

210 D.I.

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0006379399 COMPLAINT/ARREST AFFIDAVIT - CIRCUIT/COUNTY COURT - PINELLAS COUNTY, FLORIDA

Felony Misdemeanor Ordinance Non-Criminal Warrant Traffic

Charge: **5 CTS Game Theft** CIS Code: **OT-47752065** Report No. **CRC 93-07005** Court Case No. **ST 000**

Defendant's Name (Last, First, Middle): **CARRERA DENNIS D.** DOB: **03-26-47** Sex: **M** Race: **W** Ht: **5-9** Wt: **158** Hair: **COAX** Eyes: **LT** Skin: **LT**

Aliases: **None** Driver's License No.: **C 000-164-47-1060** State: **FL** Residence Type: In County Out of State

Local Address (Street, City, State): **1845 New Hampshire Ave N.E.** Zip Code: **33703** Telephone: **527-2943** Place of Birth: **MINN** Citizenship: **US**

Permanent Address (Street, City, State, Zip Code): **ST. PETE FL 33703** Telephone: **577-9876**

Scars, Tattoos, Unique Physical Features: **Surgey scar RT side stomach** Employed by/School: **ATTORNEY**

Weapons Seized/Type: **None** Indication of Drug Influence: Y N UNK Indication of Alcohol Influence: Y N UNK

1. Yes 2. No

Co-defendant's Name (Last, First, Middle): **N/A** DOB: **DOB** Sex: **Sex** Race: **Race** In Custody Yes No Felony Misd

Co-defendant's Name (Last, First, Middle): **N/A** DOB: **DOB** Sex: **Sex** Race: **Race** In Custody Yes No Felony Misd

The undersigned certifies and swears that he has just and reasonable grounds to believe, and does believe that the above named defendant on the **17** day of **May**, 19**93**, at approximately **1005** a.m. p.m. at **205-96 Ave No** in Pinellas County did:

Arrested on a Circuit Court
Caption, Copy attached

List other traffic citations:

Contrary to Florida Statute **812 014**
County City State Ordinance

STATE OF FLORIDA
County of Pinellas

The foregoing instrument was acknowledged before me this **17** day of **May**, 19**93** by **[Signature]** who is personally known to me or who has produced **[Signature]** as identification and who did/did not take an oath.

Det. M. Hale #058
Det. D. Hale #058
Det. S. Feltz #849

Signature of Notary Public Taking Acknowledgment: **[Signature]**
Name of Acknowledger (Typed, Print or Stamped): **[Signature]**

Time: **12:30** Serial #: **472 52 0657**

Amount of Bond: **5-17-93** Time: **1005 a.m.** Aggravating Factors: **None**

Booking Officer: **[Signature]** Bond out **1005** (a.m.) (p.m.)

NOTICE TO APPEAR ONLY

- MISDEMEANOR - You MUST appear at Pinellas County Misdemeanor Courthouse, Airport Business Center - Building 3, 14225 49th Street North, Clearwater, Florida, on the ___ day of ___, 19___, at ___ a.m. p.m. .
- ORDINANCE VIOLATION - You MUST comply with EITHER A or B:
A. Comply with the Waiver Information on the reverse side of this form and pay a fine in the amount of \$ ___ for a Category ___ offense, within ten (10) days of this Notice.
B. Appear at Pinellas County Misdemeanor Courthouse, Airport Business Center - Building 3, 14225 49th Street, Courtroom P, Clearwater, Florida, on the ___ day of ___, 19___, at ___ a.m. p.m. .
- NON-CRIMINAL VIOLATION - You MUST pay a fine in the amount of \$ ___ within ten (10) calendar days, or comply with the non-criminal violation information on the bottom of the reverse side of this form.

AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED ABOVE TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED BY THIS NOTICE TO APPEAR, OR PAY THE FINE REQUIRED BY THE DATES SET OUT ON THIS FORM, THAT I MAY BE HELD IN CONTEMPT OF COURT AND THAT A WARRANT FOR MY ARREST WILL BE ISSUED. I HEREBY CERTIFY BY MY SIGNATURE THE BELOW LISTED ADDRESS IS MY CORRECT ADDRESS.

Defendant's Signature: _____ Address: _____ Date of Receipt of Notice: _____
Copies to: White - Court, Blue - State Attorney, Green - Jail, Pink - Police Dept, Goldenrod - Defendant

FILED
CIRCUIT COURT RECORDS
19 93 11 13

Bond amended
Motion ARB

Carrey, Dennis

Court Case No: 93-7005 CFAND

ADVISORY AND SOLVENCY HEARING

MAY 18 1993

The named Defendant came before me for Advisory and Solvency hearing on the _____ day of _____, 19____ at _____ am/pm. I advised by me of the charge 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 indigent, that counsel forthwith will be appointed, of his right to communicate with his counsel, family or friends, and that reasonable time 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 solvent and financially able to secure counsel.
- C. The Court investigated Defendant's solvency and appointed the Public Defender to represent Defendant.
- D. The Defendant waived the right to counsel at the first appearance only.
- E. The Court reviewed this Advisory and finds there is there is not probable cause to hold and bind over the Defendant for trial.
- F. The probable cause determination is hereby passed 72 hours.

ACTION TAKEN, if any None [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.

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

**SCHEDULE OF WITNESSES AND EVIDENCE
NOTICE TO APPEAR ONLY**

Name of Testimony	Home Phone	Business Phone	DOB	Race	Sex

THAT THE FOREGOING IS A COMPLETE LIST OF WITNESSES AND EVIDENCE KNOWN TO ME

Investigating Officer

Agency

Date