FL0520300

COMPLAINT/ARREST A	AFFIDAVIT – CIRC	CUIT/C	OUNTY	CC	UR'	<u> </u>	NELLA	S COU	NTY, FL	ORIDA	<u>\</u>
OBTS#	REPOR	т# CW	19-10	09	41		DOCE	сет# 180	06111		
Person ID 311339292			SSN#								
Charge Description Felony Misdemean	r Warrant Traffic	Ordinance	Traffi	ic Cit	ation #	(if any)		Cou	rt Case #		
POSSESSION OF A CONTRO	OLLED SUBSTAN	CE						19-0	07992-C	F-1	
Defendant's Name (Last, First, Middle)		DOB	44000	- 1	Sex	Race	Ht	Wt	Hair	Eyes	Skin
KESLER, MELISSA J	DL#	06/26/			F	W	503	120	BLN	BLU	LGT
	K2465508971	60	State FL							<u> </u>	
Local Address (Street, City, State, Zip Code) 712 S GLENWOOD AVE CLEARWATE	R FL 33756			Tele	phone		Place of GEOR		Citizensl USA	ıip	
Permanent Address (Street, City, State, Zip C 712 S GLENWOOD AVE CLEARWATER						NONE	Employed by / School NONE				
Weapon Seized Type ☐Yes ☑No	Indication o Drug Influe	f Y N		Indication of Mental Y N UNK Indication of Health Issues					UNK		
Co-Defendant's Name (Last, First, Middle)					DOB		Sex	Race	In Custody		
									☐Felony	Misdem	eanor
Co-Defendant's Name (Last, First, Middle)					DOB	3	Sex	Race	In Custody	√ ∐Yes	□No
									☐Felony		
	· · · · · ·							<u>.</u>			
The undersigned swears that he/she has reaso			named defen	dant (on the .	01 da	ay of	JULY		19,	
at approximately 9:11 AM	, at617 S GLENWOO	D AVE						ii	in Pinellas Co	unty did:	
UNLAWFULLY HAVE IN (HER) A	CTUAL OR CONSTR	RUCTIVE	POSSES	SSIC	ON, A	SUB	STANCE	DEFINE	D BY FLO	ORIDA	
STATE STATUTE CHAPTER 893 FROM A VALID PRACTITIONER					IG LA	WFUI	LLY OBT	AINING S	SAID SUE	STANC	E
A PRESUMPTIVE TEST WAS PO	OSITIVE.							,			
DURING A SEARCH OF A VEHIO CONTAINING A SMALL WHITE F LABEL OF THE PILL BOTTLE. U FOR DILAUDED.	PILL WRAPPED IN A	PIECE C	OF NEWS	SPAI	PER	THAT	WAS NO	OT CONS	SISTENT BACK P	WITH T	HE
A POST MIRANDA STATEMENT	BY THE DEF ADVIS	ED THE	PILL WA	S D	ILAU	DED		0 AH2 AH2		- n	
SUBJ NOT PRESCRIBED THIS N	MEDICATION							285) 285)			
Contrary to Florida Statute/Ordinance 893	.13.6A		.) = (; ; ;) ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	1.3		
ARREST DATE: 7/1/2019 Time 9	0:17 AM	. Aggrava	ıting/Mitigat	ing F	actors_				<u> </u>	يده أ بوجوداً در	
Booking Officer: POWERS, M 54040	Amount of	Bond	2000.00		_Bond	Out Da	te		rime ယ		. □p.m <u>.</u>
Victim Notified of Advisory?Yes I	No Injuries to	Victim?	Yes _	No		:	Medical Tre	eatment to V	ictim?	Yes N	0
The Court reviewed this complaint and finds	there: □is probable cause □]is not prob	able cause to	deta	in defe	ndant [Bond Acti	on, if any:			 .
The probable cause determination is passed for	or: 24 Hrs 24 Hrs on sho	owing of ext	raordinary o	circur	nstance	es Re	eceived by Bo	ooking: 7/1/20	119 1:20:39 PM	1	
Pursuant to F.S. 92.525 and under penalty of read the foregoing document and that the fac		DAT	ге о	FFIC				IVE COSTS PAY RATE 29.14	, F.S. 938.27 OR	(1) COST \$87.42	Γ
Matheral	CLEARWATER POLICE DEPT.	-	, <u>20.0</u> B.	2.101		-		20.14			
Declarant Signature	Agency	-									
OFFICER DYLAN DRUMMOND CW1381	310428873	OT1	HER – Descr	ibe							_
Printed Name	Declarant ID#		tinuation sh		Y	es 🗀	□No	то	TAL <u>\$</u> \$87	'.42	-

7,7

Defendant	KESI ER	MELISSA.	. 1
Detendant	NEOLLIN,	INITHIOOU	J

Court Case No:

