

OBTS #		REPORT # SO20-18779				DOCKET # 1827864																												
Person ID 310942429		SSN#																																
Charge Description ☐ Felony ☒ Misdemeanor ☐ Warrant ☐ Traffic ☐ Ordinance		Traffic Citation # (if any)		Court Case #																														
Charge DRIVING UNDER THE INFLUENCE				AD0AU3E-1																														
Defendant's Name (Last, First, Middle) BORRACK, URSULA LYN		DOB 06/04/1981		Sex F	Race W	Ht 508	Wt 115	Hair BRO	Eyes BLU	Skin LGT																								
Alias		DL # B-620-852-81-704-0		State FL	Scars/Marks/Tattoos/Physical Features																													
Local Address (Street, City, State, Zip Code) 4828 MIRAMAR DR UNIT 2101 MADEIRA BEACH FL 33708				Telephone (863)944-4826		Place of Birth IL		Citizenship USA																										
Permanent Address (Street, City, State, Zip Code) 4828 MIRAMAR DR UNIT 2101 MADEIRA BEACH FL 33708				Telephone (863)944-4826		Employed by / School UNEMP																												
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 18 day of JANUARY, 2020, at approximately 9:02 AM, at 4936 MIRAMAR DR, MADEIRA BEACH, in Pinellas County did: REASON FOR STOP: OBSERVED DRIVER FORGET TO OPEN GATE TO HER APARTMENT COMPLEX. WAS FLAGGED DOWN BY DEF FRIEND WHO HAD TRIED TO STOP HER FROM DRIVING. THEN AND THERE UNLAWFULLY DRIVE AND/OR BE IN ACTUAL PHYSICAL CONTROL OF A MOTOR VEHICLE WITHIN PINELLAS COUNTY, FLORIDA WHILE UNDER THE INFLUENCE OF AN ALCOHOLIC BEVERAGE, A CONTROLLED SUBSTANCE AND/OR ANY CHEMICAL SUBSTANCE TO THE EXTENT THAT HER NORMAL FACULTIES WERE IMPAIRED. BRAC: REFUSED BREATH: REFUSED BALANCE: SWAYING EYES: GLASSY HGN PRESENT PRIOR CONVICTIONS: NONE DEFENDANT: FAILED SOME TEST AND REFUSED TO REFORM OTHER ROADSIDE FIELD SOBRIETY TESTS. COURT INFORMATION: COUNTY TRAFFIC 14250 49TH ST N COURT THURSDAY 2/13/20 @ 1:30 P.M CITATION #: AD0AU3E I OBSERVED DEF AHEAD OF ME IN THE ENTRANCE TO THE APARTMENT COMPLEX SECURITY GATE. SHE DROVE PAST THE POINT WHERE SHE COULD ENTER A CODE OR ACTIVATE THE GATE TO OPEN FOR HER. SHE BACKED UP BUT STILL HAD TO EXIT HER VEHICLE TO OPEN THE GATE. AS THE GATE OPENED I FOLLOWED HER THROUGH BUT WAS STOPPED BY WITNESS WHO STATED I WAS FOLLOWING HIS NEIGHBOR WHO WAS VERY INTOXICATED AND THAT HE HAD TIRED TO STOP HER FROM DRIVING. DEF PULLED INTO A PARKING SPACE AND I OBSERVED HER EXIT HER VEHICLE SHE WAS HOLDING A NEWLY PURCHASED BOTTLE OF VODKA. DEF EXHIBITED SIGNS OF PHYSICAL IMPAIRMENT AND A HEAVY ODOR OF ALCOHOL EMITTED FROM HER PERSON. POST MIRANDA DEF DENIED DRIVING. DEF RESUSED TO PROVIDE A BREATH TEST AFTER BEING READ IMPLIED CONSENT.																																		
Contrary to Florida Statute/Ordinance 316.193.1																																		
ARREST DATE: 1/18/2020 Time 9:41 AM Aggravating/Mitigating Factors																																		
Booking Officer: BROTHWELL, M 59720 Amount of Bond 500.00*** Bond Out Date 1-18-20 Time 16:33 a.m. 4 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: 1/18/2020 12:24:39 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. N Williams PINELLAS COUNTY SHERIFF				REQUEST FOR INVESTIGATIVE COSTS, F.S. 938.27(1) <table border="1"><thead><tr><th>DATE</th><th>OFFICER</th><th>HOURS</th><th>X PAY RATE</th><th>OR</th><th>COST</th></tr></thead><tbody><tr><td>01/18/2020</td><td>N WILLIAMS</td><td>3</td><td>25.00</td><td></td><td>\$75.00</td></tr><tr><td>01/18/2020</td><td>SGT G HORTON</td><td>1.5</td><td>25.00</td><td></td><td>37.5</td></tr><tr><td colspan="6">OTHER -- Describe</td></tr></tbody></table> Continuation sheet ☐ Yes ☐ No TOTAL \$ 112.50							DATE	OFFICER	HOURS	X PAY RATE	OR	COST	01/18/2020	N WILLIAMS	3	25.00		\$75.00	01/18/2020	SGT G HORTON	1.5	25.00		37.5	OTHER -- Describe					
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Declarant Signature DEPUTY NATALIE WILLIAMS 57212 Printed Name				Agency 01655453 Declarant ID#																														

Defendant BORRACK, URSULA LYN **Court Case No:** AD0AU3E-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.

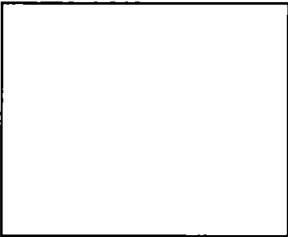
I FURTHER CERTIFY THAT:

- ☐ 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