

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

OBTS #	REPORT # SO20-108685		DOCKET # 1835632	
Person ID	311509697		SSN# [REDACTED]	
Charge Description	☒ Felony	☐ Misdemeanor	☐ Warrant	☐ Traffic
Charge	UNLAWFUL CONVEYANCE OF FUEL; OBTAINING FRAUDULENTLY		Traffic Citation # (if any)	Court Case #
				20-03700-CF-1
Defendant's Name (Last, First, Middle)	DOB	Sex	Race	Ht
SARDINAS CURBELO, JULIO	12/07/1980	M	H	505
Wt	Hair	Eyes	Skin	
160	BLK	BRO	MED	
Alias	DL #	State	Scars/Marks/Tattoos/Physical Features	
	S635-420-80-447-0	FL		
Local Address (Street, City, State, Zip Code)	Telephone	Place of Birth	Citizenship	
4014 W WATERS AVE APT 606 TAMPA FL 33614		CUBA	US	
Permanent Address (Street, City, State, Zip Code)	Telephone	Employed by / School		
4014 W WATERS AVE APT 606 TAMPA FL 33614				
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 17 day of APRIL, 2020,

at approximately 7:00 AM, at 32490 US19 PALM HARBOR, in Pinellas County did:

DID UNLAWFULLY MAINTAIN OR POSSESS ANY CONVEYANCE OR VEHICLE THAT IS EQUIPPED WITH, FUEL TANKS, BLADDERS, DRUMS, OR OTHER CONTAINERS THAT DO NOT CONFORM TO 49 C.F.R. OR HAVE NOT BEEN APPROVED BY THE UNITED STATES DEPARTMENT OF TRANSPORTATION FOR THE PURPOSE OF HAULING, TRANSPORTING, OR CONVEYING MOTOR OR DIESEL FUEL OVER ANY PUBLIC HIGHWAY.

THE DEFENDANT DID COME TO THE AFOREMENTIONED GAS STATION ON 4/17/20 AND PROCEEDED TO PUMP 38.406 GALLONS OF DIESEL FUEL FROM PUMP #1 VALUED AT \$95.98 INTO HIS PERSONALLY OWNED FORD F-350 BEARING FLORIDA TAG Z705PY. THIS VEHICLE HAD BEEN WITNESSED COMMITTING THIS SAME ACT ON 4/14/20 AT 0755 HOURS, AT WHICH TIME 198.02 GALLONS OF FUEL VALUED AT \$494.87 WERE PUMPED INTO THE SAME VEHICLE FROM PUMP #1. THE VEHICLE WAS DRIVEN AWAY FROM THE LOCATION WITHOUT MAKING OR OFFERING ANY PAYMENT FOR THE FUEL AT THAT TIME. THIS MODEL/TRIM LEVEL OF FORD F-350 HAS A STOCK FUEL TANK CAPACITY OF 28 US GALLONS. THE DEFENDANT/OWNER OF THE VEHICLE WAS WITNESSED ON THIS OCCASSION PUMPING 10 US GALLONS BEYOND THE VEHICLE'S STANDARD CAPACITY. THE VEHICLE HAD A PARTIALLY CONCEALED SECONDARY FUEL TANK SPANNING THE ENTIRE BED OF THIS TRUCK WITH A LARGE AMOUNT OF ROLLED CARPETING LAYING OVER THE TOP. THIS TANK, THE ADDED AFTERMARKET HOSES AND ADDITIONAL PUMP WIRING WERE STILL VISIBLE AND IN PLAIN VIEW. NEITHER THIS VEHICLE OR THE AFTERMARKET FUEL TANK ARE DOT APPROVED OR IN COMPLIANCE WITH 49 C.F.R TO CARRY, TRANSPORT OR CONVEY FUEL ON ANY PUBLIC HIGHWAY.

Contrary to Florida Statute/Ordinance 316.80

ARREST DATE: 4/17/2020 Time 9:57 AM Aggravating/Mitigating Factors AO REQUEST HIGH BOND

Booking Officer: POWERS, M 54040 Amount of Bond 10000.00 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: 4/17/2020 10:31:47 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.

