

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) MILLER, MATTHEW LEE	DOB 02/18/1989	Sex M	Race W	Ht 511
		Wt 180	Hair BRO	Eyes BLU
			Skin MED	
Alias	DL # M460-552-89-058-0	State FL	Scars/Marks/Tattoos/Physical Features	
Local Address (Street, City, State, Zip Code) 11490 59 TER SEMINOLE FL 33772	Telephone 727-290-7850	Place of Birth FLORIDA	Citizenship US	
Permanent Address (Street, City, State, Zip Code) 11490 59 TER SEMINOLE FL 33772	Telephone 727-290-7850	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 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.

Contrary to Florida Statute/Ordinance 784.03

ARREST DATE: 12/13/2019 Time 6:58 AM

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

PINELLAS COUNTY SHERIFF

Declarant Signature

Agency

DEPUTY DENNIS PATITZ 56129

02359725

Printed Name

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

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:

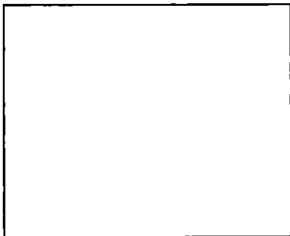
- ☐ A. Defendant has advised the Court that he has retained counsel or will retain counsel.
- ☐ B. The Court investigated Defendant's solvency and found the Defendant financially able to secure counsel.
- ☒ C. The Court investigated Defendant's solvency and provisionally appointed the Public Defender.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

12/14/19

DATE AND TIME

[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