

RUN TIME: 3:30:43 PM

RUN DATE: 8/24/2026

CLERK OF THE CIRCUIT COURT

COURT CALENDAR

COUNTY CRIMINAL COURT CALENDAR

	Session Description
Court Session:	DIV F ARGN 8:30AM
Court Date:	8/27/2026
Judge:	PERRONE, FRANCES M
Court Room:	COURTROOM 30 IN-PERSON
Court Convene:	_____
Court Adjourn:	_____
Court Clerk:	_____
Ext:	_____
Total Pages:	_____

☐ Defendant: ALI, DIANA YOUSEF Address: 608 N WILLOW AVENUE, TAMPA, FL 33606 Interpreter: Y N Language: DOB: 10/21/1997 Gender: Female Race: White DL: FL-A400179978810 Alias:	Warrant: Date of Offense: 08/09/2026 Date of Arrest: 08/09/2026 Charging Document Date: SOID: 01016692 In Custody: NO Booking No: 2026-27720	Bond Out Date: 08/10/2026 BNDADD Bond Type: SURETY Bond Amount: \$1,000.00 Bond Company: ORIENT ROAD BAIL BONDS, INC. Cash Bond Depositor:
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PD APP / UNAPP /WDRAW	PA	APD	RC	DEFENDER, PUBLIC	ACA	ASA
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WITNESS:

ISSUING AGENCY:

SET FOR: ARRAIGNMENT AT 8:30:00 AM

HEARING COMMENTS:

COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO
1	784031 - DVST0003 (MF) DOMESTIC BATTERY			

SPEED:

BAC LEVEL:

☐ Stipulated BAC Below .15

FUTURE HEARINGS:

PENDING CASES:

Concurrent / Consecutive to Each Count / Case(s)

PLEA: G NC NG WPNG WST W/JTR CHOP

VOP: Admit Deny DISM In Violation: Y N

CONT REVK REIN SACO MOD TERM: S U

VERDICT: ACQT G NG

DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU

Incompetent to Proceed Competent to Proceed

☐ Order to be Prepared

COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By:

Time served Suspended upon: _____

PROB: _____ Months Report w/in: _____

CSH: _____ hrs @ _____ / month

May Buy _____ @ \$ _____ / hour

CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW)

No Return to Offense Location (NRTOL)

FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____

REST: \$ _____ To Pay Date _____

May Convert Court Cost to Community Service Hours (MAYC)

CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST

LICENSE: D6 Set Aside D6

CONTINUE: Hearing Type: _____ Date: _____ Time: _____

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)

☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)

☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)

☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)

☐ IN JAIL PROGRAM (CIJAMP)

☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

☐ Defendant: ALLEN, JORDAN MICHAEL Address: 1807 33RD ST SE, RUSKIN, FL 33570 Interpreter: Y N Language: DOB: 8/25/1993 Gender: Male Race: White DL: FL-A603209783000 Alias:	Warrant: Date of Offense: 08/08/2026 Date of Arrest: 08/08/2026 Charging Document Date: SOID: 01016626, 1016626 In Custody: NO Booking No: 2026-27533	Bond Out Date: 08/09/2026 BNDADD Bond Type: SURETY Bond Amount: \$1,500.00 Bond Company: I.T. BAIL BOND CO. Cash Bond Depositor:										
PD APP / UNAPP /WDRAW PA APD RC DEFENDER, PUBLIC ACA ASA WITNESS: ISSUING AGENCY: SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS: <table><thead><tr><th>COUNT</th><th>OFFENSE DESCRIPTION</th><th>CITATION #</th><th>PLEA</th><th>DISPO</th></tr></thead><tbody><tr><td>1</td><td>784031 - DVST0003 (MF) DOMESTIC BATTERY</td><td></td><td></td><td></td></tr></tbody></table> SPEED: BAC LEVEL: ☐ Stipulated BAC Below .15 FUTURE HEARINGS: PENDING CASES: Concurrent / Consecutive to Each Count / Case(s)		COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO	1	784031 - DVST0003 (MF) DOMESTIC BATTERY				PLEA: G NC NG WPNG WST W/JTR CHOP VOP: Admit Deny DISM In Violation: Y N CONT REVK REIN SACO MOD TERM: S U VERDICT: ACQT G NG DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU Incompetent to Proceed Competent to Proceed ☐ Order to be Prepared COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By: Time served Suspended upon:_____ PROB: _____ Months Report w/in:_____ CSH: _____ hrs @ _____ / month May Buy _____ @ \$ _____ / hour CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW) No Return to Offense Location (NRTOL) FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____ REST: \$ _____ To Pay Date _____ May Convert Court Cost to Community Service Hours (MAYC) CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST LICENSE: D6 Set Aside D6 CONTINUE: Hearing Type: _____ Date: _____ Time: _____
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO								
1	784031 - DVST0003 (MF) DOMESTIC BATTERY											