Charles Redinger
PINELLAS COUNTY SHERIFF
Declarant Signature Agency
DETECTIVE CHARLES REDINGER 56295 02412980
Printed Name Declarant ID#

REQUEST FOR INVESTIGATIVE COSTS, F.S. 938.27(1)
DATE 04/17/2020 OFFICER REDINGER HOURS X PAY RATE OR COST
4.0 25.00 \$100.00

9C 9 AM 18 2020 APR 18
OTHER – Describe CONVISSION 10000
Continuation sheet ☐ Yes ☒ No TOTAL \$ \$100.00

Defendant SARDINAS CURBELO, JULIO

Court Case No: 20-03700-CF-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:

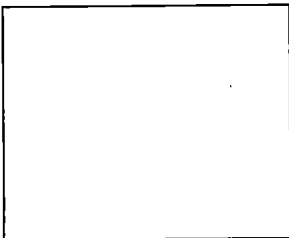
- ☐ A. Defendant has advised the Court that he has retained counsel or will retain counsel.
- ☐ B. The Court investigated Defendant's solvency and found the Defendant financially able to secure counsel.
- ☐ C. The Court investigated Defendant's solvency and provisionally appointed the Public Defender.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

UCN: 522020CF003700XXXXCF

ADDED CHARGE FL0520000

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

OBTS #	REPORT # SO20-108685		DOCKET # 1835632					
Person ID	311509697		SSN# [REDACTED]					
Charge Description	☒ Felony ☐ Misdemeanor ☐ Warrant ☐ Traffic ☐ Ordinance		Traffic Citation # (if any)					
Charge UNLAWFUL POSSESSION OF PERSONAL IDENTIFICATION INFORMATION OF ANOTHER PERSON			Court Case # 20-03700-CF-2					
Defendant's Name (Last, First, Middle)	DOB	Sex	Race	Ht	Wt	Hair	Eyes	Skin
SARDINAS CURBELO, JULIO	12/07/1980	M	H	505	160	BLK	BRO	MED
Alias	DL #	State	Scars/Marks/Tattoos/Physical Features					
	S635-420-80-447-0	FL						
Local Address (Street, City, State, Zip Code)	Telephone		Place of Birth		Citizenship			
4014 W WATERS AVE APT 606 TAMPA FL 33614			CUBA		US			
Permanent Address (Street, City, State, Zip Code)	Telephone		Employed by / School					
4014 W WATERS AVE APT 606 TAMPA FL 33614								
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>17</u> day of <u>APRIL</u> , 2020, at approximately <u>7:00</u> AM, at <u>32490 US19 PALM HARBOR</u> , in Pinellas County did: FIVE OR MORE PIECES - 3RD DEGREE FELONY THE DEFENDANT DID INTENTIONALLY OR KNOWINGLY POSSESS, WITHOUT AUTHORIZATION, THE PERSONAL IDENTIFICATION INFORMATION OF ANOTHER PERSON(S) IN ANY FORM, INCLUDING, BUT NOT LIMITED TO, MAIL, PHYSICAL DOCUMENTS, IDENTIFICATION CARDS, OR INFORMATION STORED IN DIGITAL FORM. THE DEFENDANT DID HAVE A TOTAL OF FORTY ONE (41) WALMART GIFT CARDS IN HIS CARE, CUSTODY OR POSSESSION AT THE TIME HE WAS ARRESTED FOR A VIOLATION OF F.S.S. 316.80. ALL OF THESE GIFT CARDS HAD DIFFERENT FLORIDA ZIP CODES WRITTEN ON THE REAR OF THE CARDS. YOUR AFFIANT IS PERSONALLY AWARE THAT WALMART GIFT CARDS ARE NOT ACTIVATED OR UTILIZED IN ANY FASHION WITH THE ENTRY OF A ZIP CODE. ADDITIONALLY, THIS WAS COMMONLY KNOWN TO BE A METHOD IN WHICH GIFT CARDS ARE CLONED WITH STOLEN CREDIT CARD INFORMATION. A MAG STRIP SCANNER WAS USED TO READ THE INFORMATION ON THESE CARDS, WHICH REVEALED THE PERSONAL NAMES AND INFORMATION OF MULTIPLE PERSON THAT WERE NOT THE DEFENDANT. THE DEFENDANT HAD FIFTEEN (15) WALMART GIFT CARDS IN HIS PERSONAL WALLET, 11 OF WHICH HAD DIFFERENT PERSONS INFORMATION; 5 WALMART GIFT CARDS IN A FILA WALLET IN THE TRUCK, 4 OF WHICH HAD OTHER PERSONS INFORMATION; AND 21 WALMART GIFT CARDS CONTAINED IN A CIGARETTE BOX IN THE TRUCK, 16 OF WHICH HAD OTHER PERSONS INFORMATION.								
Contrary to Florida Statute/Ordinance <u>817.5685.3B2</u>								
ARREST DATE: <u>4/17/2020</u> Time <u>11:08 AM</u> Aggravating/Mitigating Factors <u>A/O REQUEST HIGH BOND</u>								
Booking Officer: <u>ZENOSKI, A 59785</u> Amount of Bond <u>10,000</u> 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: <u>4/17/2020 11:42:32 AM</u>								
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. <u>Charles Redinger</u> PINELLAS COUNTY SHERIFF Declarant Signature Agency DETECTIVE CHARLES REDINGER 56295 02412980 Printed Name Declarant ID#					REQUEST FOR INVESTIGATIVE COSTS, F.S. 938.27(1) DATE OFFICER HOURS X PAY-RATE OR COST <u>04/17/2020</u> <u>REDINGER</u> <u>4.0</u> <u>25.00</u> <u>\$100.00</u> <u>92:9 AM 18 APR 2020</u> OTHER – Describe <u>CONVICTION 18A00</u> Continuation sheet ☐ Yes ☒ No TOTAL \$ <u>\$100.00</u>			

