

UCN: ***

FL0521400

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

OBTS #	REPORT # 2020-021075	DOCKET # 1839230
Person ID 311312719	SSN#	
Charge Description <input type="checkbox"/> Felony <input checked="" type="checkbox"/> Misdemeanor <input type="checkbox"/> Warrant <input type="checkbox"/> Traffic <input type="checkbox"/> Ordinance	Traffic Citation # (if any)	Court Case #
Charge DRIVING UNDER THE INFLUENCE BAL .15 OR GREATER OR MINOR IN VEHICLE	AAM762E	AAM762E-1
Defendant's Name (Last, First, Middle) SIMS, CHEYENNE	DOB 07/09/1998	Sex F
	Race W	Ht 510
	Wt 130	Hair BLN
	Eyes BRO	Skin
Alias	DL # S520105987490	State FL
	Scars/Marks/Tattoos/Physical Features	
Local Address (Street, City, State, Zip Code) 4101 76TH AV N APT 127 PINELLAS PARK FL 33781	Telephone 8126053883	Place of Birth MS
Permanent Address (Street, City, State, Zip Code) 4101 76TH AV N PINELLAS PARK FL 33781	Telephone 8126053883	Citizenship US
Employed by / School		
Weapon Seized Type <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Indication of Drug Influence <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> UNK	Indication of Mental Health Issues <input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> UNK
	Indication of Alcohol Influence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> UNK	
Co-Defendant's Name (Last, First, Middle)	DOB	Sex
		Race
		In Custody <input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor
Co-Defendant's Name (Last, First, Middle)	DOB	Sex
		Race
		In Custody <input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor

The undersigned swears that he/she has reasonable grounds to believe that the above named defendant on the 09 day of JUNE, 2020

at approximately 1:48 AM, at 83RD AV N/4TH ST N, in Pinellas County did:

THEN AND THERE: OPERATE A MOTOR VEHICLE TO WIT: SIL CHEVY TRAILBLAZER. DEF WAS OBSERVED BEHIND THE WHEEL IN THE DRIVER SEAT BY THIS OFFICER. ADMITTED DEF DECLINED TO SUBMIT TO A URINE TEST.

DEFENDANT EXHIBITED FURTHER SIGNS OF IMPAIRMENT DURING F.S.T.'S.
DEFENDANT REFUSED TO PERFORM F.S.T.'S.

REASON FOR STOP: SPEED AND FAILT OBEY TRAFFIC CONTROL DEVICE
OBSERVATIONS: EYES: BLOODSHOT, WATERY AND GLASSY, STRONG ODOR OF ALOCHOL
EXPRESSION: BLANK, DAZED, SPEECH: MUMBLED SLURRED

BR.A.C.:...211/.190/.189 URINE: REFUSED / PENDING BLOOD: _____
PRIOR CONVICTIONS: NONE
COURT DATE: CALL OF COURT
CITATION NUMBER: AAM762E
LOCATION: PINELLAS COUNTY JUSTICE CENTER

CAW
FILED
COURT ASSISTANT
2020 JUN -9 AM 9:59

Contrary to Florida Statute/Ordinance 316.193.4

ARREST DATE: 6/9/2020 Time 1:58 AM . Aggravating/Mitigating Factors MULTIPLE TRF VIOLATION

Booking Officer: WERNER 59414 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: 6/9/2020 3:45:17 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.

[Signature]

ST. PETERSBURG POLICE
Agency

OFFICER RONALD MCKENZIE 46962 10625118
Printed Name Declarant ID#

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

DATE 06/09/2020 OFFICER R. MCKENZIE HOURS X PAY RATE 2 25.00 OR COST \$50.00

OTHER - Describe
Continuation sheet Yes No TOTAL \$ 50.00

Defendant SIMS, CHEYENNE

Court Case No: AAM762E-1

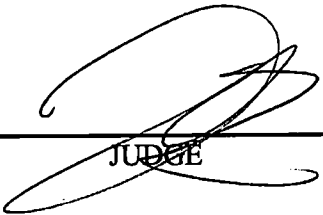
ADVISORY AND SOLVENCY HEARING

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:

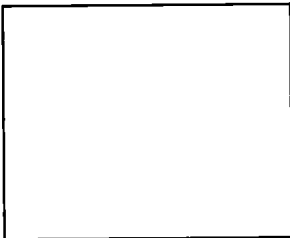
- A. Defendant has advised the Court that he has retained counsel or will retain counsel.
- B. The Court investigated Defendant's solvency and found the Defendant financially able to secure counsel.
- C. The Court investigated Defendant's solvency and provisionally appointed the Public Defender.
- D. 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