

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

OBTS #	REPORT # SO20-102542		DOCKET # 1835211	
Person ID 3276005	SSN# [REDACTED]			
Charge Description ☐ Felony ☒ Misdemeanor ☐ Warrant ☐ Traffic ☐ Ordinance	Traffic Citation # (if any)		Court Case #	
Charge BATTERY; DOMESTIC			20-04517-MM-1	
Defendant's Name (Last, First, Middle) BEVINS, GARY HUNT	DOB 04/02/1986	Sex M	Race W	Ht 507
Wt 162	Hair BRO	Eyes HAZ	Skin LGT	
Alias	DL # B-152-288-86-122-0	State FL	Scars/Marks/Tattoos/Physical Features SC LEFT SIDE OF HEAD	
Local Address (Street, City, State, Zip Code) 6960 A SUNSET DR #2D SOUTH PASADENA FL 33707	Telephone (781)710-7980	Place of Birth MA	Citizenship USA	
Permanent Address (Street, City, State, Zip Code) 6960 A SUNSET DR #2D SOUTH PASADENA FL 33707	Telephone (781)710-7980	Employed by / School PUBLIX		
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 09 day of APRIL, 2020,

at approximately 7:30 AM, at BIGNONIA WAY S & SUNSET DR S, SOUTH PASADENA, FL, in Pinellas County did:

ACTUALLY AND INTENTIONALLY TOUCH OR STRIKE STEPHEN BEVINS, HIS FATHER, AGAINST THE WILL OF STEPHEN BEVINS, TO-WIT: DEFENDANT STRUCK VICTIM IN THE FACE MULTIPLE TIMES WITH OPEN AND CLOSED HAND.

THE VICTIM STATED THE DEFENDANT STRUCK HIM MULTIPLE TIMES IN THE HEAD WITH AN OPEN HAND AND SUBSEQUENTLY CLOSED FIST. THE VICTIM HAD CUTS TO HIS FACE CONSISTENT WITH BEING STRUCK IN THAT MANNER. THE VICTIM'S FACE HAD BEEN BLOODIED. POST MIRANDA WARNING THE DEFENDANT ADMITTED TO STRIKING THE VICTIM IN THE FACE MULTIPLE TIMES WITH HIS HANDS.

Contrary to Florida Statute/Ordinance 784.03

ARREST DATE: 4/9/2020 Time 8:00 AM

Aggravating/Mitigating Factors

Booking Officer: DARGINIO, E 57371 Amount of Bond NONE 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: 4/9/2020 9:41:57 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.



PINELLAS COUNTY SHERIFF

Declarant Signature

Agency

DEPUTY LOREN MILLER 59984

311224104

Printed Name

Declarant ID#

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

DATE	OFFICER	HOURS X PAY RATE	OR	COST
04/09/2020	DEP L. MILLER	1.5 25.00		\$37.50
04/09/2020	DEP S. ESPOSITO	1.5 25.00		37.50

OTHER – Describe

Continuation sheet ☐ Yes ☐ No

TOTAL \$ 75.00

Defendant BEVINS, GARY HUNT

Court Case No: 20-04517-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:

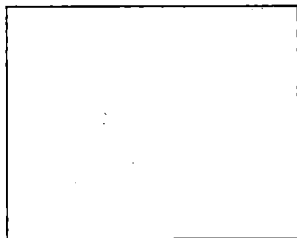
- ☐ A. Defendant has advised the Court that he has retained counsel or will retain counsel.
- ☐ B. The Court investigated Defendant's solvency and found the Defendant financially able to secure counsel.
- ☐ C. The Court investigated Defendant's solvency and provisionally appointed the Public Defender.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