UCN: 522019CT091057000APC FL0521400

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

OBTS #		REPORT # 2019-053220	DOCKET # 1823472
Person ID 1678714		SSN# [redacted]	
Charge Description ☐ Felony ☒ Misdemeanor ☐ Warrant ☐ Traffic ☐ Ordinance		Traffic Citation # (if any)	Court Case #
Charge: DRIVING UNDER THE INFLUENCE		AAM6ZNE	AAM6ZNE-1

Defendant's Name (Last, First, Middle)	DOB	Sex	Race	Ht	Wt	Hair	Eyes	Skin
THRUMSTON, KATHLEEN MARY	01/16/1966	F	W	507	135	BRO	BLU	

Alias	DL #	State	Scars/Marks/Tattoos/Physical Features
	T652-513-66-516-0	FL	

Local Address (Street, City, State, Zip Code)	Telephone	Place of Birth	Citizenship
801 EDGEWATER DR INVERNESS FL 34453	7274235139	MICHIGAN	US
Permanent Address (Street, City, State, Zip Code)	**Telephone**	**Employed by / School**	
801 EDGEWATER DR INVERNESS FL 34453	7274235139	SELF	

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	☐ ☒ ☐	☐ ☒ ☐	☒ ☐ ☐

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 06 day of DECEMBER, 2019,

at approximately 12:20 AM, at 1ST AVE N/ 3RD ST N, in Pinellas County did:

REASON FOR STOP:DRIVING WRONG WAY ON A ONE WAY STREET

THE DEFENDANT DID THEN AND THERE DRIVE OR BE IN ACTUAL PHYSICAL CONTROL OF A MOTOR VEHICLE TO WIT:2012 CHEVROLET TRAVERSE FLORIDA TAG 2858XU WHILE UNDER THE INFLUENCE OF AN ALCOHOLIC BEVERAGE AND/OR A CHEMICAL/CONTROLLED SUBSTANCE TO THE EXTENT HER NORMAL FACULTIES WERE IMPAIRED. THE DEFENDANT WAS STOPPED FORDRIVING THE WRONG WAY ON 1ST AVE N .THE DEFENDANT EXHIBITED BLOODSHOT, WATERY EYES, A DAZED, AND BLANK EXPRESSION ON HER FACE AND AN ODOR OF AN ALCOHOLIC BEVERAGE ON HER BREATH AND SHE WAS UNSTEADY ON HER FEET.
THE DEF EXHIBITED FURTHER SIGNS OF IMPAIRMENT ON THE FIELD SOBRIETY TESTS.
BAC: 0.117/ 0.115
PRIOR DUI CONVICTIONS: N/A
DUI CITATION:AAM6ZNE
COURT DATE:01/08/2020 AT 1:30 PM
PINELLAS COUNTY CRIMINAL JUSTICE CENTER
14250 49TH STREET N.

FILED
2019 DEC -6 AM 10:45
KEN BURKE
CLERK OF CIRCUIT COURT
PINELLAS CO. FL
COURT ASSISTANT

Contrary to Florida Statute/Ordinance 316.193.1.

ARREST DATE: 12/6/2019 Time 12:51 AM. Aggravating/Mitigating Factors NO LOCAL ADDRESS

Booking Officer: EELLS, C 56501 Amount of Bond 500 Bond Out Date 12/6/19 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: 12/6/2019 2:47:34 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.

Declarant Signature — Agency: ST. PETERSBURG POLICE

Printed Name: OFFICER SEAN MCCULLOUGH 44650 — Declarant ID#: 10747825

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

DATE	OFFICER	HOURS X PAY RATE	OR	COST
12/06/2019	S. MCCULLOUGH	3 25.00		$75.00

OTHER – Describe

Continuation sheet ☐Yes ☐No TOTAL $ $75.00

COCR59 (Revised 10/2014)
816722 Copies to:

Court

Defendant THRUMSTON, KATHLEEN MARY **Court Case No:** AAM6ZNE-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**