SENTENCING PROVISIONS:

☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)	☐ NO FIREARMS OR WEAPONS (NOWF)
☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)	☐ STAY AWAY FROM OFFENSE LOCATION (STFR)
☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)	☐ NO ALCOHOL (NOAL)
☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)	☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)	ENROLL W/IN _____ DAYS
☐ IN JAIL PROGRAM (CIJAMP)	☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)
☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)	☐ IGNITION INTERLOCK (IGLOCK)
☐ IN JAIL PROGRAM (CIJDP)	_____ MONTHS
☐ COMPLETE PETIT THEFT SCHOOL (CPTS)	☐ VEHICLE IMMOBILIZATION (VEIMM)
☐ ENROLL W/IN _____ DAYS	_____ DAYS
☐ BATTERERS INTERVENTION PROGRAM (CBIP)	☐ DRIVERS LICENSE REVOCATION (DLREV)
☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)	_____ MONTHS / YEARS
☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)	☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
☐ GPS / SOBERTRACK PRIOR TO RELEASE	_____ HOURS
☐ HCSO ☐ PRIVATE	☐ NO OBJECTION TO APPLY FOR HARSHIP LICENSE FOR WORK PURPOSE (NOHLWP)
☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____	☐ DO NOT DRIVE W/OUT VALID DL (DND)
☐ MAY PETITION FOR EARLY TERM (MPETERM) _____	☐ DO NOT DRIVE (DNDV)
☐ NO EARLY TERMINATION OF PROBATION (NETM)	

☐ Defendant: ASH, DEAMONI ODERA Address: 529 S PARSON AVE #406, BRANDON, FL 33511 Interpreter: Y N Language: DOB: 4/30/1999 Gender: Female Race: Black DL: FL-A200174996500 Alias: ASH, DE'AMONI; ASH, DE'AMONI ODERA; ASH, DEAMONI	Warrant: Date of Offense: 08/06/2026 Date of Arrest: 08/06/2026 Charging Document Date: SOID: 00893279 In Custody: NO Booking No: 2026-27300	Bond Out Date: 08/07/2026 BNDADD Bond Type: SURETY Bond Amount: \$1,000.00; \$500.00 Bond Company: SAVORELLI AND QUILES BAIL BONDS, LLC. Cash Bond Depositor:
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PD APP / UNAPP /WDRAW PA APD RC DEFENDER, PUBLIC ACA ASA	PLEA: G NC NG WPNG WST W/JTR CHOP
WITNESS:	VOP: Admit Deny DISM In Violation: Y N
	CONT REVK REIN SACO MOD TERM: S U
SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS:	VERDICT: ACQT G NG
	DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU
	Incompetent to Proceed Competent to Proceed
	☐ Order to be Prepared
	COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By:
	Time served Suspended upon: _____
	PROB: _____ Months Report w/in: _____
	CSH: _____ hrs @ _____ / month
	May Buy _____ @ \$ _____ / hour
	CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW)
	No Return to Offense Location (NRTOL)
	FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____
	REST: \$ _____ To Pay Date _____
	May Convert Court Cost to Community Service Hours (MAYC)
	CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST
	LICENSE: D6 Set Aside D6
	CONTINUE: Hearing Type: _____ Date: _____ Time: _____

COUNT OFFENSE DESCRIPTION CITATION # PLEA DISPO				
1	84302-COPS1001 (MF) RESISTING OFFICER WITHOUT VIOLENCE			
2	784031 - DVST0003 (MF) DOMESTIC BATTERY			

