UCN: **

FL0520000

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

OBTS #		REPORT # SO20-148820	DOCKET # 1838699
Person ID 311501327		SSN# [redacted]	
Charge Description ☐ Felony ☒ Misdemeanor ☐ Warrant ☐ Traffic ☐ Ordinance		Traffic Citation # (if any)	Court Case #
Charge: DRIVING UNDER THE INFLUENCE BAL .15 OR GREATER OR MINOR IN VEHICLE		AD0B2GE	AD0B2GE-1

Defendant's Name (Last, First, Middle)	DOB	Sex	Race	Ht	Wt	Hair	Eyes	Skin
DOWMAN, EMILIE ANNE	08/05/1968	F	W	505	155	BLN	GRN	

Alias	DL #	State	Scars/Marks/Tattoos/Physical Features
	D550-201-68-785-0	FL	

Local Address (Street, City, State, Zip Code)	Telephone	Place of Birth	Citizenship
709 CORDOVA GRN LARGO FL 33777	7272180666	NY	USA
Permanent Address (Street, City, State, Zip Code)	**Telephone**	**Employed by / School**	
709 CORDOVA GRN LARGO FL 33777	7272180666	SEMINOLE COUNTRY CLUB	

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
N/A				☐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 01 day of JUNE, 2020,

at approximately 9:17 AM, at 7058 AUGUSTA BLVD, SEMINOLE, FL 33709, in Pinellas County did:

REASON FOR STOP:

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 HAVING A BAL OF .15 OR GREATER OR A MINOR IN VEHICLE.

BRAC: (.242/.248) BREATH: (ODOR OF ALCOHOLIC BEVERAGE)
BALANCE: (SWAYING) EYES: (BLOODSHOT/WATERY)
PRIOR CONVICTIONS: (N/A).

DEFENDANT (FAILED FIELD SOBRIETY TESTS.

COURT INFORMATION: (CLERK OF THE COURT 49TH ST N COUNTY TRAFFIC COURT (JUNE 24, 2020 01:30PM) CITATION #: (AD0B2GE)

THE DEFENDANT WAS INVOLVED IN A TWO VEHICLE ACCIDENT WHERE SHE CRASHED IN TO A PARKED VEHICLE ON HER WAY TO WORK. THE DEFENDANT WAS IN HER VEHICLE AT THE TIME I ARRIVED ON SCENE AND SHOWED SEVERAL SIGNS OF ALOCOHLIC IMPAIRMENT.

THE DEFENDANT FAILED THE FIELD SOBRIETY EXERCISES AND PROVIDED TWO BREATH SAMPLES, WHICH WERE BOTH OVER THE LEGAL LIMIT AND ALSO OVER .15.

THE DEFENDANT CAUSED SIGNIFICANT DAMAGE TO BOTH HER AND THE PARKED VEHICLES. BOTH VEHICLES WERE TOWED FROM THE SCENE AS A RESULT OF THE CRASH.

Contrary to Florida Statute/Ordinance 316.193.4.

ARREST DATE: 6/1/2020 Time 9:56 AM . Aggravating/Mitigating Factors CB

Booking Officer: CARLSON 57027 Amount of Bond 500*** Bond Out Date 6/2/20 Time NA ☐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: 6/1/2020 11:52:51 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.

2020 JUN -2 AM 6:23

PINELLAS COUNTY SHERIFF

Declarant Signature — Agency

DEPUTY WILLIAM MORGAN 59799 — 310478017

Printed Name — Declarant ID#

FILED

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

DATE	OFFICER	HOURS X PAY RATE		OR	COST
06/01/2020	W. MORGAN	2	25.00		$50.00

OTHER – Describe

Continuation sheet ☐Yes ☐No TOTAL $ $50.00

COCR59 (Revised 10/2014)

845911 Copies to:

Court

Defendant DOWMAN, EMILIE ANNE **Court Case No:** AD0B2GE-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**