UCN: *** FL0520300

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

OBTS #		REPORT # CW20-54910	DOCKET # 1835496
Person ID 3019734		SSN# [redacted]	
Charge Description ☐Felony ☒Misdemeanor ☐Warrant ☐Traffic ☐Ordinance		Traffic Citation # (if any)	Court Case #
Charge DRIVING UNDER THE INFLUENCE		ACS032E	ACS032E-1

Defendant's Name (Last, First, Middle)	DOB	Sex	Race	Ht	Wt	Hair	Eyes	Skin
CLEVELAND, DONALD ROBERT	12/16/1961	M	W	600	240	GRY	GRN	LGT

Alias	DL #	State	Scars/Marks/Tattoos/Physical Features
	C414196614560	FL	

Local Address (Street, City, State, Zip Code)	Telephone	Place of Birth	Citizenship
150 MARINA DEL RAY CT CLEARWATER FL 33767	0000000000	TEXAS	US
Permanent Address (Street, City, State, Zip Code)	**Telephone**	**Employed by / School**	
150 MARINA DEL RAY CT CLEARWATER FL 33767	0000000000	RETIRED	

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 14 day of APRIL, 2020,

at approximately 3:20 PM, at 1 CAUSEWAY BLVD, in Pinellas County did:

REASON FOR STOP: INVOLVED IN A TRAFFIC CRASH. CITED FOR AT-FAULT DRIVER.

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 HIS NORMAL FACULTIES WERE IMPAIRED.

BRAC: REFUSED BREATH: ODOR OF ALCOHOL FROM APPROX.. 3-5 FEET
BALANCE: SWAYING EYES: WATERY, GLASSY, BLOODSHOT
PRIOR CONVICTIONS: 2/3/2008 DUI AND REFUSAL.

DEFENDANT REFUSED FIELD SOBRIETY TESTS.

COURT INFORMATION: NORTH COUNTY TRAFFIC COURT 05/07/2020 0900 CITATION #: ACS032E

THE DEFENDANT WAS INVOLVED IN A TRAFFIC ACCIDENT WHERE HE WAS THE AT FAULT DRIVER AND CITED BY OFFICER BUIS REFERENCE CITATION# ACS033E. THE DEFENDANT HAD SEVERAL SIGNS OF SUBSTANCE IMPAIRMENT TO INCLUDE WATERY, BLOODSHOT, GLASSY EYES, SLURRED SPEECH, SWAYING WHILE STANDING AND THE ODOR OF ALCOHOL WAS EMANATING FROM HIS VEHICLE AND HIS PERSON WHEN HE EXITED HIS 1998 WHITE FORD EXPEDITION BEARING FLORIDA TAG 7604TP. POST MIRANDA, THE DEFENDANT REFUSED TO LET ME CHECK HIS EYES CITING "I'M WAY OUT OF LINE". THE DEFENDANT ADDITIONALLY REFUSED TO PERFORM ANY FIELD SOBRIETY EXERCISES. UPON ARREST, THE DEFENDANT REFUSED TO SUBMIT TO A BREATH TEST AND HAD ONE PRIOR REFUSAL SO HE WAS CITED AND ARRESTED FOR REFUSAL REFERENCE CITATION# ACEV94E.

Supervisor CAM

Contrary to Florida Statute/Ordinance 316.193.1.

ARREST DATE: 4/14/2020 Time 3:52 PM . Aggravating/Mitigating Factors No ABC

Booking Officer: AUGUSTA 58493 Amount of Bond 500.00 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: 4/14/2020 6:13:37 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
	CLEARWATER POLICE DEPT.
OFFICER ZACHARY SENTER 9808	310953526
Printed Name	**Declarant ID#**

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

DATE	OFFICER	HOURS X PAY RATE	OR	COST
04/14/2020	Z. SENTER	3 29.14		$87.42

2020 APR 15 AM 6:49

OTHER – Describe

Continuation sheet ☐Yes ☐No TOTAL $ $87.42

FILED COURT ASSISTANCE

COCR59 (Revised 10/2014)
838899 Copies to:

Court

Defendant CLEVELAND, DONALD ROBERT **Court Case No:** ACS032E-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**