

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

OBTS #	REPORT # 19-005469		DOCKET # 1802720		
Person ID	310269522		SSN# 000-00-0000		
Charge Description	☒ Felony	☐ Misdemeanor	☐ Warrant	☐ Traffic	☐ Ordinance
Charge BATTERY ON A PERSON 65 YEARS OF AGE OR OLDER (DOMESTIC)			Traffic Citation # (if any)		Court Case # 19-06673-CF-1
Defendant's Name (Last, First, Middle) PACI, LILLIAN		DOB 04/13/2001	Sex F	Race W	Ht 504
Wt 115		Hair BLK	Eyes HAZ	Skin	
Alias	DL #	State	Scars/Marks/Tattoos/Physical Features		
Local Address (Street, City, State, Zip Code) 810 2ND AVE NW LARGO FL 33770			Telephone 727-614-9152	Place of Birth FL	Citizenship US
Permanent Address (Street, City, State, Zip Code) 801 2ND AVE NW LARGO FL 33770			Telephone 727-614-9152	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 31 day of MAY, 2019, at approximately 10:19 PM, at 810 2ND AVE NW, in Pinellas County did:

DID ACTUALLY AND INTENTIONALLY TOUCH OR STRIKE, AGAINST THE WILL OF VASIL PACI, A PERSON 65 YEARS OF AGE OR OLDER. TO WIT: THE DEFENDANT CAME OVER TO THE RESIDENCE WITH A FRIEND AND ONCE THEY WERE INSIDE A VERBAL ALTERCATION STARTED. THE DEFENDANT'S FRIEND STARTED GETTING IN A FIGHT WITH ANOTHER FEMALE INSIDE THE RESIDENCE AND THE VICTIM TRIED BREAKING UP THE FIGHT. WHILE THE VICTIM WAS TRYING TO BREAK UP THE FIGHT THE DEFENDANT ATTACKED THE VICTIM AND STARTED PUSHING THE VICTIM SEVERAL TIMES AND PUSHED HIM INTO A TREE. THE VICTIM IS CURRENTLY 74 YEARS OLD AND IS THE GRANDFATHER TO THE DEFENDANT. THE DEFENDANT AND VICTIM LIVE TOGETHER IN THE SAME RESIDENCE AS WELL.

Contrary to Florida Statute/Ordinance 784.08.2C

ARREST DATE: 6/1/2019 Time 8:59 PM

Aggravating/Mitigating Factors

Booking Officer: FRENCH, K 57842

Amount of Bond NO 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: \$1000.00

The probable cause determination is passed for: ☐ 24 Hrs ☐ 24 Hrs on showing of extraordinary circumstances

Received by Booking: 6/1/2019 10:00:05 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.

Matthew Hochsprung

LARGO POLICE DEPT.

Declarant Signature

Agency

OFFICER MATTHEW HOCHSPRUNG 0514

310556836

Printed Name

Declarant ID#

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

DATE	OFFICER	HOURS X PAY RATE	OR	COST
05/31/2019	M. HOCHSPRUNG	4 25.00		\$100.00
05/31/2019	J. KNOX	3 25.00		75

OTHER – Describe

Continuation sheet ☐ Yes ☐ No

TOTAL \$ \$175.00

Defendant PACI, LILLIAN

Court Case No: 19-06673-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.

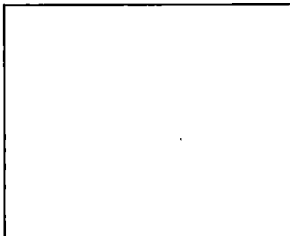
I FURTHER CERTIFY THAT:

- ☐ 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.

6/2/19
DATE AND TIME

[Signature]
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