19-07992-CF-1

ADVISORY AND SOLVENCY HEARING

	Michael & Chahew
DATE AND TIME	JUDGE
	_
, having been found solvent and financially able	e to secure counsel, hereby waive counsel until my attorney
, having been found solvent and financially able	e to secure counsel, hereby waive counsel until my attorney
	e to secure counsel, hereby waive counsel until my attorney
, having been found solvent and financially able	e to secure counsel, hereby waive counsel until my attorney
, having been found solvent and financially able	e to secure counsel, hereby waive counsel until my attorney
, having been found solvent and financially able	e to secure counsel, hereby waive counsel until my attorney
, having been found solvent and financially able	e to secure counsel, hereby waive counsel until my attorney equest for a review of my solvency and ability to secure counse

C	OMPLAINT/ARREST	AFFIDAVIT	- CIRC	CUIT/C	OUNTY	CO	UR7	<u>Γ – PI</u>	NELLA	S COU	NTY, FI	ORIDA	4
OBTS#	·		REPOR	т# CW	19-10	094	11		DOCK	жт# 18 0	06111	•	
Person II	311339292				SSN#								
	scription Felony Misdemean	or Warrant	Traffic	Ordinance	Traff	ic Cita	tion #	(if any)		Соц	rt Case #		
	ESSION OF CONTRO	LLED SUBS	TANCE	Ξ						19-0	07992-0	CF-2	
	t's Name (Last, First, Middle)			DOB		i	Sex	Race	Ht	Wt	Hair	Eyes	Skin
	ER, MELISSA J			06/26/			=	W	503	120	BLN_	BLU	LGT
Alias			508971	60	State FL				os/Physical				
712 S GI	dress (Street, City, State, Zip Code) ENWOOD AVE CLEARWATE	R FL 33756					phone		Place of I	GIA	Citizens USA	hip 	
Permanent Address (Street, City, State, Zip Code) 712 S GLENWOOD AVE CLEARWATER FL 33756 Weenen Seized, Type					•			NONE	Employed by / School NONE				
	Weapon Seized Type ☐Yes ☑No				f Y N nce 🗵 🔲	Y N UNK Indication of Mer			Mental Y				
	<u> Di</u> dant's Name (Last, First, Middle)						DOB		Sex				
											□Felony	Misdem	eanor
Co-Defen	dant's Name (Last, First, Middle)						DOB	3	Sex	Race	In Custod	ly □Yes	□No
											□Felony	□Misdem	eanor
		-						04			0.0	140	
The unde	rsigned swears that he/she has reas	onable grounds to b	elieve that	t the above r	named defen	dant o	n the	UI da	y of	JULY)19,	
at approx	imately 9:11 AM	, at617 S GL	ENWOO	DD AVE							in Pinellas C	County did:	
l .	AND THERE UNLAW					-					OL A CI	ERTAIN	1
CONT	ROLLED SUBSTANC	E, TO-WIT: ((LOAD	ED NE	EDLE W	'ITH	HE	ROIN	INSIDE	Ξ)			
A T T.	IE ADOVE DATE AND	TIME DUD	1810 4	CEADO		\/ _	шо		IE DEE	14/4 C 1	OCATE	י או ח	14/0
	HE ABOVE DATE AND DED NEEDLES WERE												VVO
	DER, AND ANOTHER \												PON
CONT	-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				•	•	<u></u>		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
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A FIE	LD TEST RETURNED	POSITIVE F	RESUL	TS FOF	RHERO	IN.				음 등 및 1		- 1	
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POST	MIRANDA THE DEF	ADMITTED ⁻	TO TH	E SUBS	STANCE	BE	ING	HER	OIN.		, i da		
Contrary	to Florida Statute/Ordinance 89	3.13.6A									<u>.</u>		
										*** :			<i>:</i>
ARREST	DATE: 7/1/2019 Time	9:17 AM	-	. Aggrava	ating/Mitiga	ting Fa	actors_			<u> </u>	.: န ထ		
Booking	Officer: POWERS, M 54040		Amount of	f Bond	2000.00		_Bond	l Out Da	te		Time	□а.п	ı. □p.m <u>.</u>
Victim N	otified of Advisory?Yes	No	Injuries to	o Victim?	Yes	No		1	Medical Tre	eatment to V	ictim?]Yes 🔲 N	io
The Cou	t reviewed this complaint and find	s there: 🗌 is probat	ole cause 🗆]is not prob	able cause t	o detai	in defe	endant [Bond Action	on, if any:_			 .
The prob	able cause determination is passed	for: □24 Hrs □24	Hrs on sh	owing of ext	traordinary	circun	nstanc	es Re	eceived by Bo	ooking: 7/1/20	019 1:19:30 P	М	-
	t to F.S. 92.525 and under penalty of foregoing document and that the fa		that I hav	DA'	TE C	FFIC	ER		HOURS X	PAY RATE	S, F.S. 938.27 OR	cos	Т
	Mathe			-07/	01/2019 D	. DRUM	INOMI	υ 	3	29.14		\$87.42	-
		CLEARWATER POL	ICE DEPT.	_ —									-
Declara	nt Signature	Agency											-
OFFICE	R DYLAN DRUMMOND CW1381	310428873		_ ОТ	HER – Desc	ribe _							•
Printed	Name	Declarant ID	#	Соп	itinuation sh	ieet 🛚		Yes 🗔	□No	TO	TAL \$ \$8	37.42	_

