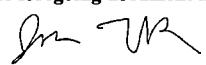


UCN: ***

FL0520800

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

OBTS #		REPORT # 19-012586		DOCKET # 1824957	
Person ID 311443708			SSN# 000-00-0000		
Charge Description ☐ Felony ☒ Misdemeanor ☐ Warrant ☐ Traffic ☐ Ordinance		Traffic Citation # (if any)		Court Case #	
Charge DRIVING UNDER THE INFLUENCE		AB7IOQE		AB7IOQE-1	
Defendant's Name (Last, First, Middle) SHAFFER, CAMERON MITCHELL		DOB 08/28/1989	Sex M	Race W	Ht 509
		Wt 150	Hair BRO	Eyes GRN	Skin FAR
Alias	DL # 0010-13-5623	State IN	Scars/Marks/Tattoos/Physical Features BELLY BUTTON TATTOO		
Local Address (Street, City, State, Zip Code) 208 HAVEN BEACH CT INDIAN ROCKS BEACH FL 33785		Telephone 260-239-1625	Place of Birth INDIANA		Citizenship US
Permanent Address (Street, City, State, Zip Code) 208 HAVEN BEACH CT INDIAN ROCKS BEACH FL 33785		Telephone 260-239-1625	Employed by / School ST PETE DENTAL OFFICE		
Weapon Seized Type ☐ Yes ☒ No		Indication of Drug Influence ☐ Y ☒ N ☐ UNK	Indication of Mental Health Issues ☐ Y ☒ N ☐ UNK		Indication of Alcohol Influence ☒ 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 <u>19</u> day of <u>DECEMBER</u>, 2019, at approximately <u>10:30</u> PM, at <u>ULMERTON RD/WALSINGHAM RD</u>, in Pinellas County did: REASON FOR STOP: FAIL TO MAINTAIN SINGLE LANE OF TRAVEL (DUI BOLO WITH IDENTIFIED WITNESS) THEN AND THERE UNLAWFULLY DRIVE AND/OR BE IN ACTUAL PHYSICAL CONTROL OF A MOTOR VEHICLE (IN TAG #AMP150, DRIVER WITHIN PINELLAS COUNTY, FLORIDA WHILE UNDER THE INFLUENCE OF AN ALCOHOLIC BEVERAGE, A CONTROLLED SUBSTANCE AND/OR ANY CHEMICAL SUBSTANCE TO THE EXTENT THAT HIS NORMAL FACULTIES WERE IMPAIRED. BRAC: 186/185 BREATH: ODOR OF ALCOHOLIC BEVERAGE BALANCE: UNSTEADY EYES: WATERY PRIOR CONVICTIONS: NONE DEFENDANT PERFORMED POORLY ON FIELD SOBRIETY EXERCISES. COURT INFORMATION: NORTH COUNTY TRAFFIC COURT 01/16/2020 AT 9:00AM CITATION #: AB7IOQE TO:WIT- UPON CONTACT WITH THE DRIVER THE DEFENDANT HAD WATERY EYES, SWAYED AS HE SPOKE, AND THERE WAS AN ODOR OF AN ALCOHOLIC BEVERAGE COMING FROM HIS BREATH AS HE SPOKE. DEFENDANT ALMOST FELL SEVERAL TIMES WHILE OUT OF HIS VEHICLE. DEFENDANT CONSENTED TO SFSES WHERE NUMEROUS ADDITIONAL SIGNS OF IMPAIRMENT WERE OBSERVED. DEFENDANT HAD TO BE TOLD THE SAME THING OVER AND OVER. POST-MIRANDA THE DEFENDANT ADMITTED TO DRINKING THREE MIXED DRINKS AND ADMITTED TO FEELING THE EFFECTS OF ALCOHOL AND STATED HE WAS PROBABLY UNDER THE INFLUENCE OF ALCOHOL.					
Contrary to Florida Statute/Ordinance <u>316.193.1</u>					
ARREST DATE: <u>12/19/2019</u> Time <u>10:52 PM</u> . Aggravating/Mitigating Factors					
Booking Officer: <u>HUSTON 59305</u> Amount of Bond <u>500***</u> 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: 12/20/2019 1:00:52 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.		REQUEST FOR INVESTIGATIVE COSTS, F.S. 938.27(1)			
 LARGO POLICE DEPT. Declarant Signature Agency OFFICER JEFFREY URBANIAK 4813 13132115 Printed Name Declarant ID#		DATE	OFFICER	HOURS X PAY RATE	OR COST
		12/19/2019	URBANIAK	3 25.00	\$75.00
		12/19/2019	CASEBER	1 25.00	25
		12/19/2019	HASTINGS	1 25.00	25
		12/19/2019			25
		OTHER - Describe BREATH TEST 25.00			
		Continuation sheet ☐ Yes ☐ No TOTAL \$ \$175.00			

Defendant SHAFFER, CAMERON MITCHELL

Court Case No: AB7IOQE-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.

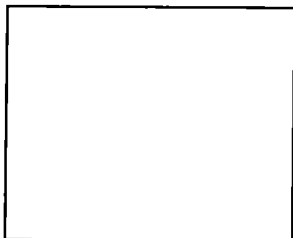
I FURTHER CERTIFY THAT:

- ☐ 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