VOLUSIA COUNTY SHERIFF'S OFFICE

	Juvenile		Hat	e Crime				I		DENT RE	PORT	-		<u> </u>	1 of	5 Pages
	Gang			erly Abuse	/ Exploitation								Agency Report Nul 180021901	mber		
	Domestic Vi		VOR _			-	ency ORI N	Number				Zone #	100021001	Telephone Handle		
ŀ	Reported: Day	Date	;	Time (mi	I.) Time	Dispatched	640000 (mil.)	Time A	rrived (m	il.) Time Co	mpleted (mil.)	35 Nature of C	Call (Report Type)	Call? (T.H.C.)	2. N	0 2
-	Wednesday		9-2018	1435	1439			1459		1627		FRAUD	Fraud	(
	Incident Type: 1. Felony 2. Traffic Felony	4. Tra M	sdemeanor affic isdemeano	9. C		Incident: Day From Sunday	·	ate <u>-16-2018</u>		me (mil.) 00	TO Wednes	Date Date	Time (-2018 1435	(mil.) Occurr D - Day N - Nig		iown U
DATA	Offense #1	71.5	Statute Vio 331.09	lation Num	ber				Descriptio	on ounterfeit Bank	Bill/Note/Ch	eck/Draf			A - Attempted C - Committe	
	#2		Statute Vio		ıber				Descriptio	on ⁻ heft - \$300 - <	ΦΕ 000				A - Attempte C - Committe	
VENT	#2 1 812.014(2)(C)1 Incident Location (Street, Apt. Number)									City				Zip	0 - Committe	
Ы	3624 W INTL SPEEDWAY BLVD Business Name / Area Identifier # Prem. Entered						orug Relate			nol Related	ONA BEACH Forced Entry		Arson-Inhabited	32124	Arson-Atte	
- F	CHEVRON	<u> </u>				0	. N/A 1. 2.	Yes No <mark>0</mark>	0. N/	A 1. Yes 2. No 0	1. Yes 3. Att 2. No	tempted	1. Occupied 3 2. Unoccupied	3. Abandoned	1. Y 2. N	
	Location Type	01.Resid 02.Apart 03.Resid	Type Code lence-Singl ment/Cond lence/Othe	e 05.Co o 06.Ga r 07.Lie	onvenience Sto as Station quor Sales	10.Dep 11.Spe	permarket ot/Discoun ecialty Sto	re	14.Com	mercial/Office Bld strial/Mfg.	19.Jail/Pris	/University 22 son 23	.Airport Bus/Rail Terminal Construction Site	25.Parking Lot/Ga 26.Highway/Roady 27.Park/Woodland	vay 30. s/Field 88.	Motor Vehicle Other Mobile Unknown
	06 V/W Code	04.Hotel		08.Ba n/Subject T	ar/Nightclub Гуре		ia Store/H ss/Phone		16.Stora	ade	20.Religio Race		Other Structure Sex Resid	28.Lake/Waterway	99. Residence	Other Status
(0)		N-Next of K D-Other	1. Ju	venile	4. Business 5. Governmen		siness/Wo II		lessage ext of Kir	P. Pager S. School			M-Male 0. NA F-Female 1. Cit			
ODES	R-Reporting Per		2. L.I 3. Ac		6. Church 9. Other							lian	U-Unknown 2. Co		2. Par. Ye 3. Non-Re	sident
S	Means of Attack F-Firearm K-Knife/Cutting	0-0	Other Dang	erous	Extent o 00.N/A c. 01.Guns	03.1	_aceration Jnconscio			oss. Internal Injury oss of Teeth	y 09.Abrasio 10.No Visit		Domestic Violenc 1. Yes	e Victim Rela S-Spouse P-Parent	tionship to Off B-Sibling O-Other Fam	Z-Other
	Offense Indica		V/W Cod		02.Stabb		Poss.Brok	en Bones	08.B	urns		Serious Injury	2. No (First)	C-Child	H-Co-Habitar	
SS	1. #1 3. Bo		V	1	4					,	CHEVRON		(1130)			(Middle)
111	Address (Street, 3624 W INTL	•		VD						City DAYT	ONA BEACH	State	Zip 32124		ce Phone 38-3350	
I/WITNI	Business/School				mber)		City		Ş	State	Zip		Address Type	Business/School/Ot		Phone Type
VICTIM	Other Contact In	fo (Time A	vailable, In	terpreter, e	etc.)					psis of Involveme			1			
	If Victim Type	Race	Se	x	Date of Birth		Age	Ethnicity	IBUS	Res. Type		Means of Attack	Extent of Injury	Domestic Violend	e Relatio	nship
	1, 2, or 3 Offense Indicato		V/W Cod	de #	V. Type	Nature of C	L Call (for Vi	l ctim, if diffe	erent from	n Incident)	Name (Last/Bu	isiness)	(First)			(Middle)
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NL	3624 W INTL	SPEED	WAY BL				City				ONA BEACH		32124	(386) 7	38-3350	Dhana Tura
~ -	Business/School/Other Address (Street, Apt. Number) City SAME AS ABOVE									Sidle	Ζιρ		B	Business/School/Oth	ier Phone	Phone Type
Ö		Other Contact Info (Time Available, Interpreter, etc.) NO EMAIL PROVIDED														
\geq				terpreter, e	etc.)					psis of Involveme	nt					
	If Victim Type 1, 2, or 3	ROVIDE Race	D Se	x	Date of Birth		Age	Ethnicity		RE OWNER Res. Type		Means of Attack	Extent of Injury	Domestic Violence	e Relatio	nship
