

UCN: ***

FL0520300

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

OBTS #	REPORT # CW20-40672		DOCKET # 1834200	
Person ID	311148672	SSN#	[REDACTED]	
Charge Description	<input type="checkbox"/> Felony <input checked="" type="checkbox"/> Misdemeanor <input type="checkbox"/> Warrant <input type="checkbox"/> Traffic <input type="checkbox"/> Ordinance	Traffic Citation # (if any)	Court Case #	
Charge	DRIVING UNDER THE INFLUENCE	ACEV8PE	ACEV8PE-1	
Defendant's Name (Last, First, Middle)	WRAY, JASMINE MARIE	DOB	Sex	Race
		06/25/1998	F	W
			Ht	Wt
			508	150
			Hair	Eyes
			BLN	BLU
			Skin	LGT
Alias	DL # W-600-433-98-725-0	State FL	Scars/Marks/Tattoos/Physical Features	
			7 TATTOOS	
Local Address (Street, City, State, Zip Code)	401 ROSERY RD #201 LARGO FL 33770	Telephone	Place of Birth	Citizenship
		7279001441	VA	YES / US
Permanent Address (Street, City, State, Zip Code)	401 ROSERY RD #201 LARGO FL 33770	Telephone	Employed by / School	
		7279001441	CRABBYS	
Weapon Seized Type	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No NA	Indication of Drug Influence	Y N UNK	Indication of Mental Health Issues
		<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>
Co-Defendant's Name (Last, First, Middle)		DOB	Sex	Race
			In Custody	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor	
Co-Defendant's Name (Last, First, Middle)		DOB	Sex	Race
			In Custody	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor	

The undersigned swears that he/she has reasonable grounds to believe that the above named defendant on the 17 day of MARCH, 2020

at approximately 11:32 PM, at JEFFORDS ST / HAMLET AVE CLW FL, in Pinellas County did:

DID UNLAWFULLY OPERATE A MOTOR VEHICLE IN THE STATE OF FLORIDA WHILE UNDER THE INFLUENCE OF AN ALCOHOLIC BEVERAGE AND / OR CONTROLLED SUBSTANCE TO THE EXTENT THAT HER NORMAL FACULTIES WERE IMPAIRED. THE DEF. WAS OPERATING A 2018 MAZDA 4DR BLUE IN COLOR BEARING A FLA TAG OF 3115VK. THE DEF. DROVE OFF OF THE ROADWAY IN TO A DITCH. THE DEF. WAS FOUND IN THE DRIVERS SEAT, THE CAR WAS RUNNING AND THE LIGHTS WERE ON. THE DEF. HAD THE STRONG ODOR OF AN ALCOHOLIC BEVERAGE ON HER BREATH AS SHE SPOKE, SHE HAD BLOODSHOT GLASSY EYES, HER SPEECH WAS SLURRED AND MUMBLED. THE DEF. WAS UNSTEADY ON HER FEET AS SHE STOOD. THE DEF. DID POORLY ON FST'S. POST MIRANDA THE DEF. REFUSED TO ANSWER ANY QUESTIONS.

BREATH TEST RESULTS WERE: REFUSED

NO. CO. TRAFFIC COURT MONDAY 4-13-2020 @ 0900 HOURS. CITATION NUMBER: ACEV8PE

Contrary to Florida Statute/Ordinance 316.193.1

ARREST DATE: 3/18/2020 Time 12:30 AM. Aggravating/Mitigating Factors NO PRIOR DUI

Booking Officer: SEAY, E 58861 Amount of Bond 500** 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: [] 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 3/18/2020 3:32 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.

David Bruneau
 Declarant Signature
 OFFICER DAVID BRUNEAU 5285
 Printed Name

CLEARWATER POLICE DEPT.
 Agency
 00920616
 Declarant ID#

REQUEST FOR INVESTIGATIVE COSTS, F.S. 938.27(1)			
DATE	OFFICER	HOURS X PAY RATE	COST
03/18/2020	BRUNEAU	3.0 x 29.14	87.42
	SGT CAMERON	1.0 x 30.00	30.00
OTHER - Describe VIDEO			3.50
Continuation sheet [] Yes [] No			TOTAL \$ 120.92

Defendant WRAY, JASMINE MARIE **Court Case No:** ACEV8PE-1

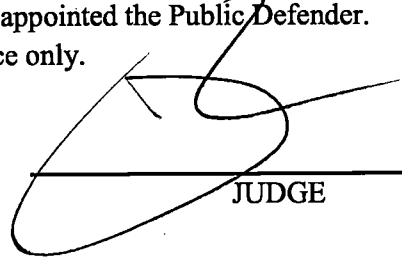
ADVISORY AND SOLVENCY HEARING

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:

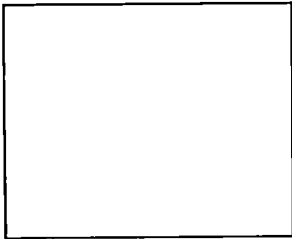
- A. Defendant has advised the Court that he has retained counsel or will retain counsel.
- B. The Court investigated Defendant's solvency and found the Defendant financially able to secure counsel.
- C. The Court investigated Defendant's solvency and provisionally appointed the Public Defender.
- D. 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