UCN: 522019CF001586XXXXCF FL0520000

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

OBTS #		REPORT # NONE	DOCKET # 1831802
Person ID 3236904		SSN# [redacted]	
Charge Description ☒ Felony ☐ Misdemeanor ☒ Warrant ☐ Traffic ☐ Ordinance		Traffic Citation # (if any)	Court Case #
Charge WRT SCHEME TO DEFRAUD			19-01586-CF-1

Defendant's Name (Last, First, Middle)	DOB	Sex	Race	Ht	Wt	Hair	Eyes	Skin
THOMAS, KERRI FAYE	03/24/1987	F	W	505	160	BLN	HAZ	

Alias	DL #	State	Scars/Marks/Tattoos/Physical Features

Local Address (Street, City, State, Zip Code)	Telephone	Place of Birth	Citizenship
3600 38TH ST N ST PETERSBURG FL 33713	7273090069	FLORIDA	US
Permanent Address (Street, City, State, Zip Code)	**Telephone**	**Employed by / School**	
3600 38TH ST N ST PETERSBURG FL 33713	7273090069		

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 24 day of FEBRUARY, 2020,

at approximately 12:53 PM, at PCJ, in Pinellas County did:

PINELLAS) COUNTY WARRANT

ARREST ON WARRANT/CAPIAS # 1901586-CF

I HAVE NO KNOWLEDGE OF THIS CASE

BOND: $100,000

ISSUE DATE: FEBRUARY 8,2019

WARRANT CANCELLED:
DATE: 2/24/2020 1:59:29 PM
CLERK: 59416
DEPUTY: 55798

KEN BURKE CLERK OF CIRCUIT COURT AND COMPTROLLER

FILED
2020 FEB 25 AM 11:18
COURT ASSISTANCE

Contrary to Florida Statute/Ordinance 817.034(4)(A)(1).

ARREST DATE: 2/24/2020 Time 12:53 PM . Aggravating/Mitigating Factors

Booking Officer: DOHERTY, S 55798 Amount of Bond $100,000 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: 2/24/2020 1:59:35 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.

Darlene Carlson

Declarant Signature

PINELLAS COUNTY SHERIFF
Agency

INTAKE SPECIALIST D CARLSON 57027
Printed Name

310394388
Declarant ID#

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

DATE	OFFICER	HOURS X PAY RATE	OR	COST

OTHER – Describe

Continuation sheet ☐ Yes ☐ No TOTAL $ $0.00

COCR59 (Revised 10/2014)
831662 Copies to:

Court

Defendant THOMAS, KERRI FAYE **Court Case No:** 19-01586-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**