

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) PERRY, CECILY NICOLE		DOB 05/05/1989	Sex F	Race W	Ht 502
Wt 120		Hair BLN	Eyes	Skin LGT	
Alias	DL # P-600-114-89-665-0	State FL	Scars/Marks/Tattoos/Physical Features		
Local Address (Street, City, State, Zip Code) 5141 CARDIFF DR HOLIDAY FL 34690			Telephone 757-867-0010	Place of Birth FL	Citizenship USA
Permanent Address (Street, City, State, Zip Code) 5141 CARDIFF DR HOLIDAY FL 34690			Telephone 757-867-0010	Employed by / School	
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 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 _____
 DEPUTY STEPHEN HUCKABEE 59400
 Printed Name _____
 PINELLAS COUNTY SHERIFF
 Agency _____
 310748676
 Declarant ID# _____

REQUEST FOR INVESTIGATIVE COSTS, F.S. 938.27(1)
 DATE 12/15/2019 OFFICER S. HUCKABEE HOURS 3 PAY RATE 25.00 OR COST \$75.00
 OTHER – Describe _____
 Continuation sheet ☐ Yes ☐ No TOTAL \$ 75.00

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.

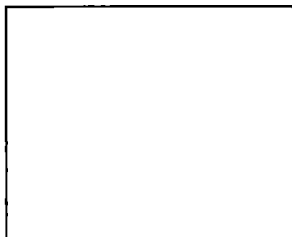
I FURTHER CERTIFY THAT:

- ☐ 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.



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

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

OBTS #		REPORT # SO19-400858		DOCKET # 1824441	
Person ID 311440526			SSN# XXXXXXXXXX		
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) PERRY, CECILY NICOLE		DOB 05/05/1989	Sex F	Race W	Ht 502
		Wt 120	Hair BLN	Eyes LGT	Skin LGT
Alias	DL # P-600-114-89-665-0	State FL	Scars/Marks/Tattoos/Physical Features		
Local Address (Street, City, State, Zip Code) 5141 CARDIFF DR HOLIDAY FL 34690		Telephone 757-867-0010	Place of Birth FL		Citizenship USA
Permanent Address (Street, City, State, Zip Code) 5141 CARDIFF DR HOLIDAY FL 34690		Telephone 757-867-0010	Employed by / School		
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

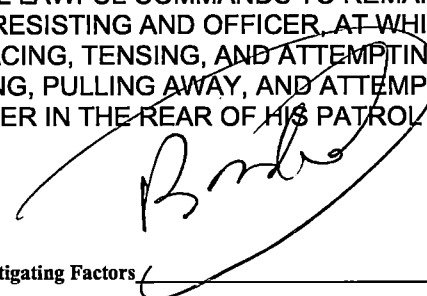
The undersigned swears that he/she has reasonable grounds to believe that the above named defendant on the 14 day of DECEMBER, 2019,

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.

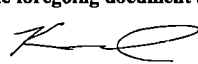
ARREST DATE: 12/14/2019 Time 11:05 PM . Aggravating/Mitigating Factors 

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.  PINELLAS COUNTY SHERIFF Declarant Signature _____ Agency _____ SERGEANT KRISTOFOR WENDEL 56653 02573635 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>12/14/2019</td> <td>K. WENDEL</td> <td>2 35.00</td> <td></td> <td>\$70.00</td> </tr> <tr> <td colspan="5"> OTHER – Describe _____ Continuation sheet ☐ Yes ☐ No </td> </tr> </table>		DATE	OFFICER	HOURS X PAY RATE	OR	COST	12/14/2019	K. WENDEL	2 35.00		\$70.00	OTHER – Describe _____ Continuation sheet ☐ Yes ☐ No		
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12/14/2019	K. WENDEL	2 35.00		\$70.00												
OTHER – Describe _____ Continuation sheet ☐ Yes ☐ No																

TOTAL \$ 70.00

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.

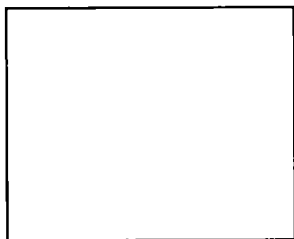
I FURTHER CERTIFY THAT:

- ☐ A. Defendant has advised the Court that he has retained counsel or will retain counsel.
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- ☐ C. The Court investigated Defendant's solvency and provisionally appointed the Public Defender.
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- ☐ 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.



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

DEFENDANT'S SIGNATURE

DEFENDANT'S ATTORNEY'S SIGNATURE

DATE