Defendant	KESLER.	MELISSA J
Jerengant	1 1 1 1,	IVILLIOONIO

Court Case No: 19-07992-CF-2

ADVISORY AND SOLVENCY HEARING

C. The Court investigated Defendant's solve D. The Defendant waived the right to counse	ency and found the Defendant financially able to secure counsel. ency and provisionally appointed the Public Defender. sel at the first appearance only.
· ·	Michael & Conchour
DATE AND TIME	JUDGE
I hereby waive the right to counsel at the fi I, having been found solvent and financia	ially able to secure counsel, hereby waive counsel until my attorney
I, having been found solvent and financia	
I, having been found solvent and financia	ially able to secure counsel, hereby waive counsel until my attorney
I, having been found solvent and financia	ially able to secure counsel, hereby waive counsel until my attorney written request for a review of my solvency and ability to secure counsel.

_	COMPLAINT/ARREST A	<u> AFFIDAVIT – CIRC</u>	CUIT/C	UUNTY	CO	UK'	<u> 1 – Pl</u>	LN.	<u> ELLA</u>	<u>s cour</u>	NTY, FL	<u>OKID</u>	
O	BTS#	REPOR	т# CW		094	41			роск	et#180	06111		
Pe	rson ^{ID} 311339292			SSN#									
	rge Description Felony X Misdemeand		Ordinance	Traffi	ic Cita	ation #	(if any)			Cour	rt Case #		
	i arge AWFUL POSSESSION OF PERSONAL IDENTIFIC ISON	ATION INFORMATION OF ANOT	HER							19-0	7992-0	CF-3	
1	fendant's Name (Last, First, Middle)	•	DOB	14000	i i	Sex	Race	H		Wt	Hair	Eyes	Skin
	ESLER, MELISSA J		06/26/			F	W		03	120	BLN	BLU	LGT
AJ	ias	DL # K2465508971	60	State FL	Sca	rs/Mai	rks/Tatt	00S	/Physical	Features			
71	cal Address (Street, City, State, Zip Code) 2 S GLENWOOD AVE CLEARWATE					phone			Place of I	GIA	Citizens USA	hip	
	rmanent Address (Street, City, State, Zip C 2 S GLENWOOD AVE CLEARWATER					phone			NONE		1		
	eapon Seized Type Yes XNo		Indication of Drug Influer				cation of th Issue		ental Y		ndication of Acohol Influ		UNK
	-Defendant's Name (Last, First, Middle)		Di ug Anatue		<u> </u>	DOB			Sex	Race	In Custod		
											☐Felony	Misdem	
Co	-Defendant's Name (Last, First, Middle)					DOB	3		Sex	Race	In Custod	y Yes	□No
											∏Felony	Misdem	eanor
							01 ,			JULY	20	19	
TI	e undersigned swears that he/she has reaso			iamed defen	dant (on the	d:	ay c	DI	JOLI		, 10	
at	approximately 9:11 AM	, at617 S GLENWOO	DD AVE	_						,i	in Pinellas C	ounty did:	
,	OUR OR FEWER PIECES - 1	ST DEGREE MISD	EMEAN	OR -									
_	EFENDANT DID INTENTION	ALLY OD KNOWIN		22E22	10/13	THO	ι ΙΤ ΔΙ	ıт	HUBI.	ΖΔΤΙΩΝ	THE PI	ERSON	ΔΙ
	DENTIFICATION INFORMATI												
N	IAIL, PHYSICAL DOCUMENT	S, IDENTIFICATION	N CARD	S, OR II	NFO	RM/	ATION	1 5	STORE	D IN DI	GITAL F	ORM.	•
\ \ <u>\</u>	HEN ASKED TO IDENTIFY I	HERSELF THE DE	F PROV	IDED AN	ו או	FNT	IFICA	TI	ON C	ARD WH	IICH WA	S	
1	ONFIRMED TO NOT BE HER	•		1000,		_,,,,		• • •	0110,				
_			(IDED TI	!!O !D D		or	- 0	_ ,	*** 0 0	OADED	ADOLIT	·	NO
P	OST MIRANDA, THE DEF AI N TROUBLE. THE DEF ADVIS	OVISED SHE PROV SED THE ID IS ERC	IN ANO	THER G	EC <i>F</i> IRI	WIT	E SHE	= V [Hi	MAS S F ARC	VF ADD	ABOUT	GEIII	NG
"	TROUBLE. THE DEL ADVI	SED THE ID IS INC	NVI AINO	···Lic O	11 \L	***	11114 1			e /			
	047	, ECOE 3 V								32	\ =	1.1	
C	ontrary to Florida Statute/Ordinance 817	.5085.3A		.									
A	RREST DATE: 7/1/2019Time S	9:17 AM	. Aggrava	nting/Mitigat	ting F	actors				2		i	
}	ooking Officer: POWERS, M 54040	Amount o	f Dand	150.00		Pond	l Out Da	nto		 · · . •	Time		; ı. □p.m.
	_	. 									9.0	,	- •
ĺ	ctim Notified of Advisory?Yes	·	o Victim?			:_ J_E				atment to V	ی ن	Yes LIN	10
1	ne Court reviewed this complaint and finds ne probable cause determination is passed f	_											
<u> </u>	<u> </u>							_		ooking: 7/1/20 			
	ursuant to F.S. 92.525 and under penalty of ead the foregoing document and that the fac		DA'	ге с	FFIC					PAY RATE 29.14	·=	COS' \$87.42	Г
	Sphand	0/ F4DWATER 20/ 105 2-2-											-
-	eclarant Signature	Agency	-										-
	ŭ	310428873		UED Dagge									-
-	DFFICER DYLAN DRUMMOND CW1381 rinted Name	Declarant ID#	-	HER – Desc ntinuation sh	=		Yes \square] No		TAL <u>\$</u> \$8	7.42	<u>-</u>
1 -		••	1 -32										-

