

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

OBTS #		REPORT # 19-94539	DOCKET # 1824202
Person ID 311439537		SSN# [REDACTED]	
Charge Description ☐ Felony ☒ Misdemeanor ☐ Warrant ☐ Traffic ☐ Ordinance		Traffic Citation # (if any)	
Charge DRIVING UNDER THE INFLUENCE BAL .15 OR GREATER		AC873SE	
Defendant's Name (Last, First, Middle) GUZMAN, CARLOS MARIO		DOB 12/23/1973	Sex M Race H Ht 508 Wt 185 Hair BLK Eyes BRO Skin LGT
Alias	DL # G255-113-73-463-0	State FL	Scars/Marks/Tattoos/Physical Features
Local Address (Street, City, State, Zip Code) 6450 79TH AVE N PINELLAS PARK FL 33781		Telephone 407-613-7868	Place of Birth COLUMBIA
Permanent Address (Street, City, State, Zip Code) 6450 79TH AVE N PINELLAS PARK FL 33781		Telephone 407-613-7868	Employed by / School
Weapon Seized Type ☐ Yes ☒ No		Indication of Drug Influence Y ☐ N ☒ UNK ☐	Indication of Mental Health Issues 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 12 day of DECEMBER, 2019, at approximately 10:45 PM, at BRYAN DAIRY RD/ BELCHER RD, PINELLAS PARK, FL, 337, in Pinellas County did:

REASON FOR STOP: CHECK ON WELFARE/ SUSPICION OF DUI

THEN AND THERE UNLAWFULLY DRIVE AND/OR BE IN ACTUAL PHYSICAL CONTROL OF A MOTOR VEHICLE 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 HAVING A BAL OF .15 OR GREATER.

BRAC: .242/.248 BREATH: DISTINCT ODOR OF CONSUMED ALCOHOLIC BEVERAGE
BALANCE: POOR, UNSTEADY AND WAVERING EYES: BLOODSHOT, WATERY AND GLASSY
PRIOR CONVICTIONS: N/A.

DEFENDANT PERFORMED POORLY AND REFUSED FIELD SOBRIETY TESTS.

COURT INFORMATION: PINELLAS COUNTY COURTHOUSE #15 ON 01/15/2019 AT 1330. CITATION #: AC873SE

THE DEFENDANT WAS THE DRIVER OF A VEHICLE STOPPED FOR AN ERRATIC DRIVING PATTERN. DURING THE STOP, THE DEFENDANT EXHIBITED MULTIPLE SIGNS OF IMPAIRMENT AND PERFORMED POORLY AND REFUSED TO COMPLETE FST'S. DEFENDANT PROVIDED TWO VALID BREATH SAMPLES OF .242/.248

Contrary to Florida Statute/Ordinance 316.193.4

ARREST DATE: 12/12/2019 Time 11:19 PM . Aggravating/Mitigating Factors _____

Booking Officer: HIGGINS, H 59255 Amount of Bond 500*** 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: 12/13/2019 1:47:42 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.  PINELLAS PARK POLICE Declarant Signature _____ Agency _____ OFFICER JACOB ROLLESTON 519 03023017 Printed Name _____ Declarant ID# _____		REQUEST FOR INVESTIGATIVE COSTS, F.S. 938.27(1)														
		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>DATE</th> <th>OFFICER</th> <th>HOURS X PAY RATE</th> <th>OR</th> <th>COST</th> </tr> <tr> <td>12/13/2019</td> <td>ROLLESTON</td> <td>4 25.00</td> <td></td> <td>\$100.00</td> </tr> <tr> <td colspan="5">OTHER – Describe _____</td> </tr> </table>		DATE	OFFICER	HOURS X PAY RATE	OR	COST	12/13/2019	ROLLESTON	4 25.00		\$100.00	OTHER – Describe _____		
DATE	OFFICER	HOURS X PAY RATE	OR	COST												
12/13/2019	ROLLESTON	4 25.00		\$100.00												
OTHER – Describe _____																
		Continuation sheet ☐ Yes ☐ No TOTAL \$ <u>\$100.00</u>														

Defendant GUZMAN, CARLOS MARIO **Court Case No:** AC873SE-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.

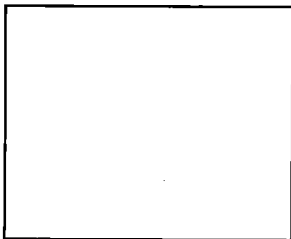
I FURTHER CERTIFY THAT:

- ☐ 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