UCN: ****

FL0521400

COMPLAINT/ARREST AFFIDAVIT - CIRCUIT/COUNTY COURT - PINELLAS COUNTY, FLORIDA REPORT # 2020-002626 DOCKET # 1827947 OBTS# SSN# Person ID 311459051 Charge Description Felony X Misdemeanor Warrant Traffic Ordinance Traffic Citation # (if any) Court Case # Charge DRIVING UNDER THE INFLUENCE W/PROPERTY DAMAGE AAM71HE AAM71HE-1 Defendant's Name (Last, First, Middle) DOB Ht Wt Hair Skin Race Eyes LAYTON, PATRICK FRANCIS 07/07/1958 М W 166 60 BRO BLU Alias Scars/Marks/Tattoos/Physical Features L350-666-58-247-0 Local Address (Street, City, State, Zip Code) Telephone Place of Birth Citizenship 327 3RD STREET DR W LOT 25 PALMETTO FL 34221 US MI Permanent Address (Street, City, State, Zip Code) Employed by / School Telephone 327 3RD STREET DR W LOT 25 PALMETTO FL 34221 RETIRED Weapon Seized Type Indication of Y N UNK Indication of Mental Y N UNK Indication of Y N UNK \blacksquare ☐Yes ☒No Drug Influence **Health Issues** Alcohol Influence 🔲 \mathbf{X} Co-Defendant's Name (Last, First, Middle) Sex Race In Custody ☐Yes ☐No ☐Felony ☐Misdemeanor DOB Sex Race Co-Defendant's Name (Last, First, Middle) In Custody ☐Yes ☐No ☐Felony ☐Misdemeanor 2020 The undersigned swears that he/she has reasonable grounds to believe that the above named defendant on the day of JANUARY of 6TH AV N/4TH ST N at approximately 8:59 .in Pinellas County did: THEN AND THERE: OPERATE A MOTOR VEHICLE TO WIT: 2011 DODGE NITRO BEARING FLORIDA LICENSE TAG 2741UC, WHILE UNDER THE INFLUENCE OF AN ALCOHOLIC BEVERAGE AND/OR CONTROLLED SUBSTANCES TO THE EXTENT THAT HER NORMAL FACULTIES WERE IMPAIRED. DEFENDANT EXHIBITED FURTHER SIGNS OF IMPAIRMENT DURING F.S.T.'S. DEFENDANT REFUSED TO PERFORM F.S.T.'S. DEFENDANT SHOWED SIGNS OF IMPAIRMENT AT THE HOSPITAL AND SFST'S WERE NOT PRACTICAL. REASON FOR STOP: MOTOR VEHICLE CRASH OBSERVATIONS: EYES: BLOODSHOT, WATERY AND GLASSY EXPRESSION: BLANK, DAZED SPEECH: SLURRED, MUMBLED, AND ODOR STRONG OF AN ALCHOLIC BEVERAGE BR.A.C.: URINE: YES / NO BLOOD: REFUSED / NO XX PRIOR CONVICTIONS: NONE COURT DATE: FEBUARY 19, 2020 AT 1:30PM **CITATION NUMBER: AAM71HE** LOCATION: PINELLAS COUNTY JUSTICE CENTER Contrary to Florida Statute/Ordinance 316.193.3.C.1 . Aggravating/Mitigating Factors_DUI CRASH ARREST DATE: 1/19/2020 Time 9:51 AM Booking Officer: COLBASSANI, C 59312 7/Time 500. Amount of Bond **Bond Out Date** Victim Notified of Advisory? Yes No Injuries to Victim? __ Yes __ No Medical Treatment to Victim? The Court reviewed this complaint and finds there: \(\sigma\) is probable cause \(\sigma\) is not probable cause to detain defendant \(\sigma\) Bond Action, if any: Received by Booking: 1/19/2020 1:19:00 PM The probable cause determination is passed for: 24 Hrs 24 Hrs on showing of extraordinary circumstances REQUEST FOR INVESTIGATIVE COSTS, F.S. 938.27(1) Pursuant to F.S. 92.525 and under penalty of perjury, I declare that I have OFFICER HOURS X PAY RATE
R. MCKENZIE DATE read the foregoing document and that the facts in it are true. COST 01/19/2020 \$75.00 01/19/2020 N. FASANELLA 75 ST. PETERSBURG POLICE T. CLARK 01/19/2020 Declarant Signature Agency **OFFICER RONALD MCKENZIE 46962** 10625118 OTHER - Describe **Printed Name** Declarant ID# Continuation sheet TOTAL § \$225.00

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Defendant_	LAYTON, PATRICK FRANCIS	Court Case No:_	AAM71HE-1
	ADVISORY AND SOI	VENCY HEARING	
against him; hi financially una	ned Defendant came before me for Advisory is right to remain silent; that any statements buble to afford counsel, that counsel forthwith ds, and that reasonable implementation will be	y him may be used against him; will be appointed; of his right to	his right to counsel, and, if he is communicate with his counsel
☐ B. The Cor☐ C. The Cor	I FURTHER of ant has advised the Court that he has retained urt investigated Defendant's solvency and fourt investigated Defendant's solvency and professed at the first fendant waived the right to counsel at the first	and the Defendant financially abovisionally appointed the Public	
_	DATE AND TIME		UDGE
☐ I, having	waive the right to counsel at the first appearar been found solvent and financially able to rance in this case or until I file a written reque	secure counsel, hereby waive	

Thumb Print

I HEREBY acknowledge receipt of a copy of the foregoing Complaint and Advisory.

DEFENDANT'S SIGNATURE

DEFENDANT'S ATTORNEY'S SIGNATURE

DATE

DEFENDANT'S SIGNATURE