 clues

During the instruction phase, the subject swayed while he maintained the position. During the walking stage, he several heel to toe steps

ONE LEG STAND: 3 of 4 clues

During the task, the subject used his arms for balance and swayed while balancing. He put his foot down on 1005, 10011, 10015, and 10017.

FINGER TO NOSE: 1 of 4 clues

One the first command of left, the tip of the subject's finger touched the side of his nose. On the third command of right, the subject starts to lift his left hand but then switches to his right hand.

ROMBERG/ALPHABET: 0 of 4 clues

Subject completed task.

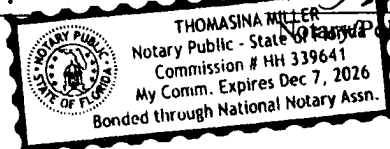
The defendant (David Horoschak) was handcuffed and taken into custody after he failed to dispel my suspicion that he was operating the vehicle under the influence.

I transported her to the Breath Alcohol Testing facility at the Palm Beach County Jail. Upon my arrival, I completed the required 20-minute observation. I then requested that Horoschak provide a sample of his breath for the purpose of determining alcohol content. He agreed and blew .108 on the initial and .111 on the secondary. Based on the above facts, probable cause does exist to charge defendant with one count of DUI pursuant to FSS 316.193(1)A. I issued the defendant the following citations: DUI and Wrong Way on a One Way.

Upon completion of the booking process, the defendant was turned over to Palm Beach County Jail.

The foregoing instrument was sworn to before me this 7th day of February, 2024
by Officer ELIZABETH STROUD

Arresting Officer



Police Officer (FSS 117.10)

**FLORIDA DEPARTMENT OF LAW ENFORCEMENT
ALCOHOL TESTING PROGRAM
BREATH ALCOHOL TEST AFFIDAVIT**

Instrument Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH CO SO
Instrument Serial Number: 80-006477 Software: 8100.27
Date of Test: 02/07/2024

Date of Last Agency Inspection: 01/12/2024

Observation Period Began: 02:48

Subject's Name: DAVID T HOROSCHAK

DOB: 09/24/1974 Sex: M

The subject was observed for at least twenty-minutes prior to the administration of the breath test to ensure that the subject did not take anything orally and did not regurgitate.

Results:

Test	g/210L	Time
Diagnostics Check	OK	03:16
Air Blank	0.000	03:17
Control Test	0.080	03:17
Air Blank	0.000	03:17
Subject Sample #1	0.108	03:18
Air Blank	0.000	03:19
Air Blank	0.000	03:20
Subject Sample #2	0.111	03:21
Air Blank	0.000	03:22
Control Test	0.081	03:22
Air Blank	0.000	03:23
Diagnostics Check	OK	03:23

Cylinder Lot: 06723080A5
Exp: 04/05/2025

State of Florida, County of Palm Beach

Personally appeared before me the undersigned authority, who () is personally known to me or () produced _____ as identification, and who after being placed under oath, states:

I THOMASINA E MILLER, hold a valid Breath Test Operator permit issued by the Florida Department of Law Enforcement, I administered the above breath test to the subject named above in accordance with Chapter 11D-8, Florida Administrative Code, and this form is a true and accurate report of that breath test.

Breath Test Operator: Thomasina Miller Date: 2/7/24
Signature

Sworn to (or affirmed) before me this 07 day of February, 2024

[Signature] Off. E. Stroud
Signature of Notary Public-State of Florida Printed Name of Notary Public-State of Florida

Note: Pursuant to section 117.10, Florida Statutes, law enforcement officers, correctional officers, traffic accident investigation officers and traffic infraction enforcement officers are notaries public when engaged in the performance of official duties. In accordance with section 316.1934(5), F.S., this completed form is admissible without further authentication and is presumptive proof of the results herein. To be used in accordance with Section 316.1934(5), F.S., and in administrative proceedings pursuant to 322.2615, F.S.

TESTING FACILITY TASK REPORT

AGENCY: DBPD

SUBJECT: HOROSCHAK, DAVID .T.

CASE NUMBER: 24-032178

DATE: Feb 7, 2024

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 03:13

ENDING TIME: 03:29

BREATH TESTS RESULTS: 1) .108 TIME 03:18 A.M. ☒ P.M. ☐ 2) .111 TIME 03:21 A.M. ☒ P.M. ☐
3) N/A TIME N/A A.M. ☐ P.M. ☐ 4) N/A TIME N/A A.M. ☐ P.M. ☐

BREATH OPERATOR: T. MILLER #41017

MAINTENANCE TECHNICAN: J. KARLECKE# 6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: PRONOUNCED

ATTITUDE: CALM, QUIET

CLOTHING: BLUE SHIRT, KHAKI PANTS, GRAY SNEAKERS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

COMMENTS:

ARRIVED AT CENTER A/O BEGAN THE 20 MINUTE OBSERVATION PERIOD AT 02:48 HRS.

SUBJECT: AGREED TO TAKE TEST.

A/O: READ RIGHTS.

SUBJECT: STATED HE UNDERSTOOD RIGHTS.

TECH: READ TEST RESULTS.

SUBJECT: STATED HE UNDERSTOOD TEST RESULTS.

A/O: CONDUCTED Q & A

SUBJECT: ANSWERED SOME QUESTIONS.

WITNESS LIST

Case No: 24001701 Defendant: David Horoschak

Arresting Officer: ELIZABETH STROUD
Address: Delray Beach Police Department
Phone Numbers: Home: 561-243-7800 Work:

Name: OFC Emily Uplegger
Address: Delray Beach Police Department
Phone Numbers: Home: 561-243-7800 Work:
Can testify to: Initial Stop and Back up Officer

Name: Officer Kevin Garcia
Address: Delray Beach Police Department
Phone Numbers: Home: 561-243-7800 Work:
Can testify to: Back up Officer

Name:
Address:
Phone Numbers: Home: Work:
Can testify to:

Name:
Address:
Phone Numbers: Home: Work:
Can testify to:

Name:
Address:
Phone Numbers: Home: Work:
Can testify to:

Name:
Address:
Phone Numbers: Home: Work:
Can testify to:

Name:
Address:
Phone Numbers: Home: Work:
Can testify to:



Palm Beach County Sheriff's Office

Florida State Statute Exemption Sheet

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	☐	119.071(4)(c)	Undercover personnel	
	☐	119.071(2)(e)	Confession	
Public Info. Exemptions	☐	FL Const. Art. I, s. 16(b)(5)	Marsy's Law – victim information shall be redacted. The term "victim" also includes the victim's lawful representative, the parent or guardian of a minor, or the next of kin of a homicide victim. The term "victim" does not include the accused (ref. page 99 of the CRTM for additional information)	
	☐	119.071(2)(j)	Home/employment telephone number, home/employment address, or personal assets of a person who has been the victim of sexual battery, aggravated child abuse, aggravated stalking, harassment, aggravated battery or domestic violence	
	☐	119.0712(2)	Personal information contained in a motor vehicle record	
	☐	316.650(11)	Driver information contained in a uniform traffic citation	
	☐	119.071(4)(d)2.a.	Home addresses, telephone numbers, dates of birth, and photographs of active/former LE personnel, spouses, and children	
Florida Rules of Judicial Administration 2.420	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers	2
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses	
	☐			
	☐			
Other	☐			
	☐			
	☐			
	☐			

REVIEW COMPLETED BY

Booking Number: 2024003453

Date: 2/7/2024

Specialist Name/ID#: C. Daniels/ 30347