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)	DOB	Sex	Race	Ht	Wt	Hair	Eyes	Skin
MEGAN JR, CHARLES GERALD	10/20/1987	M	W	505	150	BLN	BLU	LGT

Alias	DL #	State	Scars/Marks/Tattoos/Physical Features
	M-250-147-87-380-0	FL	NONE

Local Address (Street, City, State, Zip Code)	Telephone	Place of Birth	Citizenship
223 S. KERR AVE WILMINGTON NC 28403	727-220-8311	NC	USA
Permanent Address (Street, City, State, Zip Code)	**Telephone**	**Employed by / School**	
		SELF	

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 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)

KEN BURKE CLERK OF CIRCUIT COURT PINELLAS COUNTY, FL

FILED 2020 FEB -6 AM 7:59 COURT ASSISTANT

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. ROR 4:54P

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.

Declarant Signature — Agency: GULFPORT POLICE DEPT.

Printed Name: OFFICER CHRISTOPHER PRIEST G596 — Declarant ID#: 02505351

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

COCR59 (Revised 10/2014)
827836 Copies to:

Court

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**