UCN: 522020MM006414XXXXMM FL0520000

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)	DOB	Sex	Race	Ht	Wt	Hair	Eyes	Skin
GALVAO, JARED FRANCIS	12/11/2000	M	W	511	150	BRO	BRO	MED

Alias	DL #	State	Scars/Marks/Tattoos/Physical Features
	G410-426-00-451-0	FL	

Local Address (Street, City, State, Zip Code)	Telephone	Place of Birth	Citizenship
5666 BAYVIEW DRIVE SEMINOLE FL 33772	727-871-3668	FLOREIDA	USA
Permanent Address (Street, City, State, Zip Code)	**Telephone**	**Employed by / School**	
5666 BAYVIEW DRIVE SEMINOLE FL 33772	727-871-3668	BOAT WORK	

Weapon Seized Type	Indication of Drug Influence Y N UNK	Indication of Mental Health Issues Y N UNK	Indication of Alcohol Influence Y N UNK
☐Yes ☒No FIST	☐ ☒ ☐	☐ ☒ ☐	☒ ☐ ☐

Co-Defendant's Name (Last, First, Middle)	DOB	Sex	Race	In Custody / Felony / Misdemeanor
JUSTIN GALVAO	06/05/1999	M	W	☒Yes ☐No ☐Felony ☒Misdemeanor
Co-Defendant's Name (Last, First, Middle)	**DOB**	**Sex**	**Race**	**In Custody / Felony / Misdemeanor**
GABRIELLE JOHN	01/17/1999	F	W	☒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.

Declarant Signature	Agency
	PINELLAS COUNTY SHERIFF
DEPUTY STUART KELLMAN 58795	03332990
Printed Name	Declarant ID#

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

DATE	OFFICER	HOURS X PAY RATE OR	COST
05/22/2020	S. KELLMAN	1.5 25.00	$37.50

2020 MAY 23 AM 7:40

COURT ASSISTANCE

FILED

OTHER – Describe

Continuation sheet ☐Yes ☐No TOTAL $ $37.50

COCR59 (Revised 10/2014)
844307 Copies to:

Court

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**