

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

OBTS #	REPORT # SO20-98414		DOCKET # 1834422																				
Person ID	311499122		SSN# [REDACTED]																				
Charge Description	<input checked="" type="checkbox"/> Felony	<input type="checkbox"/> Misdemeanor	<input type="checkbox"/> Warrant	<input type="checkbox"/> Traffic	<input type="checkbox"/> Ordinance	Traffic Citation # (if any)	Court Case #																
Charge	CRIMINAL MISCHIEF					20-03025-CF-1																	
Defendant's Name (Last, First, Middle)	HARRIS, DAVID ALAN		DOB	03/21/1977	Sex	M	Race	W	Ht	601	Wt	230	Hair	GRY	Eyes	BLU	Skin	MED					
Alias	DL #	H620-161-77-102-0		State	FL	Scars/Marks/Tattoos/Physical Features																	
Local Address (Street, City, State, Zip Code)					Telephone		Place of Birth		Citizenship														
12247 MALLORY DR LARGO FL 33774							WISCONSIN		US														
Permanent Address (Street, City, State, Zip Code)					Telephone		Employed by / School																
12247 MALLORY DR LARGO FL 33774					2623583737																		
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		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>						<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>						<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>					
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 22 day of MARCH, 2020, at approximately 1:48 PM, at 2939 W BAY DR, in Pinellas County did:

THEN AND THERE WILLFULLY AND MALICIOUSLY INJURE OR DAMAGE HE REAL OR PERSONAL PROPERTY OF ANOTHER, PATRICE HORGAN AND JAMES HORGAN, TO-WIT: SHATTERED REAR WINDSHIELD OF THE VICTIM'S 2015 BMW 535I FLORIDA TAG# HHXI95 VIN#WBA5B1C55FD919519 BY SLAMMING HIS FIST ONTO THE WINDSHIELD CRACKING IT DAMAGE TO SAID PROPERTY BEING GREATER THAN \$1000 WINDSHIELD IS ESTIMATED TO BE OVER \$1000. TO REPLACE OR INTERRUPTION OR IMPAIRMENT OF A BUSINESS OPERATION OR PUBLIC COMMUNICATION OR OTHER PUBLIC SERVICE WHICH COST \$1000 OR MORE IN LABOR OR SUPPLIES TO RESTORE.

DEFENDANT, DAVID HARRIS, ADMITTED POST MIRANDA TO STRIKING THE WINDOW WITH HIS HAND AND SHATTERING IT. THE TWO VICTIMS AND TWO WITNESSES ALSO OBSERVED HIM STRIKE THE WINDSHIELD.

Contrary to Florida Statute/Ordinance 806.13.1.B.3

ARREST DATE: 3/22/2020 Time 2:27 PM . Aggravating/Mitigating Factors _____

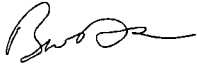
Booking Officer: GOODRICH, LISHA 58205 Amount of Bond 2000 Bond Out Date 03/22/2020 Time 4:40 a.m. p.m.

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: 3/22/2020 4:11:13 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.



 PINELLAS COUNTY SHERIFF
 Agency

DEPUTY BARKLEY DANIEL 56327 1646473

 Printed Name Declarant ID#

REQUEST FOR INVESTIGATIVE COSTS, F.S. 938.27(1)				
DATE	OFFICER	HOURS X PAY RATE	OR	COST
03/22/2020	B. DANIEL	4 25.00		\$100.00
03/22/2020	PICARD	2 25.00		50
OTHER - Describe _____				
Continuation sheet <input type="checkbox"/> Yes <input type="checkbox"/> No				TOTAL \$ <u>\$150.00</u>

FILED
 COURT ASSIS
 2020 MAR 23
 4:40
 CLERK OF CIRCUIT COURT
 PINELLAS COUNTY
 ST. PETERSBURG, FL

Defendant HARRIS, DAVID ALAN

Court Case No: 20-03025-CF-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.

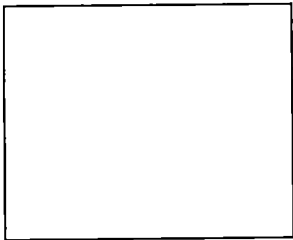
I FURTHER CERTIFY THAT:

- 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