

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

OBTS #		REPORT # CW20-78377		DOCKET # 1838618																																			
Person ID 311526502		SSN# 000-00-0000																																					
Charge Description ☐ Felony ☒ Misdemeanor ☐ Warrant ☐ Traffic ☐ Ordinance		Traffic Citation # (if any)		Court Case #																																			
Charge RESISTING AN OFFICER; WITHOUT VIOLENCE (OBSTRUCTION)				20-06793-MM-1																																			
Defendant's Name (Last, First, Middle) MALACINSKI, JOHN PAUL		DOB 05/05/1980	Sex M	Race W	Ht 506	Wt 162	Hair BRO	Eyes BRO	Skin																														
Alias	DL # 25211963	State FL	Scars/Marks/Tattoos/Physical Features																																				
Local Address (Street, City, State, Zip Code) 3431 CONCORD RD ASTON PA 19014		Telephone 352-350-5046		Place of Birth PA		Citizenship US																																	
Permanent Address (Street, City, State, Zip Code) 3431 CONCORD RD ASTON PA 19014		Telephone 352-350-5046		Employed by / School																																			
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 <u>31</u> day of <u>MAY</u> , 2020, at approximately <u>1:51</u> AM, at <u>395 MANDALAY AVE</u> , in Pinellas County did: UNLAWFULLY OBSTRUCT OR OPPOSE OFC. S. VENEZIA, A DULY AND LEGALLY CONSTITUTED LAW ENFORCEMENT OFFICER OF THE CLEARWATER POLICE DEPARTMENT, WHILE IN THE LAWFUL EXECUTION OF A LEGAL DUTY, WHICH CONSISTED OF INVESTIGATING A BATTERY WITHOUT OFFERING OR DOING VIOLENCE TO THE PERSON OF THE OFFICER. THE DEF WAS ACTIVILY ENGAGED IN A PHYSICAL FIGHT WITH ANOTHER INDIVIDUAL AND WAS SEPERATED. WHILE ATTEMPTING TO TAKE THE SUBJECT INTO CUSTODY, THE DEF PULLED HIS ARM AWAY FROM YOUR AFFIANT AND BEGAN BRACING, TENSING AND PULLING AWAY FROM ME. THE DEF CONTINUED TO OFFER RESISTANCE WHILE BEING TAKEN INTO CUSTODY, PLACING HIS HANDS UNDER HIS BODY ON THE GROUND, PREVENTING LAW ENFORCEMENT TO PLACE HANDCUFFS ON HIM. AFTER A BRIEF STRUGGLE, THE DEF WAS TAKEN INTO CUSTODY. Contrary to Florida Statute/Ordinance <u>843.02</u> . ARREST DATE: <u>5/31/2020</u> Time <u>1:51</u> AM. Aggravating/Mitigating Factors <u>CB</u> Booking Officer: <u>LEIPSKI 59118</u> Amount of Bond <u>150</u> Bond Out Date <u>05/31/20</u> Time <u>11:54</u> ☐ 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: 5/31/2020 5:10:54 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 S. VENEZIA CW8669 Printed Name CLEARWATER POLICE DEPT. Agency 02008511 Declarant ID#		REQUEST FOR INVESTIGATIVE COSTS, F.S. 938.27(1) <table border="1" style="width:100%"><tr><th>DATE</th><th>OFFICER</th><th>HOURS</th><th>X PAY RATE</th><th>OR</th><th>COST</th></tr><tr><td>05/31/2020</td><td>S. VENEZIA</td><td>2</td><td>29.14</td><td></td><td></td></tr><tr><td colspan="6">OTHER – Describe</td></tr><tr><td colspan="6">Continuation sheet ☐ Yes ☐ No</td></tr><tr><td colspan="6">TOTAL \$ 0.00</td></tr></table>								DATE	OFFICER	HOURS	X PAY RATE	OR	COST	05/31/2020	S. VENEZIA	2	29.14			OTHER – Describe						Continuation sheet ☐ Yes ☐ No						TOTAL \$ 0.00					
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Defendant MALACINSKI, JOHN PAUL **Court Case No:** 20-06793-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.