	If Victim Type 1, 2, or 3 Offense Indicato 1. #1 3. Bo	ROVIDE Race U	D	x	Date of Birth 04-01-1968	Nature of C	50	U	STO	RE OWNER Res. Type			Extent of Injury (First)	Domestic Violend	ce Relatio	nship (Middle)
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	2. #2		D-Defen Age		ssing Person) Height		1 Height	3 Weight		DRECK To Weigh		Color	1	<u>FIMOTHY</u>	Hair Color		JOH		W len Name	Μ	Ν	
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SECTION	FL Cloth	K620810 hing (Describe)	984040							Sc	ars/Marks/1	attoos	(Type	/Describe)			Scars/	Marks/T	attoos (Typ	e/Descri	be)	
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SUBJECT	Ċ	May Be With:		Physic	cal Condition:				Mental	Condition				Doctor	Name:				Dentist Na	me:		
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0,	MIS	2. Parents 3. Involunta		Victim 7. Voluntary			Yes			1. Yes				1. Yes		1	Yes			1. Yes		
		4. Disabled		Adult		2.1	No			2. No				2. No			No			2. No		
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	Offen	person; and this a nse Indicator	Subject (Code		Co		Subj. Ty	/pe Na	ame (Last)			(First)			(Mido	dle)	Race	Sex	Ethr	licity
	1. #1 2. #2	3		dant (Mi	ssing Person)																	
	Date	e of Birth	Age	To Age	Height	To F	leight	Weight		To Weigh	Eye C	Color			Hair Color			Maid	len Name			
	Nick	name / Street Nam	e		P	lace of E	Birth - C	ity	Cour	nty	Stat	e	Emp	loyer/Other	/School		I		Occupati	on		
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NO	Drive	er's License State/	Number			S	Social Sec	urity Num	ber			0	ther II	D Number							D Туре	
SECTION	Cloth	hing (Describe)								Sc	ars/Marks/1	attoos	(Туре,	/Describe)			Scars/	Marks/T	attoos (Typ	e/Descri	be)	
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		Date of Last Con	act	Date of Emand	cipation	Cautio	on	Caution F	Reason						Personal I	labits (D	rugs / Alc			12.0	<u>Allel Age</u>	
SUBJECT	ŀ	May Be With:		Physic	cal Condition:			T	Mental	Condition	:			Doctor	Name:				Dentist Na	me:		
BJE	SING	la side et Tra					ul Diau				- /											
SU	SSIN	Incident Typ 1. Runaway		6. Disaster			ul Play spected?			Missing	Before?			Fingerprints Available?	5	P	hoto Avail	able?		Dental I Availab		
	M	 Parents Involunta 	ſy	Victim 7. Voluntary	/		Yes			1. Yes				1. Yes			Yes			1. Yes		
	뜨	4. Disabled 5. Endange	ed	Adult 8. Unknowr	n	2. 8.	No Unknown			2. No 8. Unkno	own		4	2. No		2.	No			2. No		
		Ι.				(1	Printed)								(Signature		, that I h	ava rar	orted the	ahove r	arson a	s a missing
		person; and this	agency has	s my permiss	ion to enter t	`	/-	statewide	e alert.						Orginature		y that i h					s a missing
	1	BWC recor	ding																			
	2 3	On 09/19/2	018 at 14	459 hours	Deputy I	=rland	dson re	espond	led to	the V(CSO Or	erati	ons	center i	in refere	ence t	o a fra	ud wl	hich had	loccu	irred a	t the
Щ		Chevron st			· · · · · · · · · · · · · · · · · · ·																	
NARRATIVE	4 5	advised the	e following	g:																		
RR/	6 7	Sometime	during the	e night on	09/16/20	18			entere	d the	store ar	nd rea		sted to c	rash a c	heck	from \/	أعياله	a Count	v Der	artme	nt of
NA	8	Correction																				
	9	and provid				-																
	10 Final	check was	frauduler	nt. The ch	eck was r	nade	out to		for	the ar	nount o	t \$37	3.92	2. The c	neck wa	as froi	n the "	Cour	nty of Vo	bulisa	depa	rtment of
ЧE	Stat	us: S	atus Codes:	1.Arrest/Ad	ult 2.Arre	est/Juv.	3.Exce	eptional/A	dult 4	4.Exceptio	onal/Juv.	5.Clos		6.Unfound			Victim Adv	vocate	Т	iad		Referral
ADMINISTRATIVE			ooke With:					Date:		Time:				NCIC Entry		_ Т.Т. В			Date	:	By	
IST	Con	necting Report Nur	nber Ag	ency			ional Forn ttached:		arrative	X SA	707	Person	s 🚺	Property	Veh.	/Tow Sh	eet	Other	Describe:			
NIN	Offic	cer Reporting - Prin	ted			1	Officer F	Repring		• •					ID. Nu			Unit			Date	
ADI		ndson, Patrick						12							8745			1B33			09-19-2	018
-	Offic	er Reviewing - Pri	ited (If Applica	able)			Officer F	Reviewing	g - Signat	ture (If Ap	plicable)	1			ID. Nun	nber		Unit			Date	

