

		ARREST / NOTICE TO APPEAR Juvenile Referral Report				1. Arrest <input type="checkbox"/> 3. Request for Warrant <input type="checkbox"/>		2. N.T.A. <input type="checkbox"/> 4. Request for Capias <input type="checkbox"/>		3 <input type="checkbox"/> Juvenile <input type="checkbox"/>		N <input type="checkbox"/>	
ADMINISTRATION	OBTS Number		Agency ORI Number FL 0500300		Agency Name BOYNTON BEACH POLICE DEPT.		Agency Report Number 34-21-008027					Multiple Clearance Indicator	
	Charge Type: Check as many as Apply. <input 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 <input type="checkbox"/>		Location of Arrest (Including Name of Business)		Location of Offense (Business Name, Address) 550 N. Congress Ave. Boynton Beach, FL 33426								
	Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle						
	Name (Last, First, Middle) Beska, Bryan		Alias (Name, DOB, Soc. Sec. #, Etc)										
DEFENDANT	W - White <input type="checkbox"/> B - Black <input type="checkbox"/>	I - American Indian <input type="checkbox"/> O - Oriental / Asian <input type="checkbox"/>	Race W	Sex M	Date of Birth 07/27/1982	Height 5'07	Weight 155	Eye Color blue	Hair Color brown	Complexion med	Build med		
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)										Marital Status	Religion	Indication of: Alcohol Influence <input type="checkbox"/> Drug Influence <input type="checkbox"/>
	Local Address (Street, Apt. Number) 2670 NE 13th Ter.		(City) Pompano Beach		(State) FL	(Zip) 33064	Phone () -		Residence Type 1. City 3. Florida 2. County 4. Out of State		3		
	Permanent Address (Street, Apt. Number)		(City)		(State)	(Zip)	Phone () -		Address Source TLO				
	Business Address (Street, Apt. Number)		(City)		(State)	(Zip)	Phone () -		Occupation				
	DL Number State		INS Number		Place of Birth New York, NY		Citizenship USA						
	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 Name (Last) (First) (Middle)		<input type="checkbox"/> Legal Custodian		<input type="checkbox"/> Other		Residence Phone						
	Address (Street, Apt. Number)		(City)		(State)	(Zip)	Business Phone						
JUVENILE	Notified by: (Name)		Date	Time	Juvenile Disposition 1. Handled/Processed within Dept. and Released 2. TOT HRS/DYS 3. Incarcerated								
	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 561-355-2526) informed of any change of address: <input type="checkbox"/> Yes, By: (Name) <input type="checkbox"/> No: (Reason)										School Attended	Grade	
	Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property				Value of Property						
	Drug Activity		S. Sell <input type="checkbox"/> B. Buy <input type="checkbox"/> T. Traffic <input type="checkbox"/>	R. Smuggle <input type="checkbox"/> D. Deliver <input type="checkbox"/> E. Use <input type="checkbox"/>	K. Dispense/Distribute <input type="checkbox"/>	M. Manufacture/Produce/Cultivate <input type="checkbox"/>	Z. Other <input type="checkbox"/>	Drug Type N. N/A <input type="checkbox"/> A. Amphetamine <input type="checkbox"/>	B. Barbiturate <input type="checkbox"/> C. Cocaine <input type="checkbox"/> E. Heroin <input type="checkbox"/>	H. Hallucinogen <input type="checkbox"/> M. Marijuana <input type="checkbox"/> O. Opium/Deriv. <input type="checkbox"/>	P. Paraphernalia/Equipment <input type="checkbox"/> S. Synthetic <input type="checkbox"/>	U. Unknown <input type="checkbox"/> Z. Other <input type="checkbox"/>	
CHARGE	Charge Description ROBBERY WITH A WEAPON (attempted)		Counts 1	Domestic Violence <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Statute Violation Number 812.13(1)and(2)(b)		Violation of ORD#						
	Drug Activity N	Drug Type N	Amount/Unit	Offense # 21-008027	Warrant/Capias Number		Bond						
	Charge Description AGGRAVATED BATTERY (deadly weapon)		Counts 1	Domestic Violence <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Statute Violation Number 784.045(1)(a)1, 2 and (2)		Violation of ORD#						
	Drug Activity N	Drug Type N	Amount/Unit	Offense # 21-008027	Warrant/Capias Number		Bond						
CHARGE	Charge Description		Counts	Domestic Violence <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Statute Violation Number		Violation of ORD#						
	Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number		Bond						
	Charge Description		Counts	Domestic Violence <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Statute Violation Number		Violation of ORD#						
	Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number		Bond						
CHARGE	Charge Description		Counts	Domestic Violence <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Statute Violation Number		Violation of ORD#						
	Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number		Bond						
	Charge Description		Counts	Domestic Violence <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Statute Violation Number		Violation of ORD#						
	Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number		Bond						
NOTICE TO APPEAR	<input type="checkbox"/> Instruction No. 1 <input type="checkbox"/> Instruction No. 2 You need not appear in Court but must comply with instruction on reverse side.		Location (Court, Room Number, Address) South County Courthouse, 200 West Atlantic Ave, Delray Beach, FL 33444										
	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.		Month	Day	Year	Time	<input type="checkbox"/> A.M. <input type="checkbox"/> P.M.						
	Signature of Defendant (or Juvenile and Parent/Custodian)												
ADMIN.	HOLD for other Agency Name:		Signature of Arresting Officer		Date Signed		Name Verification (Printed by Arrestee) (PRINT)						
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal	<input type="checkbox"/> Related Arrest <input type="checkbox"/> Other:	Name of Arresting Officer (Print) Detective Gleicher		LD.# BBPD	BU#							
	Intake Deputy	I.D.#	Pouch #	Transporting Officer	I.D.#	Agency	Witness here is subject Signed with an "X".						
												Page 1 OF 1	

