
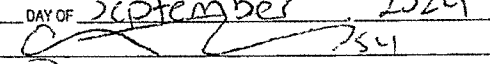
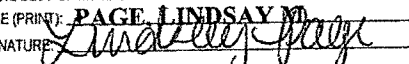


934

ARREST SWORN COMPLAINT HOLD

CONFIDENTIAL VICTIM INFORMATION

JUVENILE NOTICE TO APPEAR

OBTS NUMBER: 0108067257		EIGHTH JUDICIAL CIRCUIT			AGENCY CASE REPORT NUMBER: 24-1141		
NAME OF SUBJECT (LAST, FIRST, MI): MENDELKUCH, PAUL JERRY				AHAS/MAIDEN: Case # 012024MM001864A			
911 HOME ADDRESS (STREET, APARTMENT NUMBER, ETC.): 1326 NW 52ND TER		CITY: GAINESVILLE		STATE: FL	ZIP CODE: 32605	TELEPHONE NUMBER: (352) 328-4868	
BUSINESS / SCHOOL ADDRESS (STREET, APARTMENT NUMBER, PO BOX, ETC.):						TELEPHONE NUMBER: (352) 375-7222	
MAILING ADDRESS (PO BOX, ETC. IF DIFFERENT THAN 911 ADDRESS):		SCARS, MARKS, TATTOOS, FACIAL HAIR, UNIQUE PHYSICAL FEATURES (LOCATION, TYPE, DESCRIPTION):					
RACE: <input checked="" type="checkbox"/> WHITE <input type="checkbox"/> AMERICAN INDIAN <input type="checkbox"/> BLACK <input type="checkbox"/> ASIAN / ORIENTAL	SEX: M	DATE OF BIRTH: 10/15/1993	HEIGHT: 6'01	WEIGHT: 130	HAIR COLOR: BLACK	EYE COLOR: BROWN	
COMPLEXION: BROWN	BUILD:	DRIVERS LICENSE / STATE ID NUMBER: M524690933750	STATE OF DL / ID: FL	SOCIAL SECURITY NUMBER:	PHOTO NUMBER:	PLACE OF BIRTH: Gainesville, FL	
COUNTRY OF CITIZENSHIP: U.S.	SUBJECT'S OCCUPATION: DELIVERY BOY	SPN NUMBER:	AGENCY ORI NUMBER: 0010600	SO ID / AGENCY ID / NUMBER: 82430393	BOOKING NUMBER: 24-00179		
LOCATION OF ARREST: 3200 HULL RD, GAINESVILLE, FL 32603		DATE OF ARREST: 9/12/2024	TIME OF ARREST (MILITARY): 0108	DATE OF BOOKING: 0861 9/12/24 0134	TIME OF BOOKING (MILITARY):		
SUBJECT IDENTIFIED BY WHOM (VICTIM, WITNESS, LEO, ETC.): PAGE, LINDSAY			SUBJECT'S NAME VERIFIED BY (PHOTO ID, FAMILY MEMBER, KNOWN TO OFFICER, ETC.): 145				
C O M M E N T S	#1 (NAME):	DATE OF BIRTH:	RACE:	SEX:	COURT NUMBER:	<input type="checkbox"/> ARRESTED <input type="checkbox"/> SWORN COMPLAINT <input type="checkbox"/> NTA	
	#2 (NAME):	DATE OF BIRTH:	RACE:	SEX:	COURT NUMBER:	<input type="checkbox"/> FELONY <input type="checkbox"/> MISDEMEANOR <input type="checkbox"/> TRAFFIC CASE <input type="checkbox"/> JUVENILE: <input type="checkbox"/> YES <input type="checkbox"/> NO	
J U V E N I L E	JUVENILE DISPOSITION: <input type="checkbox"/> RELEASED TO JAC <input type="checkbox"/> ISSUED NTA AND RELEASED	NAME OF PARENT / GUARDIAN (NOTIFY):	Case: 2024 MM 001864 A  00083872135 Dkt: AF-X			ALACHUA COUNTY FL WORK TELEPHONE NUMBER:	
	PARENT / GUARDIAN HOME ADDRESS (STREET, APARTMENT #, PO BOX, ETC.):	STATE:	ZIP CODE:	HOME TELEPHONE NUMBER:			
W I T N E S S E S	#1 (NAME):	ADDRESS:					
	#2 (NAME):	ADDRESS:					
