Use Ballpoint Pen
Press Firmly

1973392

CRIMINAL REPORT AFFIDAVIT / NOTICE TO APPEAR

GRID # 80

ADMINISTRATION

COURT CASE/ J.F. ID # 20CM6752 SAO # _____ OBTS # _____

AGENCY REPORT # FWS20OFF017547 AGENCY NAME FWC ORI # FL0298000

LOCATION OF OFFENSE Williams Park Boat Ramp DATE OF OFFENSE 8/23/20 TIME OF OFFENSE 1937

WITHIN:
TAMPA ☒ PLANT CITY ☐ TEMPLE TERRACE ☐ UNINCORPORATED AREA ☐ SUPPLEMENTAL CRA ATTACHED ☐

COURT:
TAMPA COURT ☒ PLANT CITY CT ☐

LOCATION OF ARREST Williams Park Boat Ramp DATE OF ARREST 8/23/20 TIME OF ARREST 1957

BOOKING # 2020-19002 SOID # _____ WEAPON TYPE N/A WEAPON SEIZED Yes ☐ No ☒

ARREST
☒ Probable Cause ☒ Adult
☐ Capias ☐ Juvenile
☐ Fugitive Warrant ☐ Delinquency
☐ VOP/VOCC ☐ Dependency
☐ Warrant ☐ Felony
☐ Juvenile Pickup ☒ Misdemeanor

REQUEST FOR:
☐ Direct File/SAO Review ☐ Traffic MISD ☐ Traffic FEL ☐ Ordinance ☐ Pickup ☐ Other
☐ Warrant
☐ Summons
☐ Juvenile Pickup

NOTICE TO APPEAR:
☐ Arresting officer
☐ Booking supervising officer

DEFENDANT/DEPENDENT

NAME Pilcher (Last) Mark (First) David (Middle) ALIAS _____

RACE: W-White I-American Indian/Alaskan Native HW-Hispanic White HB Hispanic Black B-Black O-Oriental/Asian
Race W SEX M D.O.B. 03 / 22 / 1981 (MO / DAY / YEAR) APPROXIMATE AGE _____

COMPLEXION _____ BUILD Slim
HEIGHT _____ WEIGHT _____
COLOR: EYES _____ HAIR brown

LOCAL ADDRESS (Street, Apt. #, City, State, Zip) 8601 Magnolia St. Gibsonton, FL 33534 Ph #: 8135453494

Permanent Address (Street, Apt. #, City, State, Zip) 8601 Magnolia St. Gibsonton, FL 33534 Ph #: _____

Business Address (Street, Apt. #, City, State, Zip) _____ Ph #: _____

Driver's License No. P486544811020 State FL SS # [redacted] PLACE OF BIRTH Naples DOC # _____

Gang Member: Yes ☐ No ☒ Gang Name _____
SCARS, MARKS, TATOOS, UNIQUE FEATURES (Loc., Type, Desc.) _____
IF JUVENILE:
School Name _____
Mother/Guardian _____ Address _____ Ph #: _____
Father/Guardian _____ Address _____ Ph #: _____
Released To: JAC ☐ Parent ☐ Guardian ☐ Other Relationship ☐ _____ ☐ Other _____

CO-DEFENDANT(S)

Co-Defendant (Last, First, Middle) _____ Sex: ____ Race: ____ DOB _____
Arrested ☐ At Large ☐ Capias/Warrant Requested ☐ Felony ☐ Misdemeanor ☐ Juvenile ☐

Co-Defendant (Last, First, Middle) _____ Sex: ____ Race: ____ DOB _____
Arrested ☐ At Large ☐ Capias/Warrant Requested ☐ Felony ☐ Misdemeanor ☐ Juvenile ☐

CHARGE(S)

STATUTE (subsec.) / ORD #	DV	CP	CHARGE STATUS	BOND SET	CHARGE	TRAFFIC CITATION #	DRUG ACT/TYPE
327.35(1)(c)			M		[redacted] operating vessel over .08	V6398869	Z

CHARGE STATUS: F-Felony M-Misdemeanor T-Traffic O-Ordinance FT-Felony Traffic DV-Domestic Violence CP-Child Present
ACTIVITY: N-N/A P-Possess S-Sell B-Buy T-Traffic R-Smuggle D-Deliver E-Use K-Dispense/Distribute M-Manufacture/Produce/Cultivate Z-Other
Type: N-N/A A-Amphetamine B-Barbiturate C-Cocaine E-Heroin H-Hallucinogen M-Marijuana O-Opium/Deriv. P-Paraphernalia/Equipment S-Synthetic U-Unknown Z-Other