Defendant	KESLER.	MELISSA	J
Jelenvani	,		_

Court Case No:_

19-07992-CF-3

ADVISORY AND SOLVENCY HEARING

ippearance only. Muhaul A Carchere
JUDGE
e only.
ecure counsel, hereby waive counsel until my attorney for a review of my solvency and ability to secure counsel
ecure counsel, hereby waive counsel until my attorney
ecure counsel, hereby waive counsel until my attorney
ecure counsel, hereby waive counsel until my attorney

COMPLAINT/ARREST	AFFIDAVIT	– CIRO	CUIT/C	OUNTY	CO	<u>URI</u>	<u> </u>	NELLA	S COU	NTY, FL	ORIDA	4	
OBTS#		REPOR	r# CW	19-10	094	11		роск	ет# 18	06111			
Person ID 311339292				SSN#			,					1	
Charge Description Felony Misdemean	or Warrant	Traffic	Ordinance	Traff	ic Cita	tion #	(if any)		Cou	rt Case #	•		
Charge POSSESSION OF MARIJUA	NA								19-	07992-0	F-4		
Defendant's Name (Last, First, Middle)			DOB	11000		Sex		Ht	Wt	Hair	Eyes	Skin	
KESLER, MELISSA J	- T		06/26/			=]		503 os/Physical	120	BLN	BLU	LGT	
Alias		508971	60	State FL			KS/ I atto						
Local Address (Street, City, State, Zip Code 712 S GLENWOOD AVE CLEARWATE	ER FL 33756					phone		Place of I	GIA	Citizens USA	hip		
Permanent Address (Street, City, State, Zip 712 S GLENWOOD AVE CLEARWATE					Telephone I			NONE	Employed by / School NONE				
Weapon Seized Type ☐Yes ☒No	Indication o Drug Influe				ation of th Issues		Y N UNK Indication of Y N UNI ☐ ☑ ☐ Alcohol Influence ☐ ☑ ☐						
Co-Defendant's Name (Last, First, Middle)						DOB	}	Sex	Race	In Custody Yes No			
										Felony	∐Misdem	eanor	
Co-Defendant's Name (Last, First, Middle)				-		DOB	1	Sex	Race	In Custod	y ∐Yes	□No	
										Felony	☐Misdem	eanor	
The undersigned swears that he/she has reas	onable grounds to l	believe that	the above r	amed defen	dant o	n the	01 _{da}	y of	JULY	, 20	19,		
at approximately 9:11 AM	, 617 S GL	ENWOO	D AVE							in Pinellas C	ounty did:		
						ι Λ	el ib	CTANC			-		
UNLAWFULLY HAVE IN (HI STATE STATUTE CHAPTE													
THE CANNABIS DID WEIG													
WAS POSITIVE.	i i (5 Ci valvic), AIT	- IVIOOIV	I LLOC	, , , ,	/ \i \ /	20 01	U MVIO.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	JOIVII 11	V	· .	
177.61.00.1172.													
(UPON CONTACT WITH TH	HE DEF WIT	HIN TH	IE VEHI	CLE SH	HE V	VAS	DRIV	/ING, A	SMAL	BAGG	IE OF		
MARIJUANA WAS OBSERV											_		
SPONTANEOUSLY STATE	D THE CON	TRABA	AND WA	S HER	S. A	FIE	LD TI	EST W	AS POS				
MARIJUANA)									<u>C</u>	Z019			
									25	// =	. =		
·									- 36X		·		
Contrary to Florida Statute/Ordinance 89	3.13.6B								1.7 =	i, d	-		
											- 1	ī	
ARREST DATE: 7/1/2019Time	9:17 AM	-	. Aggrava	iting/Mitiga	ting Fa	actors_			* * * * * * *		<u> </u>		
Booking Officer: POWERS, M 54040	<u> </u>	_Amount of	f Bond	150.00	_	_Bond	Out Dat	te		Time ω		a. □p.mį.	
Victim Notified of Advisory?Yes	No	Injuries to	o Victim?	Yes	No		ľ	Medical Tre	eatment to V	/ictim?]Yes □ N	ło	
The Court reviewed this complaint and find	s there: 🔲 is probal	ble cause 🗌]is not prob	able cause t	o detai	in defe	ndant [Bond Acti	on, if any:_			 .	
The probable cause determination is passed	for: □24 Hrs □24	Hrs on sh	owing of ext	raordinary	circun	nstanc	es Re	ceived by Bo	ooking: 7/1/2	019 1:23:14 P	М		
Pursuant to F.S. 92.525 and under penalty read the foregoing document and that the f		e that I hav	DA	ге (REQU DFFIC DRUM	ER			IVE COSTS PAY RATE 29.14	S, F.S. 938.27 C OR	(1) COS \$87.42	т	
Mathe	CLEARWATER POL	ICE DEDT		- 1,2010 D			_					- -	
Declarant Signature	Agency		-									-	
OFFICER DYLAN DRUMMOND CW1381	310428873			HED Da	wih.c							-	
Printed Name	Declarant ID	#	-	HER – Desc Itinuation sl	_	<u></u>	es 🗀	□No		OTAL \$ \$8	7.42	<i>-</i> -	
			I		_								