Defendant SARDINAS CURBELO, JULIO

Court Case No: 20-03700-CF-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.

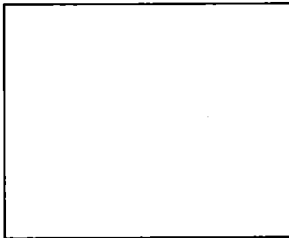
I FURTHER CERTIFY THAT:

- ☐ 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 # SO20-108685	DOCKET # 1835632
Person ID 311509697		SSN# [REDACTED]	
Charge Description ☒ Felony ☐ Misdemeanor ☐ Warrant ☐ Traffic ☐ Ordinance		Traffic Citation # (if any)	
Charge SCHEME TO DEFRAUD		Court Case # 20-03700-CF-3	
Defendant's Name (Last, First, Middle) SARDINAS CURBELO, JULIO		DOB 12/07/1980	Sex M Race H Ht 505 Wt 160 Hair BLK Eyes BRO Skin MED
Alias	DL # S635-420-80-447-0	State FL	Scars/Marks/Tattoos/Physical Features
Local Address (Street, City, State, Zip Code) 4014 W WATERS AVE APT 606 TAMPA FL 33614		Telephone	Place of Birth CUBA Citizenship US
Permanent Address (Street, City, State, Zip Code) 4014 W WATERS AVE APT 606 TAMPA FL 33614		Telephone	Employed by / School
Weapon Seized Type ☐ Yes ☒ No		Indication of Drug Influence Y ☐ N ☒ UNK ☐	Indication of Mental Health Issues 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 17 day of APRIL, 2020, at approximately 7:00 AM, at 32490 US19 PALM HARBOR, in Pinellas County did:

DID ENGAGE IN A SCHEME CONSTITUTING A SYSTEMATIC, ONGOING COURSE OF CONDUCT WITH INTENT TO DEFRAUD ONE OR MORE PERSONS, OR WITH INTENT TO OBTAIN PROPERTY FROM ONE OR MORE PERSON BY FALSE OR FRAUDULENT PRETENSES, REPRESENTATIONS, OR PROMISES, OR WILLFUL MISREPRESENTATION OF A FUTURE ACT AND OBTAINED PROPERTY FROM ONE OR MORE SUCH PERSONS.

