[redacted]

UCN: 522020MM006439XXXXMM FL0520000

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

OBTS #		REPORT # SO20-140466	DOCKET # 1837991
Person ID 311523677		SSN# [redacted]	
Charge Description ☐ Felony ☒ Misdemeanor ☐ Warrant ☐ Traffic ☐ Ordinance		Traffic Citation # (if any)	Court Case #
Charge RESISTING AN OFFICER; WITHOUT VIOLENCE (OBSTRUCTION)			20-06439-MM-1

Defendant's Name (Last, First, Middle)	DOB	Sex	Race	Ht	Wt	Hair	Eyes	Skin
SEIDEL, NATHAN OMAR	03/11/1981	M	W	602	200	BLK	BRO	

Alias	DL #	State	Scars/Marks/Tattoos/Physical Features
	S340-634-81-091-0	FL	

Local Address (Street, City, State, Zip Code)	Telephone	Place of Birth	Citizenship
855 CENTRAL AVE APT 908 ST PETERSBURG FL 33701		NEBRASKA	US
Permanent Address (Street, City, State, Zip Code)	**Telephone**	**Employed by / School**	
855 CENTRAL AVE APT 908 ST PETERSBURG FL 33701		UNK	

Weapon Seized Type	Indication of Drug Influence	Indication of Mental Health Issues	Indication of Alcohol Influence
☐Yes ☒No	Y ☐ N ☐ UNK ☒	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 23 day of MAY, 2020,

at approximately 3:00 PM, at 9000 WEST GULF BLVD, TREASURE ISLAND, in Pinellas County did:

UNLAWFULLY OBSTRUCT OR OPPOSE SGT. A ORTIZ, A DULY AND LEGALLY CONSTITUTED LAW ENFORCEMENT OFFICER OF THE PINELLAS COUNTY SHERIFF'S OFFICE, WHILE IN THE LAWFUL EXECUTION OF A LEGAL DUTY, WHICH CONSISTED OF RESPONDING TO DISORDERLY INTOXICATION WITHOUT OFFERING OR DOING VIOLENCE TO THE PERSON OF THE OFFICER. TO WIT, THE DEFENDANT WAS DIRECTED TO LEAVE CADDY'S BAR AND THE BEACH DUE TO BECOMING DISORDERLY. THE DEFENDANT REFUSED TO LEAVE AND STARTED WALKING AWAY FROM SGT. ORTIZ. SGT. ORTIZ GAVE THE DEFENDANT COMMANDS TO STOP AND COME TOWARD SGT. ORTIZ SINCE HE WAS INVOLVED IN A DISORDERLY INTOXICATION INCIDENT THE DEFENDANT OBSTRUCTED BY WALKING AWAY AND REFUSING TO COMPLY, THE DEFENDANT DID NOT COMPLY AND INSTEAD JUMPED IN TO THE WATER. A POLICE MARINE UNIT HAD TO BE REQUESTED TO GET THE DEFENDANT OUT OF THE WATER. DURING THE INCIDENT THE DEFENDANT CONTINUED TO BE UNCOOPERATIVE. THE DEFENDANT WAS LATER ARRESTED.

Contrary to Florida Statute/Ordinance 843.02.

ARREST DATE: 5/23/2020 Time 3:35 PM . Aggravating/Mitigating Factors CB

Booking Officer: ROBINSON, C 56730 Amount of Bond 150 Bond Out Date 05/23/20 Time 20:32 ☐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: 5/23/2020 5:55:43 PM

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.

Declarant Signature — Agency: PINELLAS COUNTY SHERIFF

Printed Name: SERGEANT ALVIN ORTIZ 55787 — Declarant ID#: 01861619

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

DATE	OFFICER	HOURS X PAY RATE	OR	COST
05/23/2020	ORTIZ	2 35.00		$70.00
05/23/2020	SIEM	2 25.00		50

OTHER – Describe

Continuation sheet ☐Yes ☐No TOTAL $ $120.00

2020 MAY 24 AM 6:18

COUNTY ASSISTANCE

FILED

COCR59 (Revised 10/2014)

844414 Copies to:

Court

Defendant SEIDEL, NATHAN OMAR **Court Case No:** 20-06439-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.

