UCN: 522019MM019822XXXXMM FL0520000

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

OBTS #		REPORT # SO19-398869	DOCKET # 1824223
Person ID 310754990		SSN# [redacted]	
Charge Description ☐ Felony ☒ Misdemeanor ☐ Warrant ☐ Traffic ☐ Ordinance		Traffic Citation # (if any)	Court Case #
Charge DOMESTIC BATTERY			19-19822-MM-1

Defendant's Name (Last, First, Middle)	DOB	Sex	Race	Ht	Wt	Hair	Eyes	Skin
MILLER, MATTHEW LEE	02/18/1989	M	W	511	180	BRO	BLU	MED

Alias	DL #	State	Scars/Marks/Tattoos/Physical Features
	M460-552-89-058-0	FL	

Local Address (Street, City, State, Zip Code)	Telephone	Place of Birth	Citizenship
11490 59 TER SEMINOLE FL 33772	727-290-7850	FLORIDA	US
Permanent Address (Street, City, State, Zip Code)	**Telephone**	**Employed by / School**	
11490 59 TER SEMINOLE FL 33772	727-290-7850		

Weapon Seized Type	Indication of Drug Influence Y N UNK	Indication of Mental Health Issues Y N UNK	Indication of Alcohol Influence Y N UNK
☐Yes ☒No	☐ ☒ ☐	☐ ☒ ☐	☒ ☐ ☐

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 13 day of DECEMBER, 2019,

at approximately 5:00 AM, at 11490 59 TER, in Pinellas County did:

ACTUALLY AND INTENTIONALLY TOUCH OR STRIKE CAITLIN), (SELECT: HIS WIFE AND CO-HABITANT, AGAINST THE WILL OF CAITLIN), TO WIT: ON THIS DATE DEF FOLLOWED CAITLIN BACK TO THEIR RES AND PULLED HER FROM HER VEH CAUSING HER TO FALL ON THE CHRISTMAS DECORATIONS AND THE SIDEWALK CAUSING MINOR INJURIES TO HER HAND AND ELBOW. THIS OCCURRED DURING EARLY MORNING HOURS. THEY HAVE BEEN MARRIED FOR APPROXIMATELY TWO YEARS. THE INJURIES DID NOT REQUIRE MEDICAL ATTENTION.

FILED
COURT ASSISTANCE
2019 DEC 14 AM 08:05
KEN BURKE
CLERK OF CIRCUIT COURT
PINELLAS COUNTY, FL

Repeat –
2018 - DV - 17

5,000.00

Contrary to Florida Statute/Ordinance 784.03

ARREST DATE: 12/13/2019 Time 6:58 AM . Aggravating/Mitigating Factors NO Alcohol - CAM
NO contact w/ V -

Booking Officer: DARGINIO, E 57371 Amount of Bond NONE 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: 12/13/2019 8:46:11 AM

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.

Dennis Patitz

Declarant Signature

PINELLAS COUNTY SHERIFF
Agency

DEPUTY DENNIS PATITZ 56129
Printed Name

02359725
Declarant ID#

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

DATE	OFFICER	HOURS X PAY RATE	OR	COST

OTHER – Describe

Continuation sheet ☐Yes ☐No TOTAL $ $0.00

COCR59 (Revised 10/2014)
818124 Copies to:

Court

Defendant MILLER, MATTHEW LEE **Court Case No:** 19-19822-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.

12/14/19
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