THE DEFENDANT DID HAVE A TOTAL OF FORTY ONE (41) WALMART GIFT CARDS IN HIS CARE, CUSTODY OR POSSESSION AT THE TIME HE WAS ARRESTED FOR A VIOLATION OF F.S.S. 316.80. ALL OF THESE GIFT CARDS HAD DIFFERENT FLORIDA ZIP CODES WRITTEN ON THE REAR OF THE CARDS. YOUR AFFIANT IS PERSONALLY AWARE THAT WALMART GIFT CARDS ARE NOT ACTIVATED OR UTILIZED IN ANY FASHION WITH THE ENTRY OF A ZIP CODE. ADDITIONALLY, THIS WAS COMMONLY KNOWN TO BE A METHOD IN WHICH GIFT CARDS ARE CLONED WITH STOLEN CREDIT CARD INFORMATION. A MAG STRIP SCANNER WAS USED TO READ THE INFORMATION ON THESE CARDS, WHICH REVEALED THE PERSONAL NAMES AND INFORMATION OF MULTIPLE PERSON THAT WERE NOT THE DEFENDANT. THE DEFENDANT HAD FIFTEEN (15) WALMART GIFT CARDS IN HIS PERSONAL WALLET, 11 OF WHICH HAD DIFFERENT PERSONS INFORMATION; 5 WALMART GIFT CARDS IN A FILA WALLET IN THE TRUCK, 4 OF WHICH HAD OTHER PERSONS INFORMATION; AND 21 WALMART GIFT CARDS CONTAINED IN A CIGARETTE BOX IN THE TRUCK, 16 OF WHICH HAD OTHER PERSONS INFORMATION.

Contrary to Florida Statute/Ordinance 817.034.4A.

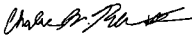
ARREST DATE: 4/17/2020 Time 11:15 AM . Aggravating/Mitigating Factors A/O REQUEST HIGH BOND

Booking Officer: ZENOSKI, A 59785 Amount of Bond 10,000 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: 4/17/2020 11:42:54 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.  PINELLAS COUNTY SHERIFF Agency DETECTIVE CHARLES REDINGER 56295 02412980 Printed Name Declarant ID#		REQUEST FOR INVESTIGATIVE COSTS, F.S. 938.27(1) <table style="width:100%;"> <tr> <td>DATE</td> <td>OFFICER</td> <td>HOURS X PAY RATE</td> <td>OR</td> <td>COST</td> </tr> <tr> <td>04/17/2020</td> <td>REDINGER</td> <td>4.0 25.00</td> <td></td> <td>\$100.00</td> </tr> </table> 98:9 AM 81 APR 18 2020 OTHER – Describe <u>CONVICTION INFO</u> Continuation sheet ☐ Yes ☒ No TOTAL \$ \$100.00	DATE	OFFICER	HOURS X PAY RATE	OR	COST	04/17/2020	REDINGER	4.0 25.00		\$100.00
DATE	OFFICER	HOURS X PAY RATE	OR	COST								
04/17/2020	REDINGER	4.0 25.00		\$100.00								

Defendant SARDINAS CURBELO, JULIO

Court Case No: 20-03700-CF-3

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.

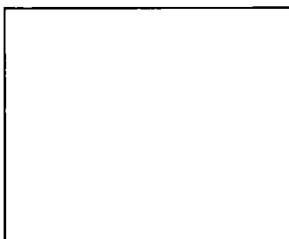
I FURTHER CERTIFY THAT:

- ☐ 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 # SO20-108685	DOCKET # 1835632	
Person ID 311509697			SSN# [REDACTED]		
Charge Description ☒ Felony ☐ Misdemeanor ☐ Warrant ☐ Traffic ☐ Ordinance			Traffic Citation # (if any)		Court Case #
Charge TRAFFIC IN OR POSSESS COUNTERFEIT CREDIT CARDS					20-03700-CF-4
Defendant's Name (Last, First, Middle) SARDINAS CURBELO, JULIO			DOB 12/07/1980	Sex M	Race H
			Ht 505	Wt 160	Hair BLK
			Eyes BRO	Skin MED	
Alias	DL # S635-420-80-447-0	State FL	Scars/Marks/Tattoos/Physical Features		
Local Address (Street, City, State, Zip Code) 4014 W WATERS AVE APT 606 TAMPA FL 33614			Telephone	Place of Birth CUBA	Citizenship US
Permanent Address (Street, City, State, Zip Code) 4014 W WATERS AVE APT 606 TAMPA FL 33614			Telephone	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 17 day of APRIL, 2020, at approximately 7:00 AM, at 32490 US19 PALM HARBOR, in Pinellas County did:

