

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

OBTS #	REPORT # SO20-33153		DOCKET # 1829084	
Person ID 2799398	SSN# [REDACTED]			
Charge Description ☐ Felony ☒ Misdemeanor ☐ Warrant ☐ Traffic ☐ Ordinance	Traffic Citation # (if any)		Court Case #	
Charge DRIVING UNDER THE INFLUENCE	AD0AUXE		AD0AUXE-1	
Defendant's Name (Last, First, Middle) PERUCHE, CORTNEY LYNN	DOB 03/12/1990	Sex F	Race W	Ht 502
			Wt 150	Hair BLN
			Eyes BLU	Skin MED
Alias	DL # P620112905920	State FL	Scars/Marks/Tattoos/Physical Features	
Local Address (Street, City, State, Zip Code) 13766 DOMINCA DR SEMINOLE FL 33776	Telephone 7279067038	Place of Birth FLA	Citizenship USA	
Permanent Address (Street, City, State, Zip Code) 13766 DOMINCA DR SEMINOLE FL 33776	Telephone 7279067038	Employed by / School UNK		
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 30 day of JANUARY, 2020,

at approximately 11:29 PM, at PARK ST N & 54TH AVE N, in Pinellas County did:

REASON FOR STOP: SERGEANT WAUGH OBSERVED THE DEF FROM THE AREA OF SEMINOLE LANES (PARK ST N & 84TH LN N) TO PARK ST N & 54TH AVE N. DURING THIS TIME, SERGEANT WAUGH OBSERVED THE DEF DRIFTING WITHIN HER LANE. THE DEF THEN CROSSED OVER THE LANE MARKER WITH HER PASSENGER SIDE TIRES. THE DEF THEN STRUCK AND STRADDLED THE LINE A SECOND TIME. SERGEANT WAUGH CONDUCTED A WELFARE STOP OF THE DEF AND OBSERVED SIGNS OF IMPAIRMENT. THE DEF WAS IDENTIFIED AS THE DRIVER VIA HER DRIVER'S LICENSE.

THEN AND THERE UNLAWFULLY DRIVE AND/OR BE IN ACTUAL PHYSICAL CONTROL OF A MOTOR VEHICLE WITHIN PINELLAS COUNTY, FLORIDA WHILE UNDER THE INFLUENCE OF AN ALCOHOLIC BEVERAGE, A CONTROLLED SUBSTANCE AND/OR ANY CHEMICAL SUBSTANCE TO THE EXTENT THAT HER NORMAL FACULTIES WERE IMPAIRED.

BRAC: REFUSAL TO SUBMIT BREATH: STRONG AND DISTINCT ODOR OF AN ALCOHOLIC BEVERAGE
BALANCE: SWAY, UNSTEADY EYES: BLOODSHOT AND GLASSY
PRIOR CONVICTIONS: 4/11/2017.

DEFENDANT PERFORMED POORLY ON STANDARDIZED FIELD SOBRIETY EXERCISES.

COURT INFORMATION: COUNTY COURT COMPLEX ON 2/26/2020 AT 1:30 PM
CITATION #: AD0AUXE

Contrary to Florida Statute/Ordinance 316.193.1.

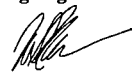
ARREST DATE: 1/31/2020 Time 12:03 AM. Aggravating/Mitigating Factors _____
Booking Officer: FALLAHEE, GEORGE 55259 Amount of Bond 500 Bond Out Date _____ Time 7:30 ☐ a.m. ☐ p.m.

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: 1/31/2020 2:32:57 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 _____ Agency PINELLAS COUNTY SHERIFF
DEPUTY NATHAN MOWATT 58884 310277566
Printed Name _____ Declarant ID# _____

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

DATE	OFFICER	HOURS	X PAY RATE	OR	COST
01/31/2020	DEPUTY N. MOWATT	3	25.00		\$75.00
01/31/2020	SERGEANT J. WAUGH	1.5	25.00		37.5

OTHER – Describe _____
Continuation sheet ☐ Yes ☐ No TOTAL \$ \$112.50

Defendant PERUCHE, CORTNEY LYNN **Court Case No:** AD0AUXE-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.

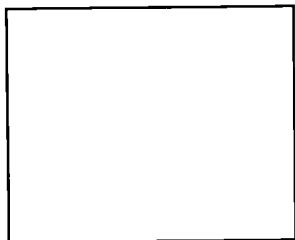
I FURTHER CERTIFY THAT:

- ☐ 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