

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

OBTS #	REPORT # CW19-186001		DOCKET # 1823696	
Person ID	310678254		SSN# [REDACTED]	
Charge Description	☐ Felony ☒ Misdemeanor ☐ Warrant ☐ Traffic ☐ Ordinance	Traffic Citation # (if any)		Court Case #
Charge	DISORDERLY INTOXICATION (DISTURBANCE)		19-19527-MM-1	
Defendant's Name (Last, First, Middle)	DOB	Sex	Race	Ht
CASEY, AMY MARIE	08/31/1984	F	W	507
Wt	Hair	Eyes	Skin	
130	BLN	HAZ	LGT	
Alias	DL #	State	Scars/Marks/Tattoos/Physical Features	
	SC930573	OH		
Local Address (Street, City, State, Zip Code)	Telephone	Place of Birth	Citizenship	
642 WELLS CT CLEARWATER FL 33765		AZ	US	
Permanent Address (Street, City, State, Zip Code)	Telephone	Employed by / School		
642 WELLS CT CLEARWATER FL 33765				
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 08 day of DECEMBER, 2019,

at approximately 12:24 AM, at 483 MANDALAY, in Pinellas County did:

WAS THEN AND THERE INTOXICATED AND CAUSED A PUBLIC DISTURBANCE, TO-WIT: DEF WHO IS HEAVILY INTOXICATED, MADE MULTIPLE STATEMENTS THAT SHE HAD A FIREARM IN HER BAG AND THREATENED MULTIPLE PEOPLE. THE VICTIMS LEFT THE AREA WHILE SHE WAS BEING DETAINED. DEF WAS NOT IN POSSESSION OF FIREARM WHEN SEARCHED.

FILED
 COURT ASSISTANCE
 2019 DEC -8 AM 11:58
 KEN BURKE
 CLERK OF CIRCUIT COURT
 AND COUNTY OF PINELLAS

Contrary to Florida Statute/Ordinance 856.011.

ARREST DATE: 12/8/2019 Time 12:38 AM . Aggravating/Mitigating Factors _____

Booking Officer: MAGGIO, K 57191 Amount of Bond 100 Bond Out Date _____ Time _____ ☐ 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: 12/8/2019 2:11:22 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.


 CLEARWATER POLICE DEPT.
 Declarant Signature _____ Agency _____
 OFFICER JUSTIN HENNIS 9065 310501484
 Printed Name _____ Declarant ID# _____

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

DATE	OFFICER	HOURS X PAY RATE	OR	COST

OTHER – Describe _____

Continuation sheet ☐ Yes ☐ No TOTAL \$ \$0.00

Defendant CASEY, AMY MARIE

Court Case No: 19-19527-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:

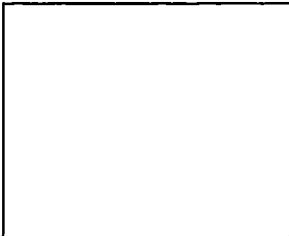
- ☐ A. Defendant has advised the Court that he has retained counsel or will retain counsel.
- ☐ B. The Court investigated Defendant's solvency and found the Defendant financially able to secure counsel.
- ☒ C. The Court investigated Defendant's solvency and provisionally appointed the Public Defender.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