THE DEFENDANT DID TRAFFIC IN, ATTEMPT TO TRAFFIC IN, OR POSSESSES 5 TO 14 COUNTERFEIT CREDIT CARDS OR RELATED DOCUMENTS DURING A 6 MONTH PERIOD. THE DEFENDANT DID HAVE A TOTAL OF FORTY ONE (41) WALMART GIFT CARDS IN HIS CARE, CUSTODY OR POSSESSION AT THE TIME HE WAS ARRESTED FOR A VIOLATION OF F.S.S. 316.80. ALL OF THESE GIFT CARDS HAD DIFFERENT FLORIDA ZIP CODES WRITTEN ON THE REAR OF THE CARDS. YOUR AFFIANT IS PERSONALLY AWARE THAT WALMART GIFT CARDS ARE NOT ACTIVATED OR UTILIZED IN ANY FASHION WITH THE ENTRY OF A ZIP CODE. ADDITIONALLY, THIS WAS COMMONLY KNOWN TO BE A METHOD IN WHICH GIFT CARDS ARE CLONED WITH STOLEN CREDIT CARD INFORMATION. A MAG STRIP SCANNER WAS USED TO READ THE INFORMATION ON THESE CARDS, WHICH REVEALED THE PERSONAL NAMES AND INFORMATION OF MULTIPLE PERSON THAT WERE NOT THE DEFENDANT. THE DEFENDANT HAD FIFTEEN (15) WALMART GIFT CARDS IN HIS PERSONAL WALLET, 11 OF WHICH HAD DIFFERENT PERSONS INFORMATION; 5 WALMART GIFT CARDS IN A FILA WALLET IN THE TRUCK, 4 OF WHICH HAD OTHER PERSONS INFORMATION; AND 21 WALMART GIFT CARDS CONTAINED IN A CIGARETTE BOX IN THE TRUCK, 16 OF WHICH HAD OTHER PERSONS INFORMATION.

Contrary to Florida Statute/Ordinance 817.611(2)(A).

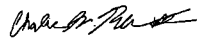
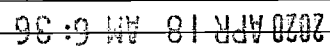
ARREST DATE: 4/17/2020 Time 12:06 PM . Aggravating/Mitigating Factors AO REQUESTS HIGH BOND

Booking Officer: POWERS, M 54040 Amount of Bond 20000.00 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: 4/17/2020 12:17:09 PM

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 DETECTIVE CHARLES REDINGER 56295 Printed Name PINELLAS COUNTY SHERIFF Agency 02412980 Declarant ID#		REQUEST FOR INVESTIGATIVE COSTS, F.S. 938.27(1) <table style="width:100%; border-collapse: collapse;"> <tr> <td>DATE</td> <td>OFFICER</td> <td>HOURS</td> <td>X</td> <td>PAY RATE</td> <td>OR</td> <td>COST</td> </tr> <tr> <td>04/17/2020</td> <td>REDINGER</td> <td>4.0</td> <td></td> <td>25.00</td> <td></td> <td>\$100.00</td> </tr> </table>  OTHER – Describe <u>CONVICTION 1999</u> Continuation sheet ☐ Yes ☒ No TOTAL \$ <u>100.00</u>	DATE	OFFICER	HOURS	X	PAY RATE	OR	COST	04/17/2020	REDINGER	4.0		25.00		\$100.00
DATE	OFFICER	HOURS	X	PAY RATE	OR	COST										
04/17/2020	REDINGER	4.0		25.00		\$100.00										

Defendant SARDINAS CURBELO, JULIO **Court Case No:** 20-03700-CF-4

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.

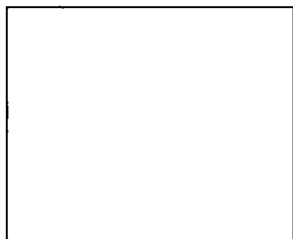
I FURTHER CERTIFY THAT:

- ☐ 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