

UCN: N/A

FL0520000

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

OBT #		REPORT # SO20-141712		DOCKET # 1838111																
Person ID 311147269			SSN# [REDACTED]																	
Charge Description		Felony ☐ Misdemeanor ☐ Warrant ☒ Traffic ☐ Ordinance ☐		Traffic Citation # (if any)																
Charge DRIVING UNDER THE INFLUENCE		AD0B26E		AD0B26E-1																
Defendant's Name (Last, First, Middle) ROSE, MATTHEW ROBERT		DOB 10/01/1992		Sex M	Race W															
Ht 511		Wt 220		Hair RED	Eyes GRN															
Skin FAR																				
Alias		DL # R200556923610		State FL																
Scars/Marks/Tattoos/Physical Features SURGERY SCAR ON LEFT ANKLE																				
Local Address (Street, City, State, Zip Code) 1406 35TH ST W BRADENTON FL 34205		Telephone 319-899-7238		Place of Birth ILLINOIS																
Citizenship US																				
Permanent Address (Street, City, State, Zip Code) 1406 35TH ST W BRADENTON FL 34205		Telephone 319-899-7238		Employed by / School UNEMPLOYED																
Weapon Seized Type ☐ Yes ☒ No		Indication of Drug Influence Y N UNK ☐ Y ☒ N ☐ UNK		Indication of Mental Health Issues Y N UNK ☐ Y ☒ N ☐ UNK																
Indication of Alcohol Influence Y N UNK ☒ 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 <u>25</u> day of <u>MAY</u>, 2020, at approximately <u>4:42</u> AM, at <u>SEMINOLE BLVD / ORANGE BLOSSOM LN</u>, in Pinellas County did: REASON FOR STOP: CARELESS DRIVING THEN AND THERE UNLAWFULLY DRIVE AND/OR BE IN ACTUAL PHYSICAL CONTROL OF A MOTOR VEHICLE WITHIN PINELLAS COUNTY, FLORIDA WHILE UNDER THE INFLUENCE OF AN ALCOHOLIC BEVERAGE, A CONTROLLED SUBSTANCE AND/OR ANY CHEMICAL SUBSTANCE TO THE EXTENT THAT (HIS) NORMAL FACULTIES WERE IMPAIRED. BRAC: (.212/.197) BREATH: (DISTINCT ODOR OF CONSUMED ALCOHOLIC BEVERAGE) BALANCE: (POOR) EYES: (BLOODSHOT AND WATERY) DEFENDANT : FAILED FIELD SOBRIETY TESTS. COURT INFORMATION: SOUTH COUNTY TRAFFIC COURT (CALL OF THE COURT) CITATION #: AD0B26E DEFENDANT WAS STOPPED FOR CARELESS DRIVING. UPON CONTACT, DEFENDANT EXHIBITED MULTIPLE SIGNS OF IMPAIRMENT. DEFENDANT THEN PERFORMED FIELD SOBRIETY EXERCISES AND FAILED. THE DEFENDANT WAS TRANSPORTED TO CENTRAL BREATH TESTING WHERE HE PROVIDED A BREATH SAMPLE OF .212/.197. DEFENDANT WAS THEN BOOKED INTO THE PINELLAS COUNTY JAIL. Contrary to Florida Statute/Ordinance <u>316.193.1</u> ARREST DATE: <u>5/25/2020</u> Time <u>5:42</u> AM . Aggravating/Mitigating Factors <u>U/ROR</u> Booking Officer: <u>HUSTON 59305</u> Amount of Bond <u>500***</u> Bond Out Date <u>05/25/20</u> Time <u>1P:09</u> ☐ 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: 5/25/2020 7:13:14 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.  DEPUTY STEPHEN JACOBSEN 59886 Printed Name		PINELLAS COUNTY SHERIFF Agency 02894084 Declarant ID#																		
REQUEST FOR INVESTIGATIVE COSTS, F.S. 938.27(1) <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>DATE</th> <th>OFFICER</th> <th>HOURS X PAY RATE</th> <th>OR</th> <th>COST</th> </tr> <tr> <td>05/25/2020</td> <td>S. JACOBSEN</td> <td>3 25.00</td> <td></td> <td>\$75.00</td> </tr> <tr> <td colspan="5">OTHER – Describe</td> </tr> </table> Continuation sheet ☐ Yes ☐ No TOTAL \$ <u>75.00</u>						DATE	OFFICER	HOURS X PAY RATE	OR	COST	05/25/2020	S. JACOBSEN	3 25.00		\$75.00	OTHER – Describe				
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Defendant ROSE, MATTHEW ROBERT **Court Case No:** AD0B26E-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.

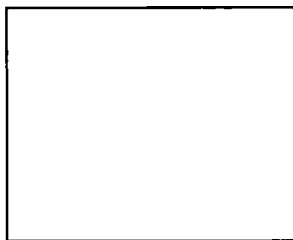
I FURTHER CERTIFY THAT:

- ☐ 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.

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