UCN: 522020MM007037XXXXMM

FL0520000

COMPLAINT/ARREST AFFIDAVIT - CIRCUIT/COUNTY COURT - PINELLAS COUNTY, FLORIDA DOCKET# 1838936 REPORT # SO20-151539 OBTS# Person ID 310885637 Court Case # Charge Description Felony X Misdemeanor Warrant Traffic Ordinance Traffic Citation # (if any) Charge DOMESTIC BATTERY 20-07037-MM-1 Ht Wt Hair Eyes Skin DOR Sex Race Defendant's Name (Last, First, Middle) 02/05/1952 M 5'9 170 BLK BRO SUKRAMANI, AMNARJ Α Scars/Marks/Tattoos/Physical Features S265-000-52-045-0 Place of Birth Citizenship Telephone Local Address (Street, City, State, Zip Code) 703-508-9503 US THAILAND 1408 MILLSTREAM LN APT 206 DUNEDIN FL 34698 Permanent Address (Street, City, State, Zip Code) Telephone Employed by / School 703-508-9503 1408 MILLSTREAM LN APT 206 DUNEDIN FL 34698 Indication of Y N UNK Indication of Mental Y N UNK Indication of UNK Weapon Seized Type Drug Influence 🔲 🕱 🔲 **Health Issues** Alcohol Influence \mathbf{X} П **X**No ☐ Yes DOB Sex Race Co-Defendant's Name (Last, First, Middle) In Custody ☐Yes ☐No Felony Misdemeanor DOB Race Sex Co-Defendant's Name (Last, First, Middle) In Custody ☐ Yes ☐ No Felony Misdemeanor 2020 The undersigned swears that he/she has reasonable grounds to believe that the above named defendant on the day of JUNE 1408 MILLSTREAM LN APT 206 at approximately 1:12 .in Pinellas County did: ACTUALLY AND INTENTIONALLY TOUCH OR STRIKE VICTIM, HIS WIFE, AND CO-HABITANT, AGAINST THE WILL OF VICTIM, TO WIT: SLAPPED IN FACE AND PUSHED. THE DEFENDANT AND VICTIM WERE IN A VERBAL ARGUEMENT OVER THE DISHES WHICH TURNED PHYSICAL. THE DEFENDANT OPEN HANDED SLAPPED THE VICTIM THREE TIMES IN THE FACE. THE DEFENDANT THEN PLACED HIS HAND ON THE VICTIM'S THROAT AND PUSHED HER INTO A CHA氓. THE VICTIM'S CIRCULATION WAS NOT CUT OFF AND SHE WAS ABLE TO BREATH WHILE THE DE隂NI為NT'S HAND WAS ON HER THROAT. THE DEFENDANT AND VICTIM HAVE BEEN MARRIED FOR FOUR YEARS AND LIVE TOGETHER AS A MILY. THE VICTIM WAS OBSERVED TO HAVE VISIBLE INJURIES. Contrary to Florida Statute/Ordinance 784.03 ARREST DATE: 6/4/2020 Time 1:29 PM . Aggravating/Mitigating Factors Booking Officer: COLBASSANI, C 59312 □a.m. □p.m. Amount of Bond **Bond Out Date** Injuries to Victim? __ Yes __ No Medical Treatment to Victim? ☐Yes ☐ No Victim Notified of Advisory? __Yes __ No The Court reviewed this complaint and finds there: is probable cause is not probable cause to detain defendant is bond Action, if any: The probable cause determination is passed for: 24 Hrs 24 Hrs on showing of extraordinary circumstances Received by Booking: 6/4/2020 2:32:41 PM REQUEST FOR INVESTIGATIVE COSTS, F.S. 938.27(1) Pursuant to F.S. 92.525 and under penalty of perjury, I declare that I have OFFICER : HOURS X PAY RATE read the foregoing document and that the facts in it are true. DATE 06/04/2020 DEP.STACHNIK PINELLAS COUNTY SHERIFF G- MONEY Declarant Signature Agency OTHER Describe 17 101100 **DEPUTY DANIEL STACHNIK 59712** 311010983 TOTAL \$ \$25.00 Declarant ID# Continuation sheet Yes Printed Name

Josephant	SUKRAMANI,	AMNARJ
)efendant	SUKKAIVIAINI,	MINIMARA

Court Case No: 20-07037-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 CERT	IFY THAT:	
A. Defendant has advised the Cou	rt that he has retained couns	sel or will retain counsel.	
☐ B. The Court investigated Defenda			to secure counsel.
☐ C. The Court investigated Defenda	ant's solvency and provision	nally appointed the Public D	efender.
☐ D. The Defendant waived the righ	at to counsel at the first appe	arance only.	- A
D. The Detendant warved the right	to country at the instappe	, 1	\sim \sim \sim
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DATE AND	TIME	THOUSE THE STATE OF THE STATE O	DŒ)
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☐ I hereby waive the right to couns	sel at the first appearance on	lly.	1 49 44 61-
☐ I, having been found solvent ar	nd financially able to secur	re counsel, hereby waive of	counsel until my attorney files
an appearance in this case or unt	il I file a written request for	a review of my solvency ar	id ability to secure counsel.
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			<u> </u>
1		DEFENDAL	NT'S SIGNATURE
Thumb Print			
I HEREBY acknowledge receipt of	a copy of the foregoing Cor	nplaint and Advisory.	
	·		·
DECENDANT'S SIGNATURE	DEFENDANT'S ATT	ORNEY'S SIGNATURE	DATE