UCN: 522020MM001896XXXXMM FL0520000

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

		1	OCCO 10500											
OBTS# Person ID 2007440	REPORT # SO2				56	3		DOC	роскет # 1830155					
326/140				SSN#										
Charge Description Felony Misdem	neanor Warrant	Traffic (Ordinance	Traff	fic Cit	tation #	(if any)		Co	ourt Case #				
BATTERY; DOMESTIC							·		20-	-01896-N	1M-1			
Defendant's Name (Last, First, Middle)	V4 DD	ĺ	DOB			Sex	Race	Ht	Wt	Hair	Eyes	Skin		
LAYTHAM, GERALD EDV			05/20/	1958	. [M	W	510	160	BRO	BRO			
		3558180		State FL	Sca	ars/Ma	rks/Tatt	oos/Physica	l Features					
Local Address (Street, City, State, Zip Code) 28488 US HWY 19 N LOT 10 CLEARWATER FL 33761						ephone 27922			ce of Birth Citizenship					
Permanent Address (Street, City, State, Zip Code) 28488 US HWY 19 N LOT 10 CLEARWATER FL 33761				Telephone Employed by / School 7279226186					ool					
Weapon Seized Type	WATER FE 33761	In	dication of					 Mental Y	N LINK	Indication of	V N	UNK		
☐Yes ☑No Co-Defendant's Name (Last, First, Middl			rug Influen			Heal	th Issues			Alcohol Influe	nce 🗷 [
Co-Delendant's Name (Last, First, Middle	e)					DOB	3	Sex	Race	In Custody	√ ∐Yes	□No		
								ļ		□Felony [Misdeme	anor		
Co-Defendant's Name (Last, First, Middle	e)			_		DOB	3	Sex	Race	In Custody	Yes			
										Felony [_			
			-			L								
The undersigned swears that he/she has re	asonable grounds to be	lieve that t	he above па	med defen	dant c	on the	. 80 _{da}	v of	EBRUAR	y 202	.0			
								, •		,	<u> </u>			
at approximately 10:00 PM	, at <u>28488 US</u> I	HWY 19	N, LOT 1	10, CLEA	١RW	/ATE	R, FL			in Pinellas Co,	untv did.			
ACTUALLY AND INTENTIONALL	Y TOUCH OR ST	RIKE DAI	NIFL LAY	THAM F	3101	OGIC	:AL BR	OTHER		LADITANIT	. ACAINI	CT.		
THE WILL OF DANIEL LAYTHAN	I TO-WIT: THE DE	FENDAN	NT SHOV	ED, PUN	ICHE	ED AN	ND HIT	THE VIO	TIM'S H	EAD INTO	, AGAIN 4 TABLE	3 1		
THE DEFENDANT GOT INTO AN ON THE BROTHER TO MAKE SU	JRF HF WAS OK	MENI W	/ITH HIS '	WIFE WI	HO L	_EFT	THEL		V. THE V	CAN CAN	IE TO CI	HECK		
DEFENDANT AND VICTIM GOT	INTO A PHYSICAL	. FIGHT (CAUSING	3 INJUIR	Y TO	ን THE	= VICT	IM'S FAC	FREOL	JIDE MEDIC	· A 1			
TREATMENT, UPON LOOKING	AT THE LOCTASIC	ON IN WH	HICH THE	E VICTIM	LSAL	ID TH	FAIT	FRCATS	IOPNI OC	CHIPEDIA	DCED!	ED A		
TABLE WITH A BROKEN LEG THAT HAD BLOOD SMEARED AROUND IT WHICH WAS CONSISTENT WITH THE VICTIM'S														
STATMENT. THE DEFEDNAT WAS HEAVY INTOXICATED AND WOULD NOT PROVIDED A STATMENT.														
									:9 /	78	<u></u>			
(ENTER SUFFICIENT EACTS/DA	TA FOR THE COL		OTABLIC						空/	1	181103 171103			
(ENTER SUFFICIENT FACTS/DA	.IA FOR THE COL	RITUE	:STABLIS	SH PROE	SABL	LE CA	NUSE I	DETERM	INATION) B	20 m			
			•						是其思	ું છં				
	04.00								공독됐	328	Sm.			
Contrary to Florida Statute/Ordinance 78	34.03			<u> -</u>					Fam (
ARREST DATE: 2/7/2020 Time 12:26 PM Aggravating/Mitigating Factors														
ARREST DATE: 2///2020 Time 12:26 PM Aggravating/Mitigating Factors 5														
Booking Officer: LEVEA 59816		nount of Bo	ond_	ZERO		Bond (Out Date		٦	Гime	Пат	75		
Victim Notified of Advisory?YesNo														
The probable cause determination is record from DAAYY.														
The probable cause determination is passed for: 24 Hrs 24 Hrs on showing of extraordinary circumstances Received by Booking: 2/9/2020 2:11:31 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. REQUEST FOR INVESTIGATIVE COSTS, F.S. 938.27(1) DATE OFFICER HOURS X PAY RATE OFFICER HOURS X PAY RATE OFFICER														
- L	acis in it are true,		DATE 02/08/2		FICE O-FE		Н	OURS X P	AY RATE 25.00	OR \$	COST 37.50			
ENT.	DINELLAS OCCUPATOS		02/08/2	2020 STA	FFOR	D D		1.5	25.00		7.5			
Declarant Signature	PINELLAS COUNTY SE	HERIFF	1											
, 3	Agency											ļ		
DEPUTY DANNY LUGO-FELIX 59808	311076614		ОТНЕ	R – Describ	e						.			
Printed Name	Declarant ID#		Continu	uation shee	t <u></u>	∐ Yes	<u> </u>	No	TO	TAL § \$75.00	<u> </u>			