VOLUSIA COUNTY SHERIFF'S OFFICE

NARRATIVE / SUPPLEMENT

Page <u>3</u> of <u>5</u> Pages

<	Report Date	Report Time	Orig. Reported Date	Nature of Call (for Incident)	Agency Report Number	1.Original	
ш	09-19-2018	1435	09-19-2018	FRAUD	180021901	2.Supplement	1
	11 corrections	Novr obtained	statomonts from t	bo bank stating the check was f	audulant. Navr's bank did not reimburse her for the a	mount of the	

corrections. Navr obtained statements from the bank stating the check was fraudulent. Navr's bank did not reimburse her for the amount of the
 check.

Sometime on 09/18/2018, Timothy Korecky (S1) entered the store, attempting to cash a check from Volusia County department of corrections. Korecky provided Navr with the check and his driver's license. Navr identified Korecky through his driver's license picture. Due to the previous fraudulent check, Navr contacted her bank before providing Korecky with the currency. After a phone call with her bank and observing the check had the same misspelling ("County of Voulisa"), Navr refused to provide Korecky with the currency or return his driver's license. Korecky fled the store, getting into his red Mazda truck, bearing FL tag IXYJ92. Navr had a clear and unobstructed view of both Korecky and the passenger, who she identified as from the copy of her driver's license picture from the original transaction. Navr took a picture of the license plate of the vehicle as it left the scene. The check provided by Korecky did not have a memo number.

Navr provided Deputy Erlandson with a copy of the check cashed by along with her driver's license, paperwork from the bank detailing that the
 check cashed by was fraudulent, the check Korecky attempted to cash, and Korecky's driver's license. Navr completed a sworn written
 statement detailing her account of the event and indicating she wished to pursue criminal charges.

26 Deputy Erlandson attempted to located both Korecky and with negative results.

28 Deputy Erlandson determined probable cause existed to arrest Korecky for uttering a forgery and for uttering a forgery and grand theft.

30 Deputy Erlandson later submitted the copy of the check cashed by and the check cashed by Korecky into the District 3 North evidence locker.

