

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

OBTS #	REPORT # 20-003681		DOCKET # 1836509					
Person ID 1011569	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			20-05419-MM-1					
Defendant's Name (Last, First, Middle) FLETCHER, BRANDON WILLIAM	DOB 09/28/1985	Sex M	Race W	Ht 510	Wt 170	Hair BRO	Eyes BRO	Skin
Alias	DL # F432-079-85-348-0	State FL	Scars/Marks/Tattoos/Physical Features					
Local Address (Street, City, State, Zip Code) 13333 RIDGE RD, APT 601 LARGO, FL 33771			Telephone 7273254608	Place of Birth MO	Citizenship USA/YES			
Permanent Address (Street, City, State, Zip Code)			Telephone	Employed by / School YES				
Weapon Seized Type <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Indication of Drug Influence Y <input type="checkbox"/> N <input checked="" type="checkbox"/> UNK <input type="checkbox"/>	Indication of Mental Health Issues Y <input type="checkbox"/> N <input checked="" type="checkbox"/> UNK <input type="checkbox"/>	Indication of Alcohol Influence Y <input checked="" type="checkbox"/> N <input type="checkbox"/> UNK <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 03 day of MAY, 2020, at approximately 5:00 PM, at 1333-601 RIDGE RD SW, in Pinellas County did:

ACTUALLY AND INTENTIONALLY TOUCH OR STRIKE TAYLOR SIGAL, HER BOYFRIEND AND CO-HABITANT, AGAINST THE WILL OF TAYLOR SIGAL, TO-WIT: THE SUBJECT PUSHED TAYLOR OUT OF HER OFFICE CHAIR AND STOOD OVER HER AND PLACED HIS HAND ON HER THROAT. THE SUBJECT THEN LET HER GET UP AND ATTEMPTED TO TAKE HER PHONE AWAY FROM HER AS SHE WAS ATTEMPTING TO CALL HER PARENTS. THE SUBJECT THEN THREW HER DOWN ON THE COUCH AND BEGAN ELBOWING HER IN THE FACE. TAYLOR HAD INJURIES TO HER NOSE AND UPPER LIP.

NFI.

Contrary to Florida Statute/Ordinance 784.03 \$1,000
 ARREST DATE: 5/4/2020 Time 12:15 AM . Aggravating/Mitigating Factors _____
 Booking Officer: LEVEA 59816 Amount of Bond ZERO Bond Out Date _____ Time 5 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: 5/4/2020 1:05:11 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 LARGO POLICE DEPT.
 Agency
OFFICER B HUBBARD 551
 Printed Name 13097276
 Declarant ID#

REQUEST FOR INVESTIGATIVE COSTS, F.S. 938.27(1)				
DATE	OFFICER	HOURS X PAY RATE	OR	COST
05/04/2020	HUBBARD	2	25.00	\$50.00
05/04/2020	TINDAL	1	25.00	25
04/05/2020	NUNLEY	1	25.00	25
OTHER - Describe _____				
Continuation sheet <input type="checkbox"/> Yes <input type="checkbox"/> No				TOTAL \$ \$100.00

FILED
 COURT ASSISTANT
 2020 MAY -4 AM 7:05
 PINELLAS COUNTY
 CLERK OF CIRCUIT COURT

Defendant FLETCHER, BRANDON WILLIAM

Court Case No: 20-05419-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:

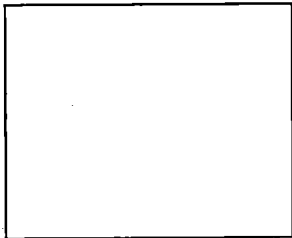
- A. Defendant has advised the Court that he has retained counsel or will retain counsel.
- B. The Court investigated Defendant's solvency and found the Defendant financially able to secure counsel.
- C. The Court investigated Defendant's solvency and provisionally appointed the Public Defender.
- D.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