

Richard Guiral

UCN: 522020MM004211XXXXMM

FL0520000

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

OBTS #	REPORT # SO20-94409	DOCKET # 1834683
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Person ID 311059024	SSN# [REDACTED]
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Charge Description <input type="checkbox"/> Felony <input checked="" type="checkbox"/> Misdemeanor <input type="checkbox"/> Warrant <input type="checkbox"/> Traffic <input type="checkbox"/> Ordinance	Traffic Citation # (if any)	Court Case #
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Charge BATTERY; DOMESTIC	20-04211-MM-1
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Defendant's Name (Last, First, Middle) LOWMAN, KYLE RUSSEL	DOB 05/07/1999	Sex M	Race W	Ht 508	Wt 180	Hair BLN	Eyes HAZ	Skin LGT
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Alias	DL # L550-516-99-167-0	State	Scars/Marks/Tattoos/Physical Features UPPER ARM: CROSS, LOWMAN
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Local Address (Street, City, State, Zip Code) 2124 LUCERNE TERRACE ORLANDO FL 32806	Telephone 443-690-9333	Place of Birth MD	Citizenship US
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Permanent Address (Street, City, State, Zip Code) 2124 LUCERNE TERRACE ORLANDO FL 32806	Telephone 443-690-9333	Employed by / School
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Weapon Seized Type <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Indication of Drug Influence Y <input type="checkbox"/> N <input checked="" type="checkbox"/> UNK <input type="checkbox"/>	Indication of Mental Health Issues Y <input type="checkbox"/> N <input checked="" type="checkbox"/> UNK <input type="checkbox"/>	Indication of Alcohol Influence Y <input type="checkbox"/> N <input checked="" type="checkbox"/> UNK <input type="checkbox"/>
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Co-Defendant's Name (Last, First, Middle)	DOB	Sex	Race	In Custody <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor
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Co-Defendant's Name (Last, First, Middle)	DOB	Sex	Race	In Custody <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor
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The undersigned swears that he/she has reasonable grounds to believe that the above named defendant on the 28 day of MARCH, 2020

at approximately 4:41 PM, at 596 BELLE POINT DR, in Pinellas County did:

ACTUALLY AND INTENTIONALLY TOUCH OR STRIKE THE VICTIM, HIS FATHER, AGAINST THE WILL OF THE VICTIM TO-WIT: THE DEFENDANT PUNCHED THE VICTIM'S LEFT CHEECK WITH HIS CLOSED RIGHT FIST.

DURING A VERBAL DOMESTIC DISPUTE BETWEEN THE DEFENDANT AND THE VICTIM, THE DEFENDANT PUSHED THE VICTIM AND SUBSEQUENTLY PUNCHED THE VICTIM'S LEFT CHEECK WITH HIS CLOSED RIGHT FIST. THE PUNCH CAUSED OBVIOUS SWELLING TO THE VICTIM'S FACE AND A POSSIBLE BROKEN TOOTH.

Contrary to Florida Statute/Ordinance 784.03

ARREST DATE: 3/28/2020 Time 5:09 PM Aggravating/Mitigating Factors _____


Booking Officer: ROBINSON, C 56730 Amount of Bond NO BOND Bond Out Date _____ Time 4:43 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: 3/28/2020 6:31:13 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.

	PINELLAS COUNTY SHERIFF
Declarant Signature	Agency
DEPUTY LUIS GUIRAL 59645	310956711
Printed Name	Declarant ID#

REQUEST FOR INVESTIGATIVE COSTS, F.S. 938.27(1)				
DATE	OFFICER	HOURS X PAY RATE	OR	COST
03/28/2020	L. GUIRAL	1 25.00		\$25.00
OTHER - Describe _____				
Continuation sheet <input type="checkbox"/> Yes <input type="checkbox"/> No				TOTAL \$ 25.00

FILED
 COURT ASSISTANT
 2020 MAR 29 AM 11:43
 KEN BUNKE
 CLERK OF CIRCUIT COURT
 AND COMPTROLLER



Defendant LOWMAN, KYLE RUSSEL **Court Case No:** 20-04211-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:

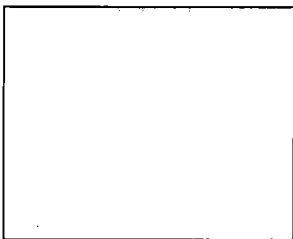
- A. Defendant has advised the Court that he has retained counsel or will retain counsel.
- B. The Court investigated Defendant's solvency and found the Defendant financially able to secure counsel.
- C. The Court investigated Defendant's solvency and provisionally appointed the Public Defender.
- D.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