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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.

	Trukther Certify That:	
☐ A. Defendant has advised the Cou	rt that he has retained counsel or will retain couns	el.
☐ B. The Court investigated Defendation	ant's solvency and found the Defendant financiall	v able to secure counsel
C. The Court investigated Defends	ant's solvency and provisionally appointed the Pu	blic Defender
D. The Defendant waived the righ	t to counsel at the first appearance only.	one Detender.
and a distribution warved the right	t to counsel at the first appearance only.	
	/ /	
2	(9/252)	
DATE AND	TIME	JVDGE
	. (JODGE
	//	,
	ν	
☐ I hereby waive the right to counse	el at the first appearance only.	
☐ I, having been found solvent an	d financially able to secure counsel, hereby wa	ive counsel until my attorney
an appearance in this case or until	I file a written request for a review of my solven	cv and ability to secure counsel
		of and do may to seedie counsel
		•
	· - ·	
	DEFEN	DANT'S SIGNATURE
Thumb Print		
		•
I HEREBY acknowledge receipt of a	copy of the foregoing Complaint and Advisory.	
S ====p****	Ty me totagoning complaint and radisory.	
DEFENDANT'S SIGNATURE	DEFENDANCE ATTORNEY CONTRACTOR	
DEFENDANT S SIGNATURE	DEFENDANT'S ATTORNEY'S SIGNATURE	DATE

COMPLAINT/ARRES	U T AFFIDAVIT	ICN: 522020 CIRCUI	OMMOO T/COU	1896X U NTY	XXX	XMM DUR'	· Γ – Pl	NELLA	AS CO	FL0520 UNTY, FL	0000 ORID			
OBTS#		REPORT # SO20-43563			1	роскет # 1830155								
3207 140			S	SSN#					J					
Charge Description Felony X Misdem	eanor Warrant I	Traffic Ordin	nance	Traffi	ie Cit	ation #	(if any)		C	ourt Case #				
BATTERY; DOMESTIC	•								20-01896-MM-2					
Defendant's Name (Last, First, Middle)		DOE		-		Sex	Race	Ht	Wt	Hair	Eyes	Skin		
LAYTHAM, GERALD EDW		05	/20/19	958		M	W	510	160	BRO	BRO			
Alias		3558180		State FL	Sca	rs/Mai	ks/Tatto	os/Physica	Features	<u> </u>	<u> </u>			
Local Address (Street, City, State, Zip Code) 28488 US HWY 19 N LOT 10 CLEARWATER FL 33761					Telephone Place of Birth KANSASCITY				Citizensl USA	Citizenship USA				
Permanent Address (Street, City, State, Z 28488 US HWY 19 N LOT 10 CLEAR	ip Code) WATER FL 33761				7279226186				d by / Sch	lool				
Weapon Seized Type □Yes ⊠No		Indica:	tion of nfluence	Y N I	UNK		ation of th Issues	Mental Y		Indication of		UNK		
Co-Defendant's Name (Last, First, Middle	è)		minuence	<u> </u>	<u> </u>	DOB		Sex	Race	Alcohol Influe				
										Felony [
Co-Defendant's Name (Last, First, Middle	:)					DOB		Sex	Race	In Custody				
										Felony [
									 					
