

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

OBTS #			REPORT # SO20-130208	DOCKET # 1837102	
Person ID 1646600			SSN# XXXXXXXXXX		
Charge Description ☐ Felony ☒ Misdemeanor ☐ Warrant ☐ Traffic ☐ Ordinance			Traffic Citation # (if any)		Court Case #
Charge DOMESTIC BATTERY					20-05860-MM-1
Defendant's Name (Last, First, Middle) DAMANN, KRIS EDWARD			DOB 03/18/1977	Sex M	Race W
Ht 603		Wt 248		Hair BRO	Eyes BRO
Skin LGT					
Alias	DL # D-550-505-77-098-0	State	Scars/Marks/Tattoos/Physical Features		
Local Address (Street, City, State, Zip Code) 8771 95TH TERR SEMINOLE FL 33777			Telephone 7276005985	Place of Birth FL	Citizenship US
Permanent Address (Street, City, State, Zip Code) 8771 95TH TERR SEMINOLE FL 33777			Telephone 7276005985	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 12 day of MAY, 2020,

at approximately 4:00 AM, at 8771 95TH TERR N, in Pinellas County did:

ACTUALLY AND INTENTIONALLY TOUCH OR STRIKE KRISTA DAMANN, HIS WIFE AND CO-HABITANT, AGAINST THE WILL OF KRISTA DAMANN, TO WIT: THE DEFENDANT THREW AN AMAZON STYLE PACKAGE BOX AND STRUCK THE VICTIM ON THE RIGHT SIDE OF HER FACE AND POURED A LIQUID (CHILDREN'S JUICE) ON THE VICTIM'S HEAD.

THE VICTIM REPORTED DURING A VERBAL ALTERCATION THE DEFENDANT RETRIEVED ITEMS AND STARTING THROWING THEM FROM ITEMS SHE LEFT OUT THE NIGHT BEFORE. THE BOX STRUCK THE VICTIM'S FACE, WHILE WEARING GLASSES, WHICH CAUSED A MINOR LACERATION ON THE RIGHT SIDE OF HER FACE. THE VICTIM'S SHIRT WAS WENT CONSISTENT WITH A LIQUID BEING POURED ON HER.

Contrary to Florida Statute/Ordinance 784.03.

ARREST DATE: 5/12/2020 Time 3:58 PM . Aggravating/Mitigating Factors _____

Booking Officer: AUGUSTA 58493 Amount of Bond ZERO 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: 5/12/2020 4:29:46 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.  DEPUTY JASON EVARTS 58214 Printed Name		REQUEST FOR INVESTIGATIVE COSTS, F.S. 938.27(1) <table style="width:100%;"> <tr> <th>DATE</th> <th>OFFICER</th> <th>HOURS X PAY RATE</th> <th>OR</th> <th>COST</th> </tr> <tr> <td>05/12/2020</td> <td>DEP EVARTS</td> <td>2 25.00</td> <td></td> <td>\$50.00</td> </tr> <tr> <td colspan="5">OTHER – Describe _____</td> </tr> <tr> <td colspan="4">Continuation sheet ☐ Yes ☐ No</td> <td>TOTAL \$ <u>\$50.00</u></td> </tr> </table>	DATE	OFFICER	HOURS X PAY RATE	OR	COST	05/12/2020	DEP EVARTS	2 25.00		\$50.00	OTHER – Describe _____					Continuation sheet ☐ Yes ☐ No				TOTAL \$ <u>\$50.00</u>
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PINELLAS COUNTY SHERIFF Agency 03200357 Declarant ID#																						

Defendant DAMANN, KRIS EDWARD

Court Case No: 20-05860-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:

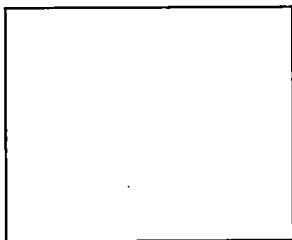
- ☐ A. Defendant has advised the Court that he has retained counsel or will retain counsel.
- ☐ B. The Court investigated Defendant's solvency and found the Defendant financially able to secure counsel.
- ☐ C. The Court investigated Defendant's solvency and provisionally appointed the Public Defender.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