Court Case No:

19-07992-CF-4

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:

	Michael & Onchew
DATE AND TIME	JUDGE
	•
I hereby waive the right to counsel at the first a	appearance only.
I hereby waive the right to counsel at the first a I. having been found solvent and financially	
I, having been found solvent and financially	able to secure counsel, hereby waive counsel until my attorney
I, having been found solvent and financially	able to secure counsel, hereby waive counsel until my attorney
I, having been found solvent and financially	able to secure counsel, hereby waive counsel until my attorney
I, having been found solvent and financially	appearance only. able to secure counsel, hereby waive counsel until my attorney en request for a review of my solvency and ability to secure counsel
I, having been found solvent and financially	able to secure counsel, hereby waive counsel until my attorney en request for a review of my solvency and ability to secure counsel
I, having been found solvent and financially	able to secure counsel, hereby waive counsel until my attorney
I, having been found solvent and financially	able to secure counsel, hereby waive counsel until my attorney en request for a review of my solvency and ability to secure counsel

UCN: 522019CF007992XXXXCF FL0520300
COMPLAINT/ARREST AFFIDAVIT – CIRCUIT/COUNTY COURT – PINELLAS COUNTY, FLORIDA

COMILAMINITARREST	AFFIDAVII						<u>, </u>				ÜKIDA	<u> </u>	
OBTS#		REPOR	т# CW		09	41		DOCE	œт# 18	06111			
Person ID 311339292				SSN#									
Charge Description Felony X Misdemea	nor Warrant	Traffic	Ordinance	Traff	ic Cita	ation #	(if any)		Cou	ırt Case#			
POSSESSION OF DRUG PA	ARAPHERNA	LIA							19-	07992-0	F-5		
Defendant's Name (Last, First, Middle)			DOB		- 1	Sex	Race	Ht	Wt	Hair	Eyes	Skin	
KESLER, MELISSA J			06/26/	1989		F	W	503	120	BLN	BLU	LGT	
Alias	DL # K2465	508971	60	State FL	Sca	rs/Mai	rks/Tatte	oos/Physica	l Features				
Local Address (Street, City, State, Zip Code 712 S GLENWOOD AVE CLEARWAT	ER FL 33756		,	1	Tele	phone		Place of GEOR		Citizensi USA	ip		
Permanent Address (Street, City, State, Zip 712 S GLENWOOD AVE CLEARWATE					Tele	phone			Employed by / School NONE				
Weapon Seized Type	eapon Seized Type			f <u>Y N</u>		UNK Indication of Me			N UNK	UNK Indication of Y N UNK			
☐Yes ☑No Co-Defendant's Name (Last, First, Middle)			Drug Influei	ıce 🗷 🗌		Heal DOE	th Issue:	s E	Race	Alcohol Influe			
(200, 200, 200, 200, 200, 200, 200, 200,										In Custody	_		
Co-Defendant's Name (Last, First, Middle)						DOE	3	Sex	Race	In Custody	√ ∏Yes	□No	
				·			•			Felony			
						·	01 .		JULY	20	19		
The undersigned swears that he/she has rea	sonable grounds to b	elieve that	t the above n	amed defen	dant (on the	<u> </u>	ay ot	JOLI		<u></u> ,		
at approximately 9:11 AM	, at617 S GL	ENWOO	DD AVE	•						in Pinellas Co	ounty did:		
UNLAWFULLY USE OR HA	VE IN (HER)	POSS	SESSIO	N, CUS	TOE	OY. (OR C	ONTRO	L A CE	RTAIN I	ТЕМ С	F	