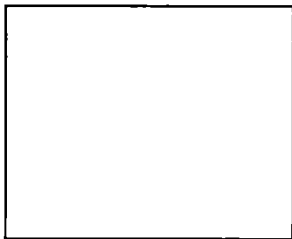
I FURTHER CERTIFY THAT:

- ☐ 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

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

OBTS #	REPORT # CW20-78377		DOCKET # 1838618	
Person ID	311526502		SSN# 000-00-0000	
Charge Description	☐ Felony ☒ Misdemeanor ☐ Warrant ☐ Traffic ☐ Ordinance	Traffic Citation # (if any)		Court Case #
Charge	BATTERY; SIMPLE		20-06793-MM-2	
Defendant's Name (Last, First, Middle)	DOB	Sex	Race	Ht
MALACINSKI, JOHN PAUL	05/05/1980	M	W	506
Wt	Hair	Eyes	Skin	
162	BRO	BRO		
Alias	DL #	State	Scars/Marks/Tattoos/Physical Features	
	25211963	FL		
Local Address (Street, City, State, Zip Code)	Telephone	Place of Birth	Citizenship	
3431 CONCORD RD ASTON PA 19014	352-350-5046	PA	US	
Permanent Address (Street, City, State, Zip Code)	Telephone	Employed by / School		
3431 CONCORD RD ASTON PA 19014	352-350-5046			
Weapon Seized Type	Indication of Drug Influence	Indication of Mental Health Issues	Indication of Alcohol Influence	
☐ Yes ☒ No	☐ Y ☒ N ☐ UNK	☐ Y ☒ N ☐ UNK	☐ 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 31 day of MAY, 2020,

at approximately 1:51 AM, at 395 MANDALAY AVE, in Pinellas County did:

DID THEN AND THERE ACTUALLY AND INTENTIONALLY TOUCH OR STRIKE (ENTER VICTIM NAME) AGAINST THE WILL OF JOSEPH MIANI AND DID NOT CAUSE BODILY HARM.

DEF WAS INVOLVED IN VERBAL ALTERCATION WITH THE VICTIM'S GIRLFRIEND IN FRONT OF THE ESTABLISHMENT. THE DEF CONTINUED TO HARASS AND TRY TO FIGHT THE FEMALE. THE VICTIM TRIED TO SEPERATE THE TWO WHEN THE DEF STRUCK THE VICTIM IN THE FACE WITH A CLOSED FIST AND BEGAN FIGHTING HIM. DEF WAS TAKEN INTO CUSTODY UPON LAW ENFORCEMENT ARRIVAL.

Contrary to Florida Statute/Ordinance 784.03.

ARREST DATE: 5/31/2020 Time 1:51 AM

Aggravating/Mitigating Factors CB

Booking Officer: LEIPSKI 59118 Amount of Bond 500 Bond Out Date 05/31/20 Time 11:54 ☐ 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: 5/31/2020 5:10:34 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.


CLEARWATER POLICE DEPT.

Declarant Signature Agency

OFFICER S. VENEZIA CW8669 02008511

Printed Name Declarant ID#

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

DATE	OFFICER	HOURS X PAY RATE	OR	COST
05/31/2020	S. VENEZIA	2 29.14		\$58.28

OTHER – Describe

Continuation sheet ☐ Yes ☐ No

TOTAL \$ 58.28

Defendant MALACINSKI, JOHN PAUL

Court Case No: 20-06793-MM-2

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.

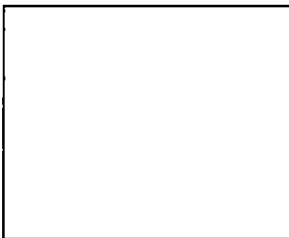
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DATE AND TIME

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