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**

UCN: 522020MM006439XXXXMM FL0520000

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

OBTS #		REPORT # SO20-140466	DOCKET # 1837991
Person ID 311523677		SSN# [redacted]	
Charge Description ☐ Felony ☒ Misdemeanor ☐ Warrant ☐ Traffic ☐ Ordinance		Traffic Citation # (if any)	Court Case #
Charge DISORDERLY CONDUCT			20-06439-MM-2

Defendant's Name (Last, First, Middle)	DOB	Sex	Race	Ht	Wt	Hair	Eyes	Skin
SEIDEL, NATHAN OMAR	03/11/1981	M	W	602	200	BLK	BRO	

Alias	DL #	State	Scars/Marks/Tattoos/Physical Features
	S340-634-81-091-0	FL	

Local Address (Street, City, State, Zip Code)	Telephone	Place of Birth	Citizenship
855 CENTRAL AVE APT 908 ST PETERSBURG FL 33701		NEBRASKA	US
Permanent Address (Street, City, State, Zip Code)	**Telephone**	**Employed by / School**	
855 CENTRAL AVE APT 908 ST PETERSBURG FL 33701		UNK	

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 23 day of MAY, 2020, at approximately 3:00 PM, at 9000 WEST GULF BLVD, TREASURE ISLAND, in Pinellas County did:

DID THEN AND THERE ENGAGE IN SUCH CONDUCT AS TO CONSTITUTE DISORDERLY CONDUCT, TO-WIT: WHILE AT CADDY'S BAR CABANA THE SUBJECT STARTED YELLING PROFANITIES AND CURSING, WHICH CONSTITUTED A BREACH OF THE PEACE. TO WIT: THE DEFENDANT WAS AT ONE OF CADDY'S BAR BEACH CABANAS WITH APPROXIMATELY 25 TO 30 PEOPLE. DUE TO THE COVID 19 STAY 6 FEET APART DISTANCE REGULATIONS, DEPUTIES APPROACHED THE GROUP AND EXPLAINED THE SITUATION AND ASKED THEM TO KEEP THE 6 FEET APART COVID 19 DISTANCE, THE DEFENDANT BECAME MAD AND DISORDERLY AND STARTED CURSING AND YELLING PROFANITIES TO THE POINT THAT CADDY'S SECURITY REQUESTED THE SUBJECT BE TRESPASSED FROM THE LOCATION BECAUSE HE WAS DISTURBING OTHER CUSTOMERS. THE SUBJECT THEN REFUSED DEPUTIES COMMANDS AND JUMPPED INTO THE WATER. A POLICE MARINE UNIT HAD TO BE REQUESTED TO GET THE SUBJETC OUT OF THE WATER.

Contrary to Florida Statute/Ordinance 877.03.

ARREST DATE: 5/23/2020 Time 3:35 PM . Aggravating/Mitigating Factors CB

Booking Officer: ROBINSON, C 56730 Amount of Bond 250 Bond Out Date 05/23/20 Time 20:32 ☐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: 5/23/2020 5:54:37 PM

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.

Declarant Signature	Agency
	PINELLAS COUNTY SHERIFF
SERGEANT ALVIN ORTIZ 55787	01861619
Printed Name	Declarant ID#

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

DATE	OFFICER	HOURS X PAY RATE	OR	COST
05/23/2020	ORTIZ	2 35.00		$70.00
05/23/2020	SIEM	2 25.00		50

2020 MAY 24 AM 6:18

OTHER – Describe

Continuation sheet ☐Yes ☐No TOTAL $ $120.00

COURT ASSISTANT FILED

COCR59 (Revised 10/2014)
844412 Copies to:

Court

Defendant SEIDEL, NATHAN OMAR **Court Case No:** 20-06439-MM-2

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**