UCN: 522020MM006438XXXXMM FL0528000

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

OBTS #		REPORT # FWSW20OFF01624	DOCKET # 1837992
Person ID 311523678		SSN# 000-00-0000	
Charge Description ☐ Felony ☒ Misdemeanor ☐ Warrant ☐ Traffic ☐ Ordinance		Traffic Citation # (if any)	Court Case #
Charge BOATING UNDER THE INFLUENCE		V653926	20-06438-MM-1

Defendant's Name (Last, First, Middle)	DOB	Sex	Race	Ht	Wt	Hair	Eyes	Skin
MALDONADO, RYAN DAVID	05/16/1993	M	W	5	6	BLK	BRO	FAR

Alias	DL #	State	Scars/Marks/Tattoos/Physical Features
N/A	M435724931760	FL	N/A

Local Address (Street, City, State, Zip Code)	Telephone	Place of Birth	Citizenship
1303 E OSBORNE AVE TAMPA FL 33603		US	U.S.A.
Permanent Address (Street, City, State, Zip Code)	**Telephone**	**Employed by / School**	
1303 E OSBORNE AVE TAMPA FL 33603		MER	

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 4:35 PM, at V, in Pinellas County did:

THEN AND THERE UNLAWFULLY OPERATE, AND/OR BE IN ACTUAL PHYSICAL CONTROL OF A VESSEL, 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/HER) NORMAL FACULTIES WERE IMPAIRED.

BRAC: REFUSED BREATH: REFUSED
BALANCE: (ENTER BALANCE) EYES: RED GLASSY
PRIOR CONVICTIONS: UNKNOWN

COURT INFORMATION:
DATE: (3RD TUESDAY FROM DATE OF ARREST)
1:30PM ROOM 15
14250 49TH STREET NORTH, CLEARWATER, FLORIDA, 33762
CITATION #: (ENTER CITATION #)

(ENTER SUFFICIENT FACTS/DATA FOR THE COURT TO ESTABLISH PROBABLE CAUSE DETERMINATION)

Contrary to Florida Statute/Ordinance 327.35.1.

ARREST DATE: 5/23/2020 Time 4:35 PM . Aggravating/Mitigating Factors FAILED SFSTS CB

Booking Officer: ROBINSON, CYNTHIA 56730 Amount of Bond 500 Bond Out Date 05/23/20 Time 22:00 ☐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 5:53:37 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.

Matt LaM

Declarant Signature

FLORIDA FISH & WILDLIFE
Agency

OFFICER MATT LAMOUREUX P162
Printed Name

311193149
Declarant ID#

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

DATE	OFFICER	HOURS X PAY RATE	OR	COST

2020 MAY 21 AM 6:18

COURT ASSISTANCE

OTHER – Describe

Continuation sheet ☐Yes ☐No FILED TOTAL $ $0.00

COCR59 (Revised 10/2014)
844415 Copies to:

Court

Defendant MALDONADO, RYAN DAVID **Court Case No:** 20-06438-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**