

UCN: N/A

FL0520500

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

OBTS #		REPORT # GP20-2710		DOCKET # 1829719	
Person ID 311469839			SSN# [REDACTED]		
Charge Description ☐ Felony ☒ Misdemeanor ☐ Warrant ☐ Traffic ☐ Ordinance		Traffic Citation # (if any)		Court Case #	
Charge WARRANT ARREST (FTA-ILLEGAL INSTALLATION OF TRACKING DEVICE OR APPLICATION)				20-00932-OC-MM-1	
Defendant's Name (Last, First, Middle) MEGAN JR, CHARLES GERALD		DOB 10/20/1987	Sex M	Race W	Ht 505
		Wt 150	Hair BLN	Eyes BLU	Skin LGT
Alias	DL # M-250-147-87-380-0	State FL	Scars/Marks/Tattoos/Physical Features NONE		
Local Address (Street, City, State, Zip Code) 223 S. KERR AVE WILMINGTON NC 28403		Telephone 727-220-8311	Place of Birth NC		Citizenship USA
Permanent Address (Street, City, State, Zip Code)		Telephone	Employed by / School SELF		
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 05 day of FEBRUARY, 2020,

at approximately 1:32 PM, at 5500 SHORE BLVD S, in Pinellas County did:

HILLSBOROUGH COUNTY WARRANT

ARREST ON WARRANT/CAPIAS # 19CM014136

I HAVE NO KNOWLEDGE OF THIS CASE

BOND: NONE

ISSUE DATE: (ENTER WARRANT ISSUE DATE)

Contrary to Florida Statute/Ordinance 901.31/934.425.

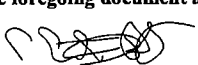
ARREST DATE: 2/5/2020 Time 1:37 PM . Aggravating/Mitigating Factors _____

Booking Officer: KUNZ, K 57593 Amount of Bond _____ ROR _____ Bond Out Date 02/05/20 Time 23:40 ☐ 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: 2/5/2020 4:05:20 PM

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.  GULFPORT POLICE DEPT. Declarant Signature _____ Agency _____ OFFICER CHRISTOPHER PRIEST G596 02505351 Printed Name _____ Declarant ID# _____		REQUEST FOR INVESTIGATIVE COSTS, F.S. 938.27(1) DATE OFFICER HOURS X PAY RATE OR COST 02/05/2020 PRIEST 4 35.00 \$140.00			
		OTHER – Describe _____ Continuation sheet ☐ Yes ☐ No TOTAL \$ \$140.00			

Defendant MEGAN JR, CHARLES GERALD **Court Case No:** 20-00932-OC-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.

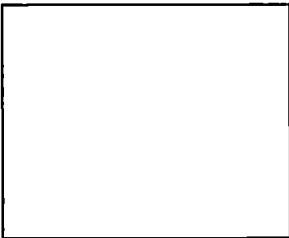
I FURTHER CERTIFY THAT:

- ☐ 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