UCN: N/C

FL0520000

COMPLAINT/ARREST	T AFFIDAVIT – CIR	CUIT/C	OUNTY	CC	OUR'	$\mathbf{\Gamma} - \mathbf{P}$	INEL	LA	s cou	NTY, FL	ORIDA	4		
OBTS#	report # SO			19-414388					роскет# 1825595					
Person ID 2738278		SSN# 000-00-0000												
Charge Description Felony X Misdemeanor Warrant Traffic Ordinance				Traffic Citation # (if any)					Court Case #					
Charge DRIVING UNDER THE INFLUENCE BAL .15 OR GREATER OR MINOR IN VEHICLE				AD0AS1E				AD0AS1E-1						
Defendant's Name (Last, First, Middle) UPSON, IAN ALEXANDER 03						Ht 508		wt 150	Hair BRO	Eyes BLU	Skin LGT			
Alias	,	State	Sca	ars/Ma	rs/Marks/Tattoos/Physical Features						120.			
Local Address (Street, City, State, Zip Code) 6700 150TH AVE N 413 CLEARWATER FL 33764					ephone 27492	Place of Birth					Citizenship USA			
Permanent Address (Street, City, State, Zip Code) 611 N WAHSATCH AVE COLORADO SPRINGS CO 80903				Tele	Telephone Employed by / School					ol				
Weapon Seized Type Indic											UNK			
Co-Defendant's Name (Last, First, Middle	Drug Influe	ice [] E	DOB Sex Race In Custody											
										Felony				
Co-Defendant's Name (Last, First, Middle				DOB Sex			ex	Race						
										Felony [
The undersigned swears that he/she has re	asonable grounds to believe tha	t the above n	amed defend	dant	on the _.	28 _{da}	ay of	DE	ECEMBER	, 201	<u>19</u> ,			
at approximately 1:53 AM	, at _US HWY 19 / RO	OSEVELT	ΓAVE							in Pinellas Co	untv did:			
REASON FOR STOP: DEFENDANT FAILED LIGHTS OR TAIL LIGHTS ON AND WAS WE	TO YIELD COMING OUT OF TH			MAD	DE AN II	MPROPE	ER TURN	I. DE				T HEAD		
THEN AND THERE UNLAWFULLY DRIVE A	.ND/OR BE IN ACTUAL PHYSIC#	AL CONTROL	OF A MOTO	R VE	HICLE	WITHIN	PINELLA	S C	OUNTY. FL	ORIDA WHILE	UNDER T	ΉE		
INFLUENCE OF AN ALCOHOLIC BEVERAG IMPAIRED HAVING A BAL OF .15.	E, A CONTROLLED SUBSTANC	E AND/OR A	NY CHEMICA	AL SU	JBSTAN	ICE TO 1	THE EXT	ENT	THAT HIS	NORMAL FAC	CULTIES W	ERE		
BRAC: 171/.177 BREATH: DISTINCT BALANCE: OFF CENTER / SWAY EYES: E PRIOR CONVICTIONS: N/A.	3LOODSHOT/WATERY/DILATED)												
DEFENDANT PERFORMED POORLY ON FI	ELD SOBRIETY TESTS.													
COURT INFORMATION: SOUTH COUNTY T	RAFFIC COURT 1/27/20 @ 1:30	PM CITATIO	N #: AD0AS1	E										
DEFENDANT HAD UNSTEADY BALANCE A STRONG ODOR OF AN ALCOHOLIC BEVER HGN WITH AN ANGLE OF ONSET OF 35 DE THE WALK AND TURN AND ONE LEG STAN MODIFIED.	RAGE EMITTING FROM HIS BRE EGREES, DEFENDANT DISPLAY	EATH. DEFEN	DANT ADMI	TTED	TO CO	DNSUMI	NG ALCO	OHO	L. DEFEND	DANT DISPLAY IS CLUES OF TO NOSE AND	ED 6 CLUI	ES OF		
Contrary to Florida Statute/Ordinance_3	16.193.1								皇面	33	20 17			
ARREST DATE: 12/28/2019	. Aggravat	gravating/Mitigating Factors												
Booking Officer: ANTHONY, S 5865	Amount of	f Bond	500**		_Bond	Out Dat	e			Time N	a.m.	□p.m.		
Victim Notified of Advisory?Yes	No Injuries to	Victim?	Yes N	Vо		N	/Iedical T	Freat	tment to V	ictim? CO	es No	i		
The Court reviewed this complaint and find	ds there: □is probable cause □]is not proba	ble cause to	detai	in defer	ndant 🗌	Bond A	ction	, if any:					
The probable cause determination is passed	l for: □24 Hrs □24 Hrs on sho	owing of extr	aordinary ci	rcun	nstance	s Red	ceived by	Bool	king: 12/28/	2019 3:56:32 A	M	•		
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) ATE OFFICER HOURS X PAY RATE OR COST 2/28/2019 L. BLAKE 3 25.00 \$75.00											
		-12/2	0/2019 L. D						23.00		75.00			
Declarant Signature	PINELLAS COUNTY SHERIFF	.												
C	Agency													
DEPUTY LEVI BLAKE 59881 Printed Name	311142959 Declarant ID#		ER – Describ			7 N.			70 AT 0 676 /	············				
A A ARANGE A TOSTILO	Deciai ant ID#	Conti	inuation shee	<u>ت لــــ</u>	Y	es	No		10	TAL § \$75.0	, <u>, </u>			

e . }

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.
DEFENDANT'S SIGNATURE
DEI ENDAM S SIGNATURE
Thumb Print
I HEREBY acknowledge receipt of a copy of the foregoing Complaint and Advisory.
DEFENDANT'S SIGNATURE DEFENDANT'S ATTORNEY'S SIGNATURE DATE