

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

| | | | | | | | | | | |
|---|----------------------------------|--------------------|---|--------------------------------|---|------------------|---|--------------------|--------------------|--------------------|
| OBTS # | REPORT # SO20-96905 | | | | DOCKET # 1834832 | | | | | |
| Person ID 727560 | SSN# [REDACTED] | | | | | | | | | |
| Charge Description <input type="checkbox"/> Felony <input checked="" type="checkbox"/> Misdemeanor <input type="checkbox"/> Warrant <input type="checkbox"/> Traffic <input type="checkbox"/> Ordinance | Traffic Citation # (if any) | | | | Court Case # | | | | | |
| Charge BATTERY; DOMESTIC | | | | 20-04289-MM-1 | | | | | | |
| Defendant's Name (Last, First, Middle) FAWCETT III, ARTHUR | | | DOB 06/10/1967 | Sex M | Race W | Ht 510 | Wt 175 | Hair BLN | Eyes BRO | Skin MED |
| Alias | DL # F230-040-67-210-0 | State FL | Scars/Marks/Tattoos/Physical Features | | | | | | | |
| Local Address (Street, City, State, Zip Code) 101 154TH AVE #4 MADEIRA BEACH FL 33708 | | | | Telephone 7272804641 | Place of Birth CA | | Citizenship US | | | |
| Permanent Address (Street, City, State, Zip Code) 101 154TH AVE #4 MADEIRA BEACH FL 33708 | | | | Telephone | Employed by / School SELF | | | | | |
| Weapon Seized Type <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | Indication of Drug Influence Y N UNK <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> | | Indication of Mental Health Issues Y N UNK <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> | | Indication of Alcohol Influence Y N UNK <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> | | | |
| Co-Defendant's Name (Last, First, Middle) | | | | DOB | Sex | Race | In Custody <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor | | | |
| Co-Defendant's Name (Last, First, Middle) | | | | DOB | Sex | Race | In Custody <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor | | | |

The undersigned swears that he/she has reasonable grounds to believe that the above named defendant on the 01 day of APRIL, 2020, at approximately 12:08 AM, at 101 154TH AVE #4 MADEIRA BEACH, in Pinellas County did:

ACTUALLY AND INTENTIONALLY TOUCH OR STRIKE CHERISH STOTTLER, HIS GIRLFRIEND AND CO-HABITANT, AGAINST THE WILL OF CHERISH STOTTLER, TO-WIT: VICTIM STATED DEF WAS ON THE COUCH WITH PORN ON THE TV. VICTIM CLAIMS SHE YELLED AT HIM FOR HAVING PORN INVOLVING YOUNG GIRLS ON THE TV. VICTIM ADVISED DEF GOT MAD AT HER FOR CALLING HIM A "FREAK" AND PUNCHED HER IN THE FACE WITH A CLOSED FIST. VICTIM STATED SHE WAS PUNCHED ON THE RIGHT SIDE OF HER FACE AT HER JAWLINE/ CHEEK AREA. VICTIM HAD REDNESS WHICH APPEARED TO BE STARTING TO BRUISE ON HER JAW BONE AND A CUT ON HER LIP. VICTIM HAD BLOOD ON HER LEFT FOREARM. DEF DENIES HITTING THE VICTIM.

v - in fact no contact with

*24 hr det - GPS
- Random Testing
- No ABC
- ALWV*

Contrary to Florida Statute/Ordinance 784.03

ARREST DATE: 4/1/2020 Time 12:20 AM Aggravating/Mitigating Factors 500

Booking Officer: LEIPSKI 59118 Amount of Bond ZERO 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: 4/1/2020 2:32:34 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.

Bruce Johnson

 PINELLAS COUNTY SHERIFF
 Agency
 DEPUTY BRUCE JOHNSON 58367 01979048
 Printed Name Declarant ID#

REQUEST FOR INVESTIGATIVE COSTS, F.S. 938.27(1)
 DATE 04/01/2020 OFFICER JOHNSON HOURS X PAY RATE 3 30.00 OR COST \$90.00

OTHER - Describe _____
 Continuation sheet Yes No TOTAL \$ 90.00

Defendant FAWCETT III, ARTHUR

Court Case No: 20-04289-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.

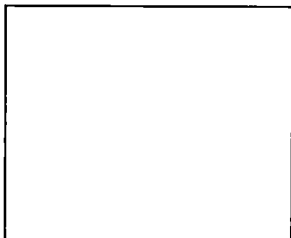
4.1.20

DATE AND TIME

William H. Burgers, II

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