DRUG PARAPHERNALIA V	, ,			•		•							
SMOKING, INGESTING OF	RINJECTING	A DAI	NGERO	US DRI	JG (CON	ITRO	LLED E	SY CHA	PTER 89	3 OF		
FLORIDA STATE STATUTE	ES INTO THE	HUM	AN BOD	Y, TO-\	NIT	: (7	NEEL	DLES U	SED FO	OR HERO	DIN US	iΕ).	
(LIDON CONTACT M(T) LT)	IE DEE MUTI			01 = 01			DD"	 -		- 14/4 0 -	01 IV ID		
(UPON CONTACT WITH THE								•					
POSSESSION OF MULTIPI												م	
HOLDER, AND VARIOUS C								`				эт	
HOLDER) WERE LOADED MIRANDA STATEMENT, TH										IEROIN.	APU	וכ	
WIIIVANDA STATEWENT, TI	IL DEI ADIV	111166	, 10 111	L 30B3	אוכ	IACE	. DEII	NG HE	(Cilv)				
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Contrary to Florida Statute/Ordinance_89	3.147			•					c	A E	3		
7/1/2010	0.47 684								25 ·	/\ =	- 142		
ARREST DATE: 7/1/2019Time	9:17 AM	-	. Aggrava	ting/Mitigat	ing F	actors_			<u> </u>	1	<u> </u>	4	
Booking Officer: POWERS, M 54040)	Amount of	f Bond	150.00		_Bond	Out Da	te	322	Time C3	a.m	<u>.</u> □p.m.	
Victim Notified of Advisory?Yes	No	Injuries to	Victim?	_ Yes _	No]	Medical Tr	eatment to V	1 1	Yes 🔲 N	õ	
The Court reviewed this complaint and find	s there: 🔲 is probab	le cause 🗌	is not prob	able cause to	deta	in defe	ndant [Bond Acti	on, if any:_	ि स	. *	<u> </u>	
The probable cause determination is passed	for: □24 Hrs □24	Hrs on sh	owing of ext	raordinary (circun	nstanc	es Re	eceived by Be	ooking: 7/1/20	019 1:23:59 PX	1 -2 ,		
Pursuant to F.S. 92.525 and under penalty read the foregoing document and that the f		that I hav	DAT	E O	FFIC			HOURS X	IVE COSTS PAY RATE 29.14		COST	Γ	
Mathe			-	MAUIÐ U.	אטאט	MINIONE		3		<u> </u>	\$87.42		
Declarant Signature	CLEARWATER POLI	ICE DEPT.	-										
J	Agency												
OFFICER DYLAN DRUMMOND CW1381	310428873		-	IER – Descr	=						40	1	
Printed Name	Declarant ID#	•	Con	tinuation sh	eet <u>L</u>		es \coprod	No	TO	OTAL <u>\$</u> \$87	.42	_	

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:

	Michael. J. Conchour
DATE AND TIME	JUDGE
hereby waive the right to counsel at the first anne	earance only
I hereby waive the right to counsel at the first appe I, having been found solvent and financially able	earance only. le to secure counsel, hereby waive counsel until my attorney
I, having been found solvent and financially able	
I, having been found solvent and financially able	le to secure counsel, hereby waive counsel until my attorney
I, having been found solvent and financially able	le to secure counsel, hereby waive counsel until my attorney
, having been found solvent and financially able	le to secure counsel, hereby waive counsel until my attorney request for a review of my solvency and ability to secure counse
, having been found solvent and financially able	le to secure counsel, hereby waive counsel until my attorney
, having been found solvent and financially able	le to secure counsel, hereby waive counsel until my attorney request for a review of my solvency and ability to secure counse

