

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

OBTS #	REPORT # 2020-29116		DOCKET # 1836567		
Person ID	310999367	SSN#	[REDACTED]		
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	BATTERY; DOMESTIC		20-05472-MM-1		
Defendant's Name (Last, First, Middle)	DOB	Sex	Race	Ht	Wt
MERRICK, COLLEEN A	12/15/1963	F	W	5'6	140
Alias	DL #	State	Scars/Marks/Tattoos/Physical Features		
	M620-100-63-955-0	FL			
Local Address (Street, City, State, Zip Code)	Telephone	Place of Birth	Citizenship		
5401 GLEN IVY PL N PINELLAS PARK FL 33782	727-250-8990	PA	US		
Permanent Address (Street, City, State, Zip Code)	Telephone	Employed by / School			
5401 GLEN IVY PL N PINELLAS PARK FL 33782	727-250-8990	NONE			
Weapon Seized Type	Indication of Drug Influence	Y N UNK	Indication of Mental Health Issues	Y N UNK	Indication of Alcohol Influence
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> UNK		<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> UNK		<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" 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 04 day of MAY, 2020,

at approximately 5:00 PM, at 5401 GLEN IVY PL N, in Pinellas County did:

ACTUALLY AND INTENTIONALLY TOUCH OR STRIKE PETER COSSU, HER BOYFRIEND AND CO-HABITANT, AGAINST THE WILL OF PETER COSSU, TO-WIT: INTENTIONALLY SPITTING IN HIS FACE, PUSHING HIM INTO THE REFRIGERATOR AND THROWING A WINE GLASS AT HIM.

THE VICTIM, PETER COSSU, CALLED POLICE TO REPORT HIS GIRLFRIEND BEING PHYSICAL WITH HIM DURING AN ARGUMENT. HE ADVISED THAT THE ARGUMENT WAS MAINLY OVER THEM SEPARATING AND ESCALATED WHEN COLLEEN GOT INTO HIS FACE. HE ADVISED THAT COLLEEN INTENTIONALLY SPIT IN HIS FACE AND PUSHED HIM AGAINST THE REFRIGERATOR WHILE THEY WERE ARGUING IN THE KITCHEN. HE FURTHER ADVISED THAT SHE PUSHED HIM WITH TWO OPEN HANDS AFTER SPITTING IN HIS FACE. HE FURTHER ADVISED THAT COLLEEN THREW A WINE GLASS AT HIM WHILE ON THE PATIO AREA. THE WINE GLASS DID NOT STRIKE HIM; HOWEVER, BROKE AFTER STRIKING THE GROUND. THE WINE GLASS WAS VISIBLY BROKEN INTO SEVERAL PIECES ON THE PATIO.

Contrary to Florida Statute/Ordinance 784.03

ARREST DATE: 5/4/2020 Time 5:00 PM. Aggravating/Mitigating Factors DOMESTIC VIOLENCE. Booking Officer: EELLS, C 56501. Amount of Bond NO BOND. 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: 5/5/2020 1:32:58 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: [Signature] PINELLAS PARK POLICE Agency. OFFICER CAMERON WILLIAMS 535 310193064 Printed Name Declarant ID#

REQUEST FOR INVESTIGATIVE COSTS, F.S. 938.27(1)			
DATE	OFFICER	HOURS X PAY RATE	OR COST
05/04/2020	C. WILLIAMS	3 25.00	\$75.00
OTHER - Describe			
Continuation sheet Yes No			
			TOTAL \$75.00

Defendant MERRICK, COLLEEN A

Court Case No: 20-05472-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:

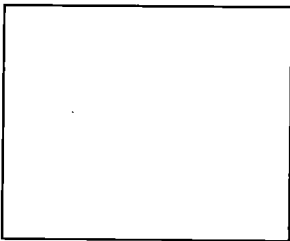
- A. Defendant has advised the Court that he has retained counsel or will retain counsel.
- B. The Court investigated Defendant's solvency and found the Defendant financially able to secure counsel.
- C. The Court investigated Defendant's solvency and provisionally appointed the Public Defender.
- D.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