

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

OBTS #	REPORT # SO19-397378		DOCKET # 1824079	
Person ID 3200443	SSN# [REDACTED]			
Charge Description ☐ Felony ☒ Misdemeanor ☐ Warrant ☐ Traffic ☐ Ordinance	Traffic Citation # (if any)		Court Case #	
Charge VIOLATION OF INJUNCTION FOR PROTECTION AGAINST DOMESTIC VIOLENCE			19-19725-MM-1	
Defendant's Name (Last, First, Middle) AMMONS, TRISTAN LEIF	DOB 02/13/1996	Sex M	Race W	Ht 603
		Wt 200	Hair BLN	Eyes BLU
Alias	DL # A552-812-96-053-0	State FL	Scars/Marks/Tattoos/Physical Features	
Local Address (Street, City, State, Zip Code) 11544 47TH AVE N MADEIRA BEACH FL 33708	Telephone 727-244-0973	Place of Birth FLORIDA	Citizenship USA	
Permanent Address (Street, City, State, Zip Code) 11544 47TH AVE N MADEIRA BEACH FL 33708	Telephone 727-244-0973	Employed by / School LISA'S CAFE MAD BEACH		
Weapon Seized Type ☐ Yes ☒ No	Indication of Drug Influence ☐ Y ☒ N ☐ UNK	Indication of Mental Health Issues ☐ Y ☒ N ☐ UNK	Indication of Alcohol Influence ☒ 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 11 day of DECEMBER, 2019,

at approximately 10:46 PM, at 635 MICHIGAN BLVD UNIT 100, DUNEDIN FL, in Pinellas County did:

DID WILLFULLY VIOLATE AN INJUNCTION FOR PROTECTION AGAINST DOMESTIC VIOLENCE, INJUNCTION NUMBER 2019DR001479DRAWS, BY STAYING THE NIGHT, BEING SEEN WITH THE PROTECTED PERSON BY THIS DEPUTY.

AN ANON COMPLAINT WAS RECIEVED THAT TRISTAN AMMONS WAS SPENDING THE NIGHT WITH A SUBJECT WHO HAS A PROTECTION ORDER AGAINST HIM. UPON ARRIVAL CONTACT WAS MADE WITH KASSADI DONELSON, THE PROTECTED PERSON. KASSADI ADVISED THAT TRISTAN WAS STAYING AT THE LOCATION, I WITNESSED TRISTAN IN THE PRESENCE OF KASSADI. POST MIRANDA TRISTAN ADMITTED TO COMING TO THE LOCATION AFTER BEING ASKED BY KASSADI. TRISTIAN ADVISED HE KNEW HE WAS VIOLATING THE INJUNCTION.

Contrary to Florida Statute/Ordinance 741.31

ARREST DATE: 12/11/2019 Time 11:21 PM

. Aggravating/Mitigating Factors

Booking Officer: SEAY, E 58861

Amount of Bond

NO BOND

Bond Out Date

Time

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: 12/12/2019 12:59:00

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 [Signature] PINELLAS COUNTY SHERIFF Agency

DEPUTY KYLE LANGE 58869

03348181

Printed Name

Declarant ID#

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

DATE

OFFICER

HOURS X PAY RATE

OR

COST

12/12/2019

LANGE

1

25.00

\$25.00

OTHER – Describe

Continuation sheet ☐ Yes ☐ No

TOTAL \$ 25.00

Defendant AMMONS, TRISTAN LEIF

Court Case No: 19-19725-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.

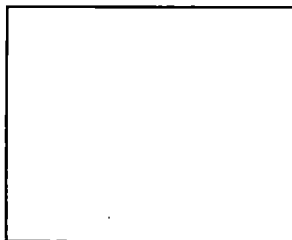
I FURTHER CERTIFY THAT:

- ☐ 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.

12/12/2019
DATE AND TIME

[Signature]
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