

COMPLAINT/ARREST AFFIDAVIT – CIRCUIT/COUNTY COURT – PINELLAS COUNTY, FLORIDA

OBTS #	REPORT # SO20-18630		DOCKET # 1827823	
Person ID	310945530		SSN# [REDACTED]	
Charge Description	☐ Felony ☒ Misdemeanor ☐ Warrant ☐ Traffic ☐ Ordinance	Traffic Citation # (if any)		Court Case #
Charge	DISORDERLY INTOXICATION (DISTURBANCE)		20-00875-MM-1	
Defendant's Name (Last, First, Middle)	DOB	Sex	Race	Ht
LIPPLY, ADINA MARIE	12/20/1995	F	W	5
Wt	Hair	Eyes	Skin	
10	BLN	BLU		
Alias	DL #	State	Scars/Marks/Tattoos/Physical Features	
	L-140-013-95-960-0	FL		
Local Address (Street, City, State, Zip Code)	Telephone	Place of Birth	Citizenship	
4550 ABDELLA LANE HOLIDAY FL 34690	727-277-1788	FL	USA	
Permanent Address (Street, City, State, Zip Code)	Telephone	Employed by / School		
4550 ABDELLA LANE HOLIDAY FL 34690	727-277-1788			
Weapon Seized Type	Indication of Drug Influence	Indication of Mental Health Issues	Indication of Alcohol Influence	
☐ Yes ☒ No	☐ Y ☒ N ☐ UNK	☐ Y ☒ N ☐ UNK	☒ Y ☐ N ☐ UNK	
Co-Defendant's Name (Last, First, Middle)	DOB	Sex	Race	In Custody ☐ Yes ☐ No
				☐ Felony ☐ Misdemeanor
Co-Defendant's Name (Last, First, Middle)	DOB	Sex	Race	In Custody ☐ Yes ☐ No
				☐ Felony ☐ Misdemeanor

The undersigned swears that he/she has reasonable grounds to believe that the above named defendant on the 18 day of JANUARY, 2020,

at approximately 3:03 AM, at 13577 US 19 N, in Pinellas County did:

WAS THEN AND THERE INTOXICATED AND CAUSED A PUBLIC DISTURBANCE, TO-WIT: THE DEFENDANT WAS INVOLVED IN A LARGE BRAWL IN THE PARKING LOT OF OZ GENTLEMAN'S CLUB. WHEN DEPUTIES ARRIVED THE DEFENDANT INTERFERED WITH THE ARREST OF A SUBJECT WHO FOUGHT A DEPUTY. SHE WAS PHYSICALLY REMOVED AFTER JUMPING ON A DEPUTY'S BACK TWICE. SHE WAS SO INTOXICATED SHE DID NOT REALIZE HE WAS A DEPUTY AND THOUGHT THE DEPUTY WAS ONE OF THE MANY PEOPLE WHO HAD BEEN FIGHTING HER BOYFRIEND.

Contrary to Florida Statute/Ordinance 856.011

ARREST DATE: 1/18/2020 Time 3:03 AM

Aggravating/Mitigating Factors

Booking Officer: LEVEA 59816

Amount of Bond 100

Bond Out Date

Time 13:47 ☒ a.m. ☐ p.m.

Victim Notified of Advisory? ☐ Yes ☐ No

Injuries to Victim? ☐ Yes ☐ No

Medical Treatment to Victim? ☐ Yes ☐ No

The Court reviewed this complaint and finds there: ☐ is probable cause ☐ is not probable cause to detain defendant ☐ Bond Action, if any:

The probable cause determination is passed for: ☐ 24 Hrs ☐ 24 Hrs on showing of extraordinary circumstances

Received by Booking: 1/18/2020 4:44:10 AM

Pursuant to F.S. 92.525 and under penalty of perjury, I declare that I have read the foregoing document and that the facts in it are true.

[Signature]

Declarant Signature

PINELLAS COUNTY SHERIFF

Agency

LT. RYAN BUCKLEY 54125

00332811

Printed Name

Declarant ID#

REQUEST FOR INVESTIGATIVE COSTS, F.S. 938.27(1)

DATE	OFFICER	HOURS X PAY RATE	OR	COST
01/18/2020	LT R BUCKLEY	1 25.00		\$25.00

OTHER – Describe

Continuation sheet ☐ Yes ☐ No

TOTAL \$ 25.00

Defendant LIPPLY, ADINA MARIE

Court Case No: 20-00875-MM-1

ADVISORY AND SOLVENCY HEARING

The above named Defendant came before me for Advisory and Solvency hearing and was advised by me of the charge(s) against him; his right to remain silent; that any statements by him may be used against him; his right to counsel, and, if he is financially unable to afford counsel, that counsel forthwith will be appointed; of his right to communicate with his counsel, family or friends, and that reasonable implementation will be afforded him to contact the foregoing.

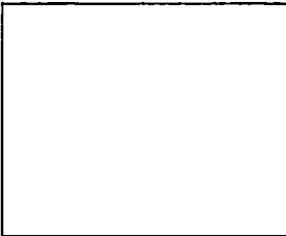
I FURTHER CERTIFY THAT:

- ☐ A. Defendant has advised the Court that he has retained counsel or will retain counsel.
- ☐ B. The Court investigated Defendant's solvency and found the Defendant financially able to secure counsel.
- ☐ C. The Court investigated Defendant's solvency and provisionally appointed the Public Defender.
- ☐ D. The Defendant waived the right to counsel at the first appearance only.

DATE AND TIME

JUDGE

- ☐ I hereby waive the right to counsel at the first appearance only.
- ☐ I, having been found solvent and financially able to secure counsel, hereby waive counsel until my attorney files an appearance in this case or until I file a written request for a review of my solvency and ability to secure counsel.



Thumb Print

DEFENDANT'S SIGNATURE

I HEREBY acknowledge receipt of a copy of the foregoing Complaint and Advisory.

DEFENDANT'S SIGNATURE

DEFENDANT'S ATTORNEY'S SIGNATURE

DATE