UCN: 522019MM019887XXXXMM FL0520000

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

OBTS #		REPORT # SO19-400858	DOCKET # 1824441
Person ID 311440526		SSN# [redacted]	
Charge Description ☐ Felony ☒ Misdemeanor ☐ Warrant ☐ Traffic ☐ Ordinance		Traffic Citation # (if any)	Court Case #
Charge BATTERY; SIMPLE			19-19887-MM-1

Defendant's Name (Last, First, Middle)	DOB	Sex	Race	Ht	Wt	Hair	Eyes	Skin
PERRY, CECILY NICOLE	05/05/1989	F	W	502	120	BLN		LGT

Alias	DL #	State	Scars/Marks/Tattoos/Physical Features
	P-600-114-89-665-0	FL	

Local Address (Street, City, State, Zip Code)	Telephone	Place of Birth	Citizenship
5141 CARDIFF DR HOLIDAY FL 34690	757-867-0010	FL	USA
Permanent Address (Street, City, State, Zip Code)	**Telephone**	**Employed by / School**	
5141 CARDIFF DR HOLIDAY FL 34690	757-867-0010		

Weapon Seized Type	Indication of Drug Influence Y N UNK	Indication of Mental Health Issues Y N UNK	Indication of Alcohol Influence Y N UNK
☐Yes ☒No	☐ ☒ ☐	☐ ☒ ☐	☒ ☐ ☐

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 14 day of DECEMBER, 2019,

at approximately 10:39 PM, at 319 MAIN STREET, in Pinellas County did:

DID THEN AND THERE ACTUALLY AND INTENTIONALLY TOUCH OR STRIKE RANDI HIRSCHMAN AGAINST THE WILL OF RANDI HIRSCHMAN, AND DID CAUSE BODILY HARM. DEFENDANT WAS INVOLVED IN A PHYSICAL FIGHT WITH OTHER PEOPLE LOCATED AT 319 MAIN ST (CROWN AND BULL). DEFENDANT WAS SEEN ON VIDEO, AND OBSERVED BY MULTIPLE WITNESSES, VIOLENTLY PULLING A HEAD GARMENT OFF OF VICTIM. DEFENDANT'S ACTIONS CAUSED THE VICTIM'S HEAD BE YANKED BACKWARDS, CAUSING PAIN.

Contrary to Florida Statute/Ordinance 784.03.

ARREST DATE: 12/14/2019 Time 11:05 PM . Aggravating/Mitigating Factors _____

Booking Officer: LEIPSKI 59118 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: 12/15/2019 2:16:49 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.

Declarant Signature — Agency: PINELLAS COUNTY SHERIFF

Printed Name: DEPUTY STEPHEN HUCKABEE 59400 — Declarant ID#: 310748676

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

DATE	OFFICER	HOURS X PAY RATE	OR	COST
12/15/2019	S. HUCKABEE	3 25.00		$75.00

OTHER – Describe _____

Continuation sheet ☐Yes ☐No TOTAL $ $75.00

2019 DEC 15 PM 1:21 COURT ASSISTANCE

COCR59 (Revised 10/2014)
818432 Copies to:

Court

Defendant PERRY, CECILY NICOLE **Court Case No:** 19-19887-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.

DEFENDANT'S SIGNATURE

Thumb Print

I HEREBY acknowledge receipt of a copy of the foregoing Complaint and Advisory.