COMPLAINT/ARREST A	<u> AFFIDAVIT – CIR</u> O	CUIT/C	<u>UUNTY</u>	CO	UR'	<u>r – Pl</u>	INEI	LA	<u>s cou</u>	<u>nty, fl</u>	<u>ORIDA</u>	<u> </u>
OBTS#	REPOR	T# CW	19-10	09	41		D	оскі	ет# 18	06111		
Person ID 311339292			SSN#									
Charge Description Felony X Misdemean	or Warrant Traffic	Ordinance	Traff	ic Cita	ation #	(if any)			Cor	urt Case #		
POSSESSION OF DRUG PARAPHERNALIA									19-	07992-0	CF-6	
Defendant's Name (Last, First, Middle)		DOB			Sex	Race	Ht		Wt	Hair	Eyes	Skin
KËSLER, MELISSA J		06/26/			F	W	503		120	BLN	BLU	LGT
Alias	DL # K2465508971	60	State FL	Sca	rs/Mai	rks/Tatte	oos/Phy	ysical l	Features			
Local Address (Street, City, State, Zip Code) 712 S GLENWOOD AVE CLEARWATER FL 33756				Tele	phone Place of Birth Citizenship GEORGIA USA			hip				
Permanent Address (Street, City, State, Zip Code) 712 S GLENWOOD AVE CLEARWATER FL 33756			Telephone Employed by / School NONE									
Weapon Seized Type ☐ Yes	Indication of Drug Influen						UNK					
Co-Defendant's Name (Last, First, Middle)				DOB Sex Race In Custody								
										Felony	Misdem	
Co-Defendant's Name (Last, First, Middle)					DOE	B ,		Sex	Race	In Custod	ly □Yes	ΠNο
											☐Misdem	
					ļ				.	1		
The undersigned swears that he/she has reason	nable grounds to believe tha	t the above r	ıamed defen	dant (on the	01 da	ay of		JULY		19	
0:11	617 S CI ENIMOC											
at approximately 9:11 AM	, at 617 S GLENWOO					_				in Pinellas C	County did:	
UNLAWFULLY USE OR HAY												F
DRUG PARAPHERNALIA W												
SMOKING, INGESTING OR						٠,						\
FLORIDA STATE STATUTE	SINTO THE HUM	AN BOL	JY, 1U-1	VVII	: (હ	LASS	PIP	'⊨ V\	// IVIAH	KIJUANA	KESIL	vu⊵).
											,	
UPON CONTACT WITH THE	E DEF. SHE WAS	FOUND	IN POS	SSE	SSI	ON (E	DEF '	WA:	S SITT	ING ON	THE P	IPE
AND WHEN ASKED TO STE												
SHE SPONTANEOUSLY STATED SHE JUST RECENTLY USED TO SMOKE MARIJUANA. UPON A OBSERVATION, A FIELD TEST CAME BACK POSITIVE FOR MARIJUANA WITHIN THE PIPE A SECOND FOR THE PROPERTY OF THE PROPERT												
											,	
Contrary to Florida Statute/Ordinance 893	k 1 4 7									M. Co.		
Contrary to Florida Statute/Ordinance 300			.							200		
ARREST DATE: 7/1/2019 Time 9:17 AM .Aggravating/Mitigating Factors												
Booking Officer: POWERS, M 54040	Amount	of Dand	150.00		Dond	l Out Da1	္ မွ	·:.	□n m
Booking Officer: 1 OVVEICO, IN 04040Amount of BondBond Out DateInme												
Victim Notified of Advisory?Yes No Injuries to Victim? Yes No Medical Treatment to Victim? Yes No No The Court reviewed this complaint and finds there: is probable cause is not probable cause to detain defendant Bond Action, if any:												
	– •	_ •					_		· • -		M	
The probable cause determination is passed for: 24 Hrs 24 Hrs on showing of extraordinary circumstances Received by Booking: 7/1/2019 1:24:56 PM Pursuant to F.S. 92.525 and under penalty of perjury, I declare that I have REQUEST FOR INVESTIGATIVE COSTS, F.S. 938.27(1)												
read the foregoing document and that the fa		DAT	TE C	FFIC					PAY RAT 29.14	E OR	COST \$87.42	r
Spatial	CLEADWATER BOLLOT REST											
Declarant Signature	Agency	-										
			mp -							<u></u>		
OFFICER DYLAN DRUMMOND CW1381 Printed Name	310428873 Declarant ID#	-	HER – Desci itinuation sh	_	h	Yes 🗀	□N₀			OTAL § \$8	7.42	•
	AT VOLUME BALL ALASTI	000	uuauvu 3ll	~~· <u></u>		~ =		•	1.	~ * * * * * * * * * * * * * * * * * * *		_

files

ADVISORY AND SOLVENCY HEARING

I FUE	RTHER 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 a	
J	Michael & Onchave
DATE AND TIME	JUDGE
DATE AND TIME	JUDGE
	appearance only. able to secure counsel, hereby waive counsel until my attorney en request for a review of my solvency and ability to secure counsely. DEFENDANT'S SIGNATURE
1	DEFENDANT'S SIGNATURE
Thumb Print	
I HEREBY acknowledge receipt of a copy of the	Foregoing Complaint and Advisory.
DEFENDANT'S SIGNATURE DEFEN	DANT'S ATTORNEY'S SIGNATURE DATE