C H A R G E S	OFFENSE DESCRIPTION: STALKING (SIMPLE)	<input type="checkbox"/> FELONY <input checked="" type="checkbox"/> MISDEMEANOR <input type="checkbox"/> TRAFFIC <input type="checkbox"/> NTA	COMPLETE STATUTE / ORDINANCE NUMBER: 784.048(2)		VICTIM NOTIFICATION: <input checked="" type="checkbox"/> ARREST: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> RELEASE: YES <input type="checkbox"/> NO		
	<input type="checkbox"/> WARRANT <input type="checkbox"/> JUVENILE PU ORDER <input type="checkbox"/> CIVIL ORDER <input type="checkbox"/> CITATION <input type="checkbox"/> CAPIAS NUMBER:	DATE OF OFFENSE: 09/11/2024	TIME OF OFFENSE: 02:43	BAIL AMOUNT:	VICTIM'S TELEPHONE NUMBER:		
1	VICTIM (NAME):	ADDRESS (STREET, APARTMENT NUMBER, PO BOX, ETC.):	CITY:	STATE:	ZIP CODE:		
C H A R G E S	OFFENSE DESCRIPTION:	<input type="checkbox"/> FELONY <input type="checkbox"/> MISDEMEANOR <input type="checkbox"/> TRAFFIC <input type="checkbox"/> NTA	COMPLETE STATUTE / ORDINANCE NUMBER:		VICTIM NOTIFICATION: <input type="checkbox"/> ARREST: YES <input type="checkbox"/> NO <input type="checkbox"/> RELEASE: YES <input type="checkbox"/> NO		
	<input type="checkbox"/> WARRANT <input type="checkbox"/> JUVENILE PU ORDER <input type="checkbox"/> CIVIL ORDER <input type="checkbox"/> CITATION <input type="checkbox"/> CAPIAS NUMBER:	DATE OF OFFENSE:	TIME OF OFFENSE:	BAIL AMOUNT:	VICTIM'S TELEPHONE NUMBER:		
2	VICTIM (NAME):	ADDRESS (STREET, APARTMENT NUMBER, PO BOX, ETC.):	CITY:	STATE:	ZIP CODE:		
P R O M I S E S	THE FOLLOWING INCIDENT OCCURRED AT (ADDRESS / LOCATION): 3150 HULL RD	CITY OF: GAINESVILLE		COUNTY OF: ALACHUA		STATE OF: FLORIDA	
	On September 10, 2024, at approximately 1850 hours, I responded to a stalking call at Southwest Recreation Center. I made contact with the victim who advised she was being followed and harassed by the defendant since October of 2023. The defendant willfully, maliciously, and repeatedly stalked and harassed the victim by sending her aggressive and profane text messages when the victim ended their friendship in October 2023. The victim advised that due to the aggressive text messages and						
N T A	<input type="checkbox"/> MANDATORY APPEARANCE IN COURT AT:	DATE OF APPEARANCE:	TIME OF APPEARANCE:	<input type="checkbox"/> AM <input type="checkbox"/> PM			
	I AGREE AND PROMISE TO COMPLY AND ANSWER TO THE CHARGES AND INSTRUCTIONS SPECIFIED IN THIS NOTICE TO APPEAR. WILLFUL REFUSAL TO ACCEPT AND SIGN THIS NOTICE TO APPEAR MAY RESULT IN PHYSICAL ARREST. I UNDERSTAND MY SIGNATURE IS NOT AN ADMISSION OF GUILT OR WAIVER OF MY RIGHTS.	DEFENDANT (SIGNATURE):	DATE:				
J U R A T	SWORN TO AND SUBSCRIBED BEFORE ME THIS: 11 DAY OF September 2024	SIGNATURE: 	TITLE: LEO	I SWEAR THE ABOVE, AND REVERSE AND ATTACHED PAGES AND STATEMENTS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.	NAME (PRINT): PAGE, LINDSAY M	SIGNATURE: 	
				AGENCY: UNIVERSITY OF FLORIDA POLICE	LEO ID NUMBER: 145		