REPORT # FWS20OFF017547

EVIDENCE LIST

A LIST OF TANGIBLE EVIDENCE (If none, write "None") **(Evidence List must be provided for all NOTICES TO APPEAR)**

DESCRIPTION/AMOUNT PER UNIT	RECOVERED BY	GIVEN TO	PRESENT LOCATION

AGENCY NAME FWC

NOTICE TO APPEAR

Mandatory Appearance In Court ☐ You need not appear in Court, but must comply with Instructions on Reverse Side. ☐

COURT INFORMATION: You must appear in County Court at the:

COURTHOUSE TOWER ANNEX, 801 E. TWIGGS STREET ☐ (Corner of Jefferson & Twiggs Street), TAMPA, FLORIDA 33602
COUNTY OFFICE BUILDING, MICHIGAN & REYNOLDS STREET ☐ PLANT CITY, FLORIDA 33566

Division _____ COURTROOM # _____ ON _____ ,20 ____ , AT _____ a.m. ☐ p.m. ☐

I agree to appear at the time and place designated above to answer for the offense(s) charged or to pay the fine subscribed. I understand that if I willfully fail to appear before the Court as required by the Notice to Appear, I may be held in contempt of Court and a warrant for my arrest shall be issued. You may also be charged with the crime of Failure to Appear, F.S. 843.15. I certify that my address as listed above is correct and I further understand that I have a continuing duty to advise the Court of any changes in my address as set forth above.

Signature of Defendant/Juvenile _____ Parent or Guardian (If Juvenile) _____

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AGENCY REPORT # FWSW20OFF017547 AGENCY NAME FWC

State facts to establish probable cause that a crime was committed by the defendant or that the child is dependant I officer Malachi Wilkins of FWC was on State Water Patrol in Hillsborough County, FL. I observed a white vessel with no registration affixed to the vessel. I was in uniform and in a marked vessel. I stopped the vessel and stated who I was and the reason for the stop. I identified the defendant as the operator of the white vessel. During the vessel safety inspection I observered the defendant to have glassy and bloodshot eyes. He also had the strong odor of an alcoholic beverage coming from his person. I asked if he would consent to SFSTS he said that he would. During the SFSTS he performed poorly. I then read implied consent and he provided samples of .083 and .086.

PROBABLE CAUSE STATEMENT

Judgement requested against defendant for agency investigative cost per Florida Statute 938.27: $

OFFICER ROBERT BERG

I.D. # N674 Dist. & Squad FWC/SW

(Please Print The Above Information)

SWORN TO AND SUBSCRIBED BEFORE ME THIS 23rd DAY OF AUG, 20 20

R. Berg N674

NAME/Title of Person Authorized to Administer Oath

POLICE REPORT WRITTEN: Yes ☒ No ☐

OFFICER M. Wilkins I.D. # N654 Dist. & Squad SW

I SWEAR THAT THE ABOVE STATEMENTS ARE CORRECT TO THE BEST OF MY KNOWLEDGE. FOR NOTICES TO APPEAR, I ALSO CERTIFY THAT A COMPLETE LIST OF WITNESSES AND EVIDENCE KNOWN TO ME IS ATTACHED.

AFFIANT, Signature Malachi Wilkins N654

AFFIANT, Print/Type Name Malachi Wilkins

REPORT # FWSW20OFF017547

AGENCY NAME FWC

VICTIM NOTIFICATION

NOTE: The WHITE COPY of VICTIM'S / WITNESSES goes to the Clerk's Office ONLY on Notices To Appear. In all other cases, it should be removed. The Jail or JAC personnel will determine this for all defendants turned over to them. In all Notices To Appear issued by the Arresting Officer, the Arresting Officer should leave the WHITE copy of VICTIM'S / WITNESSES attached.

CLERK OF COURT SAO FORM-425. 10/03

WITNESSES

WITNESS STATUS: ☐ V-VICTIM ☐ C-Complainant ☐ W-All Other Witnesses ☐ Check If Witness Was Sworn

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STATUS	Last	First	Middle	Race	Sex	Date of Birth
V	State of Florida					

Home Address (Street, Apartment Number)	City	State	Zipcode	Phone

Business Address (Street, Apartment Number)	City	State	Zipcode	Phone

(Five further blank witness entries, each with STATUS, Last, First, Middle, Race, Sex, Date of Birth; Home Address (Street, Apartment Number), City, State, Zipcode, Phone; Business Address (Street, Apartment Number), City, State, Zipcode, Phone.)