

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

OBTS #		REPORT # SO20-139862		DOCKET # 1837938	
Person ID 311007833			SSN# [REDACTED]		
Charge Description ☐ Felony ☒ Misdemeanor ☐ Warrant ☐ Traffic ☐ Ordinance		Traffic Citation # (if any)		Court Case #	
Charge DISORDERLY CONDUCT (LICENSE ESTABLISHMENT)				20-06414-MM-1	
Defendant's Name (Last, First, Middle) GALVAO, JARED FRANCIS		DOB 12/11/2000	Sex M	Race W	Ht 511
		Wt 150	Hair BRO	Eyes BRO	Skin MED
Alias	DL # G410-426-00-451-0	State FL	Scars/Marks/Tattoos/Physical Features		
Local Address (Street, City, State, Zip Code) 5666 BAYVIEW DRIVE SEMINOLE FL 33772		Telephone 727-871-3668	Place of Birth FLOREIDA		Citizenship USA
Permanent Address (Street, City, State, Zip Code) 5666 BAYVIEW DRIVE SEMINOLE FL 33772		Telephone 727-871-3668	Employed by / School BOAT WORK		
Weapon Seized Type ☐ Yes ☒ No FIST		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) JUSTIN GALVAO		DOB 06/05/1999	Sex M	Race W	In Custody ☒ Yes ☐ No ☐ Felony ☒ Misdemeanor
Co-Defendant's Name (Last, First, Middle) GABRIELLE JOHN		DOB 01/17/1999	Sex F	Race W	In Custody ☒ Yes ☐ No ☐ Felony ☒ Misdemeanor

The undersigned swears that he/she has reasonable grounds to believe that the above named defendant on the 22 day of MAY, 2020,

at approximately 10:47 PM, at 15045 MADEIRA WAY, in Pinellas County did:

DID THEN AND THERE ENGAGE IN SUCH CONDUCT AS TO CONSTITUTE DISORDERLY CONDUCT, TO-WIT: THE DEFENDANT WAS IN THE BAR WAS INVOLVED IN A FIGHT INSIDE THE BAR.

ON 05/22/2020 AT APPROXIMATELY 2249 HOURS, I RESPONDED TO THE SALTWATER HIPPIE BAR WHERE I OBSERVED A LARGE CROWD EXITING. MANAGEMENT ADVISED THERE WAS A FIGHT INSIDE OF THE ESTABLISHMENT. I REVIEWED THE VIDEO FOOTAGE FROM INSIDE OF THE BAR AT THE TIME OF THE FIGHT. THE VIDEO FOOTAGE SHOWED THE DEFENDANT PUNCH ANOTHER PARTON FOR NO REASON WHILE HE WAS BEING ESCORTED OUT OF THE BAR.

THE DEFENDANT WAS HIGHLY INTOXICATED AND UNDER AGE (19).

Contrary to Florida Statute/Ordinance 877.03

ARREST DATE: 5/22/2020 Time 11:21 PM . Aggravating/Mitigating Factors CB

Booking Officer: SEAY, E 58861 Amount of Bond 250*** Bond Out Date 5/23/20 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: 5/23/2020 12:55:53 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 STUART KELLMAN 58795 03332990 Printed Name Declarant ID#		REQUEST FOR INVESTIGATIVE COSTS, F.S. 938.27(1) DATE 05/22/2020 OFFICER S. KELLMAN HOURS 1.5 X PAY RATE 25.00 OR COST \$37.50	
		OTHER – Describe <u>COINVESTIGATOR COURT ASSISTANCE</u> Continuation sheet ☐ Yes ☐ No TOTAL \$ 37.50	

Defendant GALVAO, JARED FRANCIS **Court Case No:** 20-06414-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.

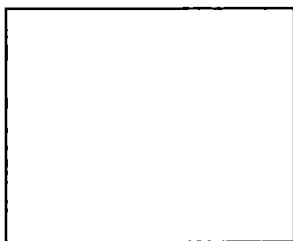
I FURTHER CERTIFY THAT:

- ☐ 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