SPEED:

BAC LEVEL:

☐ Stipulated BAC Below .15

FUTURE HEARINGS:

PENDING CASES:

Concurrent / Consecutive to Each Count / Case(s)

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)

☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)

☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)

☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)

☐ IN JAIL PROGRAM (CIJAMP)

☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

☐ Defendant: AYERS, WILLIAM LEE Address: 4007 W EL PRADO BLVD, TAMPA, FL 33629 Interpreter: Y N Language: DOB: 12/29/1996 Gender: Male Race: White DL: FL-A620932964690 Alias:	Warrant: Date of Offense: 08/06/2026 Date of Arrest: 08/06/2026 Charging Document Date: SOID: 01016573, 1016573 In Custody: NO Booking No: 2026-27387	Bond Out Date: 08/08/2026 BNDADD Bond Type: CASH Bond Amount: \$500.00 Bond Company: Cash Bond Depositor: AYERS SR., WILLIAM										
PD APP / UNAPP /WDRAW PA APD RC DEFENDER, PUBLIC ACA ASA WITNESS: ISSUING AGENCY: SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS: <table><thead><tr><th>COUNT</th><th>OFFENSE DESCRIPTION</th><th>CITATION #</th><th>PLEA</th><th>DISPO</th></tr></thead><tbody><tr><td>1</td><td>784031 - DVST0003 (MF) DOMESTIC BATTERY</td><td></td><td></td><td></td></tr></tbody></table> SPEED: BAC LEVEL: ☐ Stipulated BAC Below .15 FUTURE HEARINGS: PENDING CASES: Concurrent / Consecutive to Each Count / Case(s)		COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO	1	784031 - DVST0003 (MF) DOMESTIC BATTERY				PLEA: G NC NG WPNG WST W/JTR CHOP VOP: Admit Deny DISM In Violation: Y N CONT REVK REIN SACO MOD TERM: S U VERDICT: ACQT G NG DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU Incompetent to Proceed Competent to Proceed ☐ Order to be Prepared COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By: Time served Suspended upon:_____ PROB: _____ Months Report w/in:_____ CSH: _____ hrs @ _____ / month May Buy _____ @ \$ _____ / hour CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW) No Return to Offense Location (NRTOL) FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____ REST: \$ _____ To Pay Date _____ May Convert Court Cost to Community Service Hours (MAYC) CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST LICENSE: D6 Set Aside D6 CONTINUE: Hearing Type: _____ Date: _____ Time: _____
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO								
1	784031 - DVST0003 (MF) DOMESTIC BATTERY											

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)

☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)

☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)

☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)

☐ IN JAIL PROGRAM (CIJAMP)

☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

☐ Defendant: BANKS, ORRIN QUANTINE Address: 511 26TH AVE W, BRADENTON, FL 34205 Interpreter: Y N Language: DOB: 4/11/1981 Gender: Male Race: Black DL: FL-B520655811310 Alias:	Warrant: Date of Offense: 07/28/2026 Date of Arrest: 07/30/2026 Charging Document Date: SOID: 01016512 In Custody: NO Booking No: 2026-27192	Bond Out Date: 08/06/2026 BNDADD Bond Type: SURETY Bond Amount: \$2,500.00 Bond Company: AUTOMATIC BAIL BONDS, LLC. Cash Bond Depositor:
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PD APP / UNAPP /WDRAW PA APD RC DEFENDER, PUBLIC ACA ASA WITNESS: ISSUING AGENCY: SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS: <table><tr><th>COUNT</th><th>OFFENSE DESCRIPTION</th><th>CITATION #</th><th>PLEA</th><th>DISPO</th></tr><tr><td>1</td><td>784031 - DVST0003 (MF) DOMESTIC BATTERY</td><td></td><td></td><td></td></tr></table> SPEED: BAC LEVEL: ☐ Stipulated BAC Below .15 FUTURE HEARINGS: PENDING CASES: Concurrent / Consecutive to Each Count / Case(s)	COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO	1	784031 - DVST0003 (MF) DOMESTIC BATTERY				PLEA: G NC NG WPNG WST W/JTR CHOP VOP: Admit Deny DISM In Violation: Y N CONT REVK REIN SACO MOD TERM: S U VERDICT: ACQT G NG DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU Incompetent to Proceed Competent to Proceed ☐ Order to be Prepared COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By: Time served Suspended upon:_____ PROB: _____ Months Report w/in:_____ CSH: _____ hrs @ _____ / month May Buy _____ @ \$ _____ / hour CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW) No Return to Offense Location (NRTOL) FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____ REST: \$ _____ To Pay Date _____ May Convert Court Cost to Community Service Hours (MAYC) CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST LICENSE: D6 Set Aside D6 CONTINUE: Hearing Type: _____ Date: _____ Time: _____
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO							
1	784031 - DVST0003 (MF) DOMESTIC BATTERY										