COMPLAINT/ARREST AF	1			19-10			- PI		<u>s соог</u> ет# 180		<u>JKIDA</u>	
OBTS#		REPORT	# C V V	SSN# =	092	+ 1		DOCK	ET# IOU	וווסק		
311339292	ny br	с. По			- 614	4° II	<u> </u>			4.6		
Charge			rdinance	Train	c Cita	non#	(if any)		Cour	t Case #		
RESIŠTING AN OFFICER; WITHOUT VIOI	LENCE (OBSTI									7992-C	F-7	
Defendant's Name (Last, First, Middle)			ров 06/26/	1000		Sex =	Race	Ht	Wt	Hair	Eyes	Skin
KESLER, MELISSA J	DL#	i		State			W ks/Tatte	503 os/Physical	120 Features	BLN	BLU	LGT
Local Address (Street, City, State, Zip Code)	K24655	0897160	0	FL		hone		Place of		Citizenshi	in.	
712 S GLENWOOD AVE CLEARWATER F				•	_			GEOR	GIA	USA	<u> </u>	
Permanent Address (Street, City, State, Zip Cod 712 S GLENWOOD AVE CLEARWATER F					Telep	phone		Employe NONE	d by / School	l		
Weapon Seized Type □Yes ⊠No	-		dication of rug Influen		UNK		ation of th Issue:	Mental Y		ndication of lcohol Influe		UNK
Co-Defendant's Name (Last, First, Middle)	<u>.</u> .		ug Innue			DOB		Sex	Race	In Custody		
										Felony [
Co-Defendant's Name (Last, First, Middle)		_				DOB		Sex	Race	In Custody	□Yes	□No
										□Felony [ľ
							0.4	I		004		
The undersigned swears that he/she has reasonal	ble grounds to be	lieve that t	he above n	amed defen	dant o	n the _	U1 da	y of	JULY		9	
at approximately 9:11 AM , a	617 S GLE	NWOOE	AVE							n Pinellas Co	untv did:	
UNLAWFULLY OBSTRUCT O				MOND	١ ۸	וווח	VΔN	UD I EG			•	ι Δ\Λ/
ENFORCEMENT OFFICER OF THE (CLEARWATER PD), WHILE IN THE LAWFUL EXECUTION O LEGAL DUTY, WHICH CONSISTED OF (IDENTIFYING THE SUSPECT IN REFERENCE TO POSS					ИС							
CHARGES & TRAFFIC STOP) WITHOUT OFFERING OR DOING VIOLENCE TO THE PERSON OF THE												
OFFICER.												
(UPON CONTACT WITH THE	DEE IN DE	EEDEI	NCE T		ΛEE	IC 9	TOP	THE	EE DRO	MIDED		
CARD WHICH WAS FOUND T								-				
AND POST MIRANDA ADMIT												,
LICENSE AND WAS SCARED ABOUT WHAT SHE HAD IN THE VEHICLE. A LATER SEARCH OF THE VEHICLE PRODUCED HER REAL IDENTIFICATION CARD WITHIN THE TRUNK)												
Contrary to Florida Statute/Ordinance 843.02				:					2四 / \	\ =		
ARREST DATE: 7/1/2019 Time 9:1	7 AM	_	. Aggrava	ting/Mitigat	ing Fa	ictors_				1 (
Booking Officer: POWERS, M 54040		mount of I	0	150.00		Do-d	Out Do	40	- r : (ime		□р.т.
	•					_ D ONG	Out Da					- •
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:												
<u> </u>		_	wing of ext							19 1:25:54 PM F.S. 938.27(
Pursuant to F.S. 92.525 and under penalty of peread the foregoing document and that the facts		hat I have	DAT	E O	FFIC				PAY RATE 29.14	OR	COST \$87.42	.
Mother .			-	7172019 13.	DROW	IIVIOINE			25.14		φ01.42 ————	
Declarant Signature	EARWATER POLIC	E DEPT.					-					
	Agency											
	0428873 Declarant ID#			IER – Descr tinuation sh		—	·os [⊐ _{No}		TAL § \$87.	42	
Printed Name	Deciarant ID#		Con	unuation sh	eet <u> </u>	x	es <u> </u>	<u> </u>	10	1M1 3 401.		-

Defendant	KESLER.	MELISSA .
Jelenvani	,	

Court Case No:

19-07992-CF-7

ADVISORY AND SOLVENCY HEARING

	ER CERTIFY THAT:
☐ A. Defendant has advised the Court that he has retain	ined counsel or will retain counsel.
3 B. The Court investigated Defendant's solvency and	d found the Defendant financially able to secure counsel.
C. The Court investigated Defendant's solvency and	d provisionally appointed the Public Defender.
D. The Defendant waived the right to counsel at the	first appearance only.
_	Michael J. Onchew
DATE AND TIME	JUDGE
	earance only. The to secure counsel, hereby waive counsel until my attorney file equest for a review of my solvency and ability to secure counsel.
	DEFENDANT'S SIGNATURE
Thumb Print	
I HEREBY acknowledge receipt of a copy of the foreg	going Complaint and Advisory.