

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

OBTS #	REPORT # 2020-021335		DOCKET # 1839418	
Person ID	311531692		SSN# [REDACTED]	
Charge Description	Felony ☐ Misdemeanor ☒ Warrant ☐ Traffic ☐ Ordinance ☐	Traffic Citation # (if any)		Court Case #
Charge	DISORDERLY INTOXICATION (DISTURBANCE)		20-07301-MM-1	
Defendant's Name (Last, First, Middle)	DOB	Sex	Race	Ht
LYONS, JONATHAN EDWARD	10/30/1992	M	W	604
Wt	Hair	Eyes	Skin	
200	BRO	BRO	FAR	
Alias	DL #	State	Scars/Marks/Tattoos/Physical Features	
	L520-425-92-390-0	FL		
Local Address (Street, City, State, Zip Code)	Telephone	Place of Birth	Citizenship	
300 10TH ST S, 533 ST PETERSBURG FL 33705		MD	USA	
Permanent Address (Street, City, State, Zip Code)	Telephone	Employed by / School		
300 10TH ST S, 533 ST PETERSBURG FL 33705				
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 11 day of JUNE, 2020,

at approximately 4:51 AM, at 300 10TH ST S, in Pinellas County did:

WAS THEN AND THERE INTOXICATED AND CAUSED A PUBLIC DISTURBANCE, TO-WIT: SCREAMING IN THE STREET DISTURBING RESIDENTS OF WAYLAND APARTMENT COMPLEX BY KNOCKING ON DOORS.

ARRESTED WAS STUMBLING AND KNOCKING ON MULTIPLE APARTMENT DOORS. UPON OFFICER ARRIVAL, ARRESTED WAS OBSERVED SCREAMING INCOMPREHENSIBLY. ARRESTED SHOWED SIGNS OF BEING HIGHLY INTOXICATED, INCLUDING BUT NOT LIMITED TO, HIS SLURRED SPEECH, LACK OF BALANCE, AND BLOODSHOT WATERY EYES.

Contrary to Florida Statute/Ordinance 856.011

ARREST DATE: 6/11/2020 Time 5:04 AM

. Aggravating/Mitigating Factors _____

Booking Officer: SEAY, E 58861

Amount of Bond 100

Bond Out Date 6/11/20 Time 19:44 ☐ 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: 6/11/2020 6:39:46 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.

[Signature]
Declarant Signature
ST. PETERSBURG POLICE
Agency
OFFICER ALEXANDER POST 48495
Printed Name
311270549
Declarant ID#

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

DATE	OFFICER	HOURS X PAY RATE	OR	COST
06/11/2020	POST	2 25.00		\$50.00

OTHER – Describe _____

Continuation sheet ☐ Yes ☐ No TOTAL \$ 50.00

Defendant LYONS, JONATHAN EDWARD **Court Case No:** 20-07301-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.

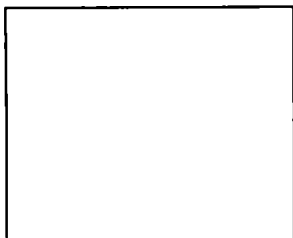
I FURTHER CERTIFY THAT:

- ☐ 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