32 Deputy Erlandson's BWC recording was later uploaded to the digital evidence database.

34 Case Status: Pending contact with S1 and S2

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NARRATIVE / CONTINUATION

Ш		l Case us Codes: 1.Arrest/Adult	2.Arrest/Juv.	3.Exceptional/Adult	4.Exceptional/Juv.	5.Closed	6.Unfounded	Victim Adv	vocate Tria	d SA Referral		
RATIV	DCF Hotline CAC Spok	ke With:		Date:	Time:		/ NCIC Entry / NCIC Cancel	T.T. BOLO	Date:	By:		
NIST	Connecting Report Numbe	er Agency		Additional Forms Attached: Narrative SA 707 Persons				Property Veh./Tow Sheet Other Describe:				
M	Officer Reporting - Printed			· Officer Reporting - Signature				D. Number	Unit	Date		
A	Erlandson, Patrick			1//			8	5745	1B33	09-19-2018		
	Officer Reviewing - Printed	d (If Applicable)		Officer Eev lewing - Sig	nature (If Applicable)		1	D. Number	Unit	Date		

7th. Judicial Circuit 707 103 Charging Affidavit - Volusia	2 P.E.	Nature of Call: FRA Confidential:		port Date: 09-1 t #	9-2018 Report Ti		District 03 1_of4
ARREST 🕅 NOTICE TO APPEAR 🗌 AFFIDA	VIT 🕅 C.C.	ADULT 🗙 JI		Court Case Number:			
(ORI) FL: FL0640000 Agency Name	VOLUSIA COUNTY	SHERIFF'S OFFICE		Agency Case Number: 1	80021901		
FCIC/NCIC Check? X Yes No OBTS #			U.C.R:	Date Arrested: 24/	20/2013	Time of Arrest	15
ADDRESS OF ARREST (Street, City, State, Zip):			Arrested:	2 - 1	1	ID O	
NAME (Last)	(First)	(Middle)	By: D/S	t Esland	son	Number: 🕹 Sex:	Race:
DOB: Age: Driver's Lic./	TIMOTHY	JOHN	State:	Year	S.S.# -	M	W
11-04-1998 19 ID No.: K6208109 Height: Weight Hair.	84040 Eyes:	P.O.B.	FL	Expires:			Chatamant
5'11 145 BRO	BRO	(City, State, Country):			PA		Statement: Yes No
Scars, Marks, Tattoos:		Business & Occupation:					Citizenship: Yes X No
Probation: Yes No X Sexual Predator:	Yes 🗌 No 🗙	English: Ye	es 🛛 No 🗌		Deaf/Mute:	Yes No	
Address - Mailing/Permanent (STREET, APT. 1236 B AVENUE E	NUMBER)		CITY) RMOND BEACH	(STATE) H FL	ZIP CODE 32174		SIDENCE PHONE 9) 207-8218
Address - Local (STREET, APT.	NUMBER)		CITY)	(STATE)	ZIP CODE		SIDENCE PHONE
Address - Other (Employer/School) (STREET, APT.	NUMBER)	()	CITY)	(STATE)	ZIP CODE	BUS	SCHOOL PHONE
CHARGES DOMESTIC VIOLENCE? Yes Attachment	s: Affidavit(s)?	Statement(s) NTA	A Schedule	Report Traffie	c Infraction(s)	DUI Total Char	1
#1 Charge:		ES/ORD		Citation No.:		Bond:	ges: 1
up Charge:		831.09		Citation No.:		2500 Bond:	
#Z FEL							
#3 Charge: FEL		FS/ORD:		Citation No.:		Bond:	
CO-DEFENDANT Co-Def #1. Arrested? Y	Fel. Misd. T	Traf. Ord. NTA	Co-Def #2. Ar	rested? Y N	Fel. Misd.	Traf. Ord.	
#1 NAME (Last) (First	st)	(Middle)	Race:	Sex:	DOB:		Age:
#2 NAME (Last) (First	st)	(Middle)	Race:	Sex:	DOB:		Age:
NARRATIVE The undersigned cert	ifies and swears th	at there is probable o	ause to believ	e the above-na	med defendant		
on the <u>19</u> day of <u>September</u> at <u>3624 W INTL SPEEDWAY</u> DAYTONA BEACH	,2018	, at approxin			a.m.		
 BWC recording On 09/19/2018 at 1459 hours, Deputy Erlandson Chevron station located at 3624 W Intl Speedway the following: Sometime during the night on 09/16/2018, 	ay Blvd. Upon arri	e VCSO Operations val, Deputy Erlands the store and reque	son contacted	the store owr	ner, Nawoot Kav	vr (R1), who	advised
 Corrections. Depresented the clerk with the ch and provided with \$373.92 in exchange for was fraudulent. The check was made out to corrections. Navr obtained statements from the Sometime on 09/18/2018, Timothy Korecky (S1) Korecky provided Navr with the check and his d fraudulent check, Navr contacted her bank before 	the check. The ne for the amou bank stating the c) entered the store river's license. Na	r's license. The cle ext day, Kavr attemp unt of \$373.92. The check was frauduler e, attempting to cas ivr identified Koreck	rk positively ic pted to cash t e check was fr nt. Navr's ban th a check fro	dentified the check with rom the "Coun k did not reim m Volusia Cou	rom her driver's her bank and w ty of Voulisa" de burse her for the unty department se picture. Due	license phot vas informed epartment of e amount of t t of correction to the previou	the check the check.
	YOU NEED NOT AP	PEAR IN COURT BUT THE REVERSE SIDE	MUST COMPL		FINE, AND C	OSTS	
I AGREE TO APPEAR IN COURT HEREIN TO ANSWER THE OFFEI	NSE CHARGED OR TO	PAY THE FINE INDICAT	ED LUNDERSTA	ND THAT SHOLL	D I WILLFULLY FAIL	TO APPEAR	
BEFORE THE COURT AS REQUIRED, OR PAY THE LISTED FINE, I	MAY BE HELD IN CON	NTEMPT OF COURT AND	D A WARRANT FO	OR MY ARREST W		IVE	
		SIGNA		E PARENT OR CUS	DI	SP.	
SIGNATURE OF DEFENDANT					No No	TATION D.	
	Date		RELATIONSHIP	TO JUVENILE			
Sworn to and subscribed before me, the undersigned this 19 day of September 2018 Name:	I swear/affing the above	statements are correct and t	true			Rt Thumb	
Notary Public Law Enforcement or Corrections Officer	10		MPLAINANT'S SIGN	NATURE			
Personally Known X Produced Identification	ERLANDSON, PATE NAME (PRINTED)	RICK REILLY		8745 ID NUMBER		-	
Type of Identification: D/S A. BAYNE							
OFFICIAL USE ONLY	Inmate Number & Facility:						

