

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

OBTS #		REPORT # 2020015582	DOCKET # 1836105
Person ID 311184485		SSN# [REDACTED]	
Charge Description	☐ Felony ☒ Misdemeanor ☐ Warrant ☐ Traffic ☐ Ordinance	Traffic Citation # (if any)	Court Case #
Charge BATTERY; DOMESTIC			20-05101-MM-1
Defendant's Name (Last, First, Middle) DEEP, HARSH		DOB 01/06/1988	Sex M Race W Ht 511 Wt 195 Hair BLK Eyes BRO Skin MED
Alias	DL # D100-320-88-006-0	State FL	Scars/Marks/Tattoos/Physical Features
Local Address (Street, City, State, Zip Code) 7400 15TH ST N ST PETERSBURG FL 33702		Telephone 8482650555	Place of Birth INDIA
Permanent Address (Street, City, State, Zip Code) 7400 15TH ST N ST PETERSBURG FL 33702		Telephone 8482650555	Employed by / School UBER
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 27 day of APRIL, 2020, at approximately 1:34 AM, at 7400 15TH ST N, in Pinellas County did:

ACTUALLY AND INTENTIONALLY TOUCH OR STRIKE NATALIE POLLARD, HIS SISTER IN LAW AND CO-HABITANT, AGAINST THE WILL OF NATALIE POLLARD, TO-WIT: PUSHED THE VICTIM AND THEN PUNCHED HER IN THE MOUTH, LEAVING A VISIBLE CUT ON THE INSIDE OF HER CHEEK.

THE DEFENDANT PUSHED THE VICTIM AFTER GETTING INTO A VERBAL ARGUMENT WITH HER. AFTER SHE STOOD BACK UP FROM BEING PUSHED, HE PUNCHED HER WITH HIS RIGHT HAND IN HER RIGHT CHEEK. THIS PUNCH LEFT SLIGHT REDNESS ON HER CHEEK AND A VISIBLE CUT ON THE INSIDE OF HER CHEEK. THE VICTIM DESIRES PROSECUTION.

Contrary to Florida Statute/Ordinance 784.03.

ARREST DATE: 4/27/2020 Time 2:20 AM . Aggravating/Mitigating Factors DOMESTIC

Booking Officer: EELS, C 56501 Amount of Bond NO BOND Bond Out Date _____ Time 6:36 ☐ 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: 4/27/2020 3:35:08 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.  Declarant Signature OFFICER WILLIAM THOMAS 48635 Printed Name ST. PETERSBURG POLICE Agency 311351814 Declarant ID#	REQUEST FOR INVESTIGATIVE COSTS, F.S. 938.27(1) <table style="width:100%;"> <tr> <th>DATE</th> <th>OFFICER</th> <th>HOURS X PAY RATE</th> <th>OR</th> <th>COST</th> </tr> <tr> <td>04/27/2020</td> <td>W. THOMAS</td> <td>2 25.00</td> <td></td> <td>\$50.00</td> </tr> <tr> <td colspan="5">OTHER – Describe _____</td> </tr> <tr> <td colspan="5">Continuation sheet ☐ Yes ☐ No</td> </tr> <tr> <td colspan="4"></td> <td>TOTAL \$ 50.00</td> </tr> </table>	DATE	OFFICER	HOURS X PAY RATE	OR	COST	04/27/2020	W. THOMAS	2 25.00		\$50.00	OTHER – Describe _____					Continuation sheet ☐ Yes ☐ No									TOTAL \$ 50.00
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 FILED
 COURT ASSISTANCE
 2020 APR 27 AM 6:36

Defendant DEEP, HARSH **Court Case No:** 20-05101-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.

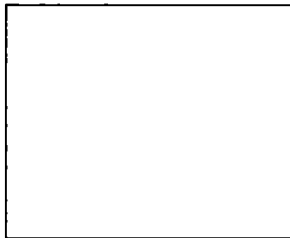
I FURTHER CERTIFY THAT:

- ☐ 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
Plat Cole

- ☐ 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