UCN: 522019CF015266XXXXCF

FL0520000

COMPLAINT/ARREST AFFIDAVIT - CIRCUIT/COUNTY COURT - PINELLAS COUNTY, FLORIDA REPORT # SO19-409617 DOCKET # 1825244 OBTS# Person ID SSN# 311444654 Charge Description K Felony Misdemeanor Warrant Traffic Ordinance Traffic Citation # (if anv) Court Case # Charge POSSESSION OF A CONTROLLED SUBSTANCE 19-15266-CF-1 Defendant's Name (Last, First, Middle) DOB Sex Race Ht Wt Hair Eyes Skin ONEILL. LEAH MARIE F 05/10/1967 W 505 120 **BLN BRO** Alias Scars/Marks/Tattoos/Physical Features O540-533-67-670-0 Local Address (Street, City, State, Zip Code) Place of Birth Citizenship Telephone 7272788057 720 E GULF BLVD APT B INDIAN ROCKS BEACH FL 33780 USA Permanent Address (Street, City, State, Zip Code) Telephone Employed by / School 720 E GULF BLVD APT B INDIAN ROCKS BEACH FL 33780 7272788057 Y N UNK Indication of Mental Y N UNK Indication of

☐ ☑ ☐ Health Issues ☐ ☑ ☐ Alcohol Influe Weapon Seized Type Indication of UNK Y N Drug Influence 🗆 🗵 🔲 □Yes ⊠No Alcohol Influence 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 23 day of 2019 DECEMBER 401 2ND ST, INDIAN ROCKS BEACH, FLORIDA at approximately 1:34 UNLAWFULLY HAVE IN HER ACTUAL OR CONSTRUCTIVE POSSESSION, A SUBSTANCE DEFINED BY FLORIDA STATE STATUTE CHAPTER 893, TO WIT: ONE (1) PILL THAT IDENTIFIED AS HYDROCODINE AND 2 STRIPS OF SUBOXONE.WITHOUT HAVING LAWFULLY OBTAINING SAID SUBSTANCE FROM A VALID PRACTITIONER. THE SUBSTANCE WEIGHED LESS THAN 1 GRAM. PILLS WERE IDENTIFIED THROUGH DRUGS.COM AS HYDROCODINE (325MG) AND SUBOXONE-BUPRENORPHONE AND NALOXONE (8MG/2MG) THE DEFENDANT WAS INITIALLY TAKEN TO PINELLAS COUNTY JAIL UNDER THE MARCHMAN ACT AFTER MULTIPLE ATTEMPTS TO CONTACT FRIENDS/FAMILY WERE UNSUCCESSFUL. A SEARCH WAS COMPLETED AND WAS FOUND IN ACTUAL POSSESSION OF ONE (1) WHITE PILL WITH THE IDENTIFIER OF G035 AND STRIPS OF SUBOXONE FILM. Contrary to Florida Statute/Ordinance 893.13.6A ARREST DATE: 12/23/2019 Time 1:34 AM . Aggravating/Mitigating Factors Booking Officer: PASKALAKIS, B 59541 Amount of Bond 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: 12/23/2019;4:49:31 AM REQUEST FOR INVESTIGATIVE COSTS, F.S. 938.27(1) Pursuant to F.S. 92.525 and under penalty of perjury, I declare that I have **OFFICER** HOURS X PAY RATE read the foregoing document and that the facts in it are true. DATE COST 12/23/2019 \$25.00 PINELLAS COUNTY SHERIFF Declarant Signature Agency COURT ASSISTANCE **DEPUTY KATIE PALERMITI 59470** 311014162 OTHER - Describe TOTAL \$ \$25.00 **Printed Name** Declarant ID# Continuation sheet Yes No

files

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 the	nat he has retained counsel or will retain couns	el.
☐ B. The Court investigated Defendant'	s solvency and found the Defendant financiall	y able to secure counsel.
☐ C. The Court investigated Defendant'	s solvency and provisionally appointed the Pul	blic Defender.
☐ D. The Defendant waived the right to		
	Plat	Colema
DATE AND TIME	ME	JUDGE
	t the first appearance only. inancially able to secure counsel, hereby wa file a written request for a review of my solven	
	DEED	DANT'S SIGNATURE
	DEFER	DANI S SIGNATURE
Thumb Print		,
I HEREBY acknowledge receipt of a cop	py of the foregoing Complaint and Advisory.	
DEFENDANT'S SIGNATURE	DEFENDANT'S ATTORNEY'S SIGNATURE	DATE