	arrative 707. upplement	в	Arrest	Adult	Court Case			
De	fendant (Last)		(First)	(Middle)	Agency Case		Page # 3	of 4
	me: KORECKY	DOMESTIC	TIMOTHY	JOHN	Number: 180021901			Total
	CHARGES	VIOLENCE? Yes	Attachments: A	ffidavit(s)?	Statement(s) NTA Sche	edule Report Traff	ic Infraction(s) Bond:	Charges: 1
#	Charge:				FS/ORD:			
#						Citation No.:	Bond:	
#	Charge:		FEL MI		FS/ORD:	Citation No.:	Bond:	
16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	getting into his red identified as fro left the scene. The Navr provided Dep check cashed by detailing her accour Deputy Erlandson a Deputy Erlandson a Deputy Erlandson a Deputy Erlandson's	Mazda truck, bearin om the copy of her of check provided by I uty Erlandson with a was fraudulent, t int of the event and i attempted to located determined probable ater submitted the of BWC recording wa	In FL tag IXYJ92 driver's license p Korecky did not a copy of the check he check Koreck indicating she w I both Korecky a e cause existed to copy of the check as later uploaded	2. Navr had a c bicture from the have a memo eck cashed by ky attempted to ished to pursue and with n to arrest Korec k cashed by d to the digital of	along with her driver's o cash, and Korecky's driv e criminal charges. egative results. cky for uttering a forgery an and the check cashed the evidence database.	w of both Korecky and the took a picture of the lice s license, paperwork from ter's license. Navr complements license. Navr complements license for uttering a forg	he passenger, we ense plate of the m the bank deta eted a sworn we gery and grand t	vho she e vehicle as it iling that the ritten statement heft. ence locker.
	n to and subscribed before me,		l swea	r/affirm the above sta	atements are correct and true			Right Thumb
this .	16 ACC	er, 2018	· / /	h				
Nam	19			/	0.000			
		aw Enforcement Officer			OFFICER'S/COMPLAINANT'S S	IGNATURE		
Pers	onally Known	Produced Identification		ANDSON, PATRIC	K REILLY	8745		
Туре	of Identification:		NAME	(PRINTED)		ID NUMBER		