DEFENDANT'S SIGNATURE **DEFENDANT'S ATTORNEY'S SIGNATURE** **DATE**

UCN: 522019MM019887XXXXMM FL0520000

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

OBTS #		REPORT # SO19-400858	DOCKET # 1824441
Person ID 311440526		SSN# [redacted]	
Charge Description ☐ Felony ☒ Misdemeanor ☐ Warrant ☐ Traffic ☐ Ordinance		Traffic Citation # (if any)	Court Case #
Charge RESISTING AN OFFICER; WITHOUT VIOLENCE (OBSTRUCTION)			19-19887-MM-2

Defendant's Name (Last, First, Middle)	DOB	Sex	Race	Ht	Wt	Hair	Eyes	Skin
PERRY, CECILY NICOLE	05/05/1989	F	W	502	120	BLN		LGT

Alias	DL #	State	Scars/Marks/Tattoos/Physical Features
	P-600-114-89-665-0	FL	

Local Address (Street, City, State, Zip Code)	Telephone	Place of Birth	Citizenship
5141 CARDIFF DR HOLIDAY FL 34690	757-867-0010	FL	USA
Permanent Address (Street, City, State, Zip Code)	**Telephone**	**Employed by / School**	
5141 CARDIFF DR HOLIDAY FL 34690	757-867-0010		

Weapon Seized Type	Indication of Drug Influence Y N UNK	Indication of Mental Health Issues Y N UNK	Indication of Alcohol Influence Y N UNK
☐Yes ☒No	☐ ☒ ☐	☐ ☒ ☐	☒ ☐ ☐

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 14 day of DECEMBER, 2019,

at approximately 11:05 PM, at 319 MAIN STREET, DUNEDIN, FL, in Pinellas County did:

UNLAWFULLY OBSTRUCT OR OPPOSE SERGEANT K. WENDEL, A DULY AND LEGALLY CONSTITUTED LAW ENFORCEMENT OFFICER OF THE PINELLAS COUNTY SHERIFF'S OFFICE, WHILE IN THE LAWFUL EXECUTION OF A LEGAL DUTY, WHICH CONSISTED OF INVESTIGATING A CRIMINAL BATTERY COMPLAINT WITHOUT OFFERING OR DOING VIOLENCE TO THE PERSON OF THE OFFICER.

AFFIANT WAS INVESTIGATING A BATTERY COMPLAINT IN WHICH THE DEF WAS IDENTIFIED BY WITNESSES AS THE SUSPECT. DEF WAS ADVISED SEVERAL TIMES SHE WAS BEING DETAINED PURSUANT TO A CRIMINAL INVESTIGATION AND WAS INFORMED SHE WAS NOT FREE TO LEAVE. DEF STATED SHE WAS LEAVING AND ATTEMPTED TO WALK AWAY FROM AFFIANT DESPITE SEVERAL LAWFUL COMMANDS TO REMAIN AND SCENE. DEF WAS ADVISED SHE WAS BEING PLACED UNDER ARREST FOR RESISTING AND OFFICER, AT WHICH TIME SHE PHYSICALLY RESISTED BEING PLACED IN HANDCUFFS BY BRACING, TENSING, AND ATTEMPTING TO PULL HER ARMS AWAY. DEF FURTHER RESISTED BY PHYSICALLY TENSING, PULLING AWAY, AND ATTEMPTED TO BREAK DEP. HUCKABEE'S GRASP WHILE HE WAS ATTEMPTING TO PLACE HER IN THE REAR OF HIS PATROL VEHICLE SUBSEQUENT TO HER ARREST.

Contrary to Florida Statute/Ordinance 843.02.

ARREST DATE: 12/14/2019 Time 11:05 PM . Aggravating/Mitigating Factors

Booking Officer: LEIPSKI 59118 Amount of Bond 150 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: 12/15/2019 2:29:20 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.

Declarant Signature	Agency
	PINELLAS COUNTY SHERIFF
SERGEANT KRISTOFOR WENDEL 56653	02573635
Printed Name	**Declarant ID#**

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

DATE	OFFICER	HOURS X PAY RATE	OR	COST
12/14/2019	K. WENDEL	2 35.00		$70.00

OTHER – Describe

Continuation sheet ☐Yes ☐No TOTAL $ $70.00

2019 DEC 15 PM 1:21 COURT ASSISTANCE

COCR59 (Revised 10/2014)
818465 Copies to:

Court

Defendant PERRY, CECILY NICOLE **Court Case No:** 19-19887-MM-2

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**