The undersigned swears that he/she has re	asonable grounds to be	lieve that the ab	ove name	ed defend	lant o	n the _	08 _{da}	y ofF	EBRUAR	y 202	.0			
at approximately 11:37 PM , at 28488 US 19 N LOT #10, CLEARWATER, FL 33761 , in Pinellas County did:														
THE DEFENDANT ACTUALLY AND INTENTIONALLY TOUCHED LEE ANN LAYTHAM HIS LEGAL WIFE														
AND CO-HABITANT, AGA	INST THE WILI	L OF LEE	ANN I	LAYTI	HAI	M TO	TIW-C	: THE I	DEFEN	NDANT PO)		
THE CONTENT OF AN AL	COHOLIC BEV	ERAGE C	HT NC	E VIC	TIN	/I'S H	IEAD			,	OILE			
THE DEFENDANT AND VI	CTIM WERE IN	NA VERB	AL AR	GUM	EN	TAE	OUT	A FAM	ILY M	EMBER T	HAT W	/AS		
CURRENTLY IN THE ICU	AT THE HUSP	IIAL. IHE	· VIC I	IM ST	ΓAΤ	ED	DURI	NG TH	EARG	UMENT 7	THE			
DEFENDANT ACTUALLY	AND INTENTIC	MALLY P	OURE	D AN	AL	.COF	HOLIC	BEAF	RAGE	ON THE	VICTI	⁄I'S		
HEAD WHICH WAS AGAINST HER WILL.														
THE DEFENDANT AND VICTIM HAVE BEEN LEGALLY MARRIED FOR THE PAST 5 YEARS.														
THE DEFENDANT AND VICTIM HAVE BEEN LEGALLY MARRIED FOR THE PAST 5 YEARS. S														
									- 58 98)		C			
Contrary to Florida Statute/Ordinance_78	34.03								202					
contrary to Florida Statute/Ordinance	700								305	W O	ASSIST IT			
ARREST DATE: 2/8/2020 Time 11:26 PM . Aggravating/Mitigating Factors														
Booking Officer: LEVEA 59816 Amount of Bond ZERO 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: Dis probable cause Dis 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: 2/9/2020 2:12:52 AM														
Pursuant to F.S. 92.525 and under penalty of perjury, I declare that I have REQUEST FOR INVESTIGATIVE COSTS, F.S. 938.27(1)														
read the foregoing document and that the f	acts in it are true.	I	DATE 02/08/202	OFI	FICE O-FEI	R		OURS X PA			COST			
Det 1	DINELLA COMPA		02/08/202					1.5	25.00			1		
Declarant Signature	Agency	TERIFF -												
Q		-												
Printed Name	311076614 Declarant ID#		OTHER -			<u> </u>								
	Decialant ID#	(Continuat	ion sheet	<u> </u>	Yes	<u> </u>	No	TO	TAL \$ \$0.00				

files

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 CER		
☐ A. Defendant has advised the Court	that he has retained cou	nsel or will retain counsel.	
☐ B The Court investigated Defendan	t's solvency and found t	he Defendant financially able to	secure counsel
C. The Court investigated Defendan	t's solvency and provision	onally appointed the Public Defe	ender
☐ D. The Defendant waived the right t	o counsel at the first apr	pearance only	iluci.
	o counsel at the first app	curance only.	
	- / · /		1
	2/9/200		
DATE AND T	IME	Jupg	Е
☐ I hereby waive the right to counsel	at the first announce of		
I having been found solvent and	financially oblate see	my.	
☐ I, having been found solvent and	file a written request for	ire counsel, hereby waive cour	isel until my attorney
an appearance in this case or until I	The a written request 101	r a review of my solvency and a	bility to secure counsel
	•		
. '			
		DEFENDANT'S	S SIGNATURE
Thumb Print			
I HEREBY acknowledge receipt of a co	opy of the foregoing Cor	nplaint and Advisory.	
<u> </u>			
DEFENDANT'S SIGNATURE	DEFENDANT'S ATTO	PRNEY'S SIGNATURE	DATE