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1 Arrest	3 Request for Warrant	3	Juvenile	N
Agency ORI Number FL0500300		Agency Name BOYNTON BEACH POLICE DEPT.		Agency Report Number 34-21-008027				
Charge Type Check all that 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		Special Notes
Name (Last, First, Middle) Beska, Bryan				Alias	Race W	Sex M	Date of Birth 07/27/1982	
Charge Description ROBBERY WITH A WEAPON (attempted)				Charge Description AGGRAVATED BATTERY (deadly weapon)				
Victim's Name (Last, First, Middle) Marsy's Law Invoked				Race	Sex	Date of Birth		
Local Address (Street, Apt Number)				Address Source				
Business Address (Name, Street)				Occupation				
The undersigned swears and avers 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...								
<input type="checkbox"/> Committed the below act in my presence. <input type="checkbox"/> Was observed by _____ Who told _____ That he/she saw the arrested person commit the below act. <input type="checkbox"/> Confessed to _____ Admitting the below facts <input checked="" type="checkbox"/> Was found to have committed the below act, resulting from my (described) investigation.								
On The 11th Day of February 20 21 At 8:34 <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M.								

Boynton Beach Police officers responded to 550 N Congress Ave (Best Buy), Boynton Beach, FL, 33426 in reference to an armed Robbery complaint. BBPD Communications advised it occurred in the parking lot and the victim was hit in the head with a pipe.



Officers located the victim in the south end of the parking lot outside of his vehicle (Black Chevy Trailblazer bearing FL NKE-X24). The victim stated that he just dropped off his friend at Red Lobster (700 N Congress Ave), which is all located within the Boynton Town Center Plaza, for a birthday party and then parked his vehicle in the Best Buy parking lot. The victim then exiting his vehicle to have a cigarette and to check the trunk for a work shirt. As the victim was preparing to open the trunk, he could hear foot steps approaching him and was immediately struck on the right side of the head with a blunt object or possibly a pipe. At that time, the victim attempted to defend himself and grabbed the suspect by the hair, swinging him around causing the suspect's head to strike the back of his vehicle. In the middle of the scuffle the suspect attempted to rob the victim by reaching into the victim's left pocket. The suspect did not obtain any of the victim's belongings because all his valuables were in his vehicle. After the suspect hit his head on the back of the victim's vehicle he fled westbound in the parking lot. The victim described the suspect as a white male, approximately 5'10", and between 30 and 40 years of age. After an extensive search the suspect was never located.