ARREST SWORN COMPLAINT HOLD

CONFIDENTIAL VICTIM INFORMATION

JUVENILE NOTICE TO APPEAR

OBTS NUMBER:	SUPPLEMENT	SPN NUMBER:
AGENCY ORI NUMBER: 0010600	EIGHTH JUDICIAL CIRCUIT	AGENCY CASE REPORT NUMBER: 24-1141

NAME OF SUBJECT (LAST, FIRST, MI): MENGELKOCH, PAUL JERRY	ALIAS / MAIDEN:
RACE: <input checked="" type="checkbox"/> WHITE <input type="checkbox"/> AMERICAN INDIAN <input type="checkbox"/> BLACK <input type="checkbox"/> ASIAN / ORIENTAL	SEX: M DATE OF BIRTH: 10/15/1993 HEIGHT: 6'01 WEIGHT: 130 JAIL NUMBER:
SO ID / AGENCY ID / NUMBER: 82430393	

#3 (NAME):	ADDRESS:	TELEPHONE NUMBER:
#4 (NAME):	ADDRESS:	TELEPHONE NUMBER:

OFFENSE DESCRIPTION:	<input type="checkbox"/> FELONY <input type="checkbox"/> MISDEMEANOR <input type="checkbox"/> TRAFFIC <input type="checkbox"/> NTA	COMPLETE STATUTE / ORDINANCE NUMBER:	VICTIM NOTIFICATION: ARREST: <input type="checkbox"/> YES <input type="checkbox"/> NO RELEASE: <input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> WARRANT <input type="checkbox"/> JUVENILE PU ORDER <input type="checkbox"/> CIVIL ORDER <input type="checkbox"/> CITATION <input type="checkbox"/> CAPIAS NUMBER:	DATE OF OFFENSE:	TIME OF OFFENSE:	BAIL AMOUNT:
VICTIM (NAME):	ADDRESS (STREET, APARTMENT NUMBER, PO BOX, ETC.):	CITY:	STATE: ZIP CODE:

OFFENSE DESCRIPTION:	<input type="checkbox"/> FELONY <input type="checkbox"/> MISDEMEANOR <input type="checkbox"/> TRAFFIC <input type="checkbox"/> NTA	COMPLETE STATUTE / ORDINANCE NUMBER:	VICTIM NOTIFICATION: ARREST: <input type="checkbox"/> YES <input type="checkbox"/> NO RELEASE: <input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> WARRANT <input type="checkbox"/> JUVENILE PU ORDER <input type="checkbox"/> CIVIL ORDER <input type="checkbox"/> CITATION <input type="checkbox"/> CAPIAS NUMBER:	DATE OF OFFENSE:	TIME OF OFFENSE:	BAIL AMOUNT:
VICTIM (NAME):	ADDRESS (STREET, APARTMENT NUMBER, PO BOX, ETC.):	CITY:	STATE: ZIP CODE:

OFFENSE DESCRIPTION:	<input type="checkbox"/> FELONY <input type="checkbox"/> MISDEMEANOR <input type="checkbox"/> TRAFFIC <input type="checkbox"/> NTA	COMPLETE STATUTE / ORDINANCE NUMBER:	VICTIM NOTIFICATION: ARREST: <input type="checkbox"/> YES <input type="checkbox"/> NO RELEASE: <input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> WARRANT <input type="checkbox"/> JUVENILE PU ORDER <input type="checkbox"/> CIVIL ORDER <input type="checkbox"/> CITATION <input type="checkbox"/> CAPIAS NUMBER:	DATE OF OFFENSE:	TIME OF OFFENSE:	BAIL AMOUNT:
VICTIM (NAME):	ADDRESS (STREET, APARTMENT NUMBER, PO BOX, ETC.):	CITY:	STATE: ZIP CODE:

OFFENSE DESCRIPTION:	<input type="checkbox"/> FELONY <input type="checkbox"/> MISDEMEANOR <input type="checkbox"/> TRAFFIC <input type="checkbox"/> NTA	COMPLETE STATUTE / ORDINANCE NUMBER:	VICTIM NOTIFICATION: ARREST: <input type="checkbox"/> YES <input type="checkbox"/> NO RELEASE: <input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> WARRANT <input type="checkbox"/> JUVENILE PU ORDER <input type="checkbox"/> CIVIL ORDER <input type="checkbox"/> CITATION <input type="checkbox"/> CAPIAS NUMBER:	DATE OF OFFENSE:	TIME OF OFFENSE:	BAIL AMOUNT:
VICTIM (NAME):	ADDRESS (STREET, APARTMENT NUMBER, PO BOX, ETC.):	CITY:	STATE: ZIP CODE:

multiple phone calls, she blocked the defendant's phone number. After the victim blocked the defendant's phone number, she stated that he began confronting her in person to include at her running practices, at her work, and at establishments both on and off the University of Florida property to include her hometown of Miami. The defendant lives in Gainesville and had no apparent reason for being in Miami. These events happened from November 2023 to current, with the defendant last contacting the victim in person on 09/09/2024. During these confrontations, the victim advised that the defendant would attempt to isolate her from her friend group by creating derision and mistrust with her friends. The actions of the defendant serve no legitimate purpose towards the victim.

Due to the actions of the defendant, the victim has sustained substantial emotional distress. The victim is uncomfortable walking to her classes and is "terrified" that the defendant will figure out where she lives. The victim stated she is scared that he may hurt her or kidnap her, and she does not know what the defendant is capable of.