CSI Stidham responded and processed the crime scene. The victim's injuries included a red bruise on the right side of his head near his ear, and a scrape under his right arm, near his armpit. CSI Stidham photographed the injuries and also collected the following swabs from the victim:

1. Left front shorts pocket
2. Neck
3. Right hand
4. Left hand
5. Oral swab (standard)

On 02/15/2022, I received a CODIS notification, which indicated that the swab taken from the victim's right hand matched a DNA profile taken from Bryan Beska.

The foregoing instrument was sworn to or affirmed and subscribed before me

 Notary Public, Clerk of Court, Officer (F.S.S. 117.10) Date <u>2 11/1/2022</u>	 (Signature of Arresting / Investigative Officer) Detective Gleicher (Print name of Arresting / Investigative Officer) Date <u>2 11/8/22</u>	Page 1 OF 2
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OETS Number		PROBABLE CAUSE AFFIDAVIT		1 Arrest	3 Request for Warrant	3	Juvenile	N
Agency ORI Number FL0600300		Agency Name BOYNTON BEACH POLICE DEPT.		2 NTA	4 Request for Copies			
Charge Type Check off that Apply		Agency Report Number 34-21-008027		Special Notes				
<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				
Name (Last, First, Middle) Beska, Bryan				Age	Race W	Sex M	Date of Birth 07/27/1982	
Charge Description ROBBERY WITH A WEAPON (attempted)				Charge Description AGGRAVATED BATTERY (deadly weapon)				
Victim's Name (Last, First, Middle) Marsy's Law Invoked				Date of Birth				
Local Address (Street, Apt Number)				(City)	(State)	(Zip)	Phone	Address Source
Business Address (Name, Street)				(City)	(State)	(Zip)	Phone	Occupation
I, the undersigned, certify and swear 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... <input type="checkbox"/> Committed the below acts in my presence. <input type="checkbox"/> Was observed by _____ Who told _____ That he/she saw the arrested person commit the below acts. <input type="checkbox"/> Confessed to _____ Admitting the below facts <input checked="" type="checkbox"/> Was found to have committed the below acts, resulting from my (described) investigation.								
On the 11th Day of February 20 21 At 8:34 <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M.								

MARSY'S LAW INVOKED

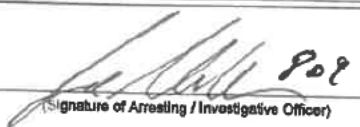
Confidential Info Contained

On 02/17/22, I conducted a taped statement with the victim at the Boynton Beach Police Department. The victim provided details about the incident that were consistent with the information he gave on the night of the incident. The victim was then given a six person photo lineup, with all six subjects having similar facial features and the victim positively identified Beska in position #2. I then showed a larger color picture of Beska to the victim and the victim, again, confirmed that was the subject who attacked him and stated that he does not know him and has never seen him before.

Based on the investigation, Beska will be charged with attempted robbery with a weapon pursuant to F.S.S. 812.13(1)and(2)(b) and aggravated battery with a deadly weapon pursuant to F.S.S. 784.045(1)(a)1, 2 and (2).

The foregoing instrument was sworn to or affirmed and subscribed before me


 Notary Public, Clerk of Court, Officer (F.S.S. 117.16)
 Date 2/18/2022


 (Signature of Arresting / Investigative Officer)
 Detective Gleicher
 (Print name of Arresting / Investigative Officer)
 Date 2/18/22