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

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☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)

☐ IN JAIL PROGRAM (CIJAMP)

☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

☐ Defendant: BELL, EMAUNI RENAE Address: 9866 BOSQUE CREEK CIR, #204, TAMPA, FL 33619 Interpreter: Y N Language: DOB: 5/27/1995 Gender: Female Race: Black DL: FL-B400216956870 Alias:	Warrant: Date of Offense: 08/07/2026 Date of Arrest: 08/07/2026 Charging Document Date: SOID: 00854998 In Custody: YES Booking No: 2026-27488	Bond Out Date: BNDADD Bond Type: Bond Amount: Bond Company: Cash Bond Depositor:
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PD APP / UNAPP /WDRAW PA APD RC DEFENDER, PUBLIC ACA ASA	PLEA: G NC NG WPNG WST W/JTR CHOP										
WITNESS: ISSUING AGENCY:	VOP: Admit Deny DISM In Violation: Y N CONT REVK REIN SACO MOD TERM: S U										
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COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO							
1	741314A - MISC2240 (MF) VIOLATION OF DOMESTIC VIOLENCE INJUNCTION										
SPEED:	COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By: _____ Time served Suspended upon: _____										
BAC LEVEL:	PROB: _____ Months Report w/in: _____										
☐ Stipulated BAC Below .15	CSH: _____ hrs @ _____ / month May Buy _____ @ \$ _____ / hour										
FUTURE HEARINGS:	CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW) No Return to Offense Location (NRTOL)										
PENDING CASES:	FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____ REST: \$ _____ To Pay Date _____ May Convert Court Cost to Community Service Hours (MAYC)										
26-CF-009562-A	CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST										
Concurrent / Consecutive to Each Count / Case(s)	LICENSE: D6 Set Aside D6										
	CONTINUE: Hearing Type: _____ Date: _____ Time: _____										

SENTENCING PROVISIONS:

☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)	☐ NO FIREARMS OR WEAPONS (NOWF)
☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)	☐ STAY AWAY FROM OFFENSE LOCATION (STFR)
☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)	☐ NO ALCOHOL (NOAL)
☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)	☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)	ENROLL W/IN _____ DAYS
☐ IN JAIL PROGRAM (CIJAMP)	☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)
☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)	☐ IGNITION INTERLOCK (IGLOCK)
☐ IN JAIL PROGRAM (CIJDP)	_____ MONTHS
☐ COMPLETE PETIT THEFT SCHOOL (CPTS)	☐ VEHICLE IMMOBILIZATION (VEIMM)
☐ ENROLL W/IN _____ DAYS	_____ DAYS
☐ BATTERERS INTERVENTION PROGRAM (CBIP)	☐ DRIVERS LICENSE REVOCATION (DLREV)
☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)	_____ MONTHS / YEARS
☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)	☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
☐ GPS / SOBERTRACK PRIOR TO RELEASE	_____ HOURS
☐ HCSO ☐ PRIVATE	☐ NO OBJECTION TO APPLY FOR HARDSHIP LICENSE FOR WORK PURPOSE (NOHLWP)
☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____	☐ DO NOT DRIVE W/OUT VALID DL (DND)
☐ MAY PETITION FOR EARLY TERM (MPETERM) _____	☐ DO NOT DRIVE (DNDV)
☐ NO EARLY TERMINATION OF PROBATION (NETM)	

☐ Defendant: BLAKELY, JERMISHA KEYANNIDRA Address: 10404 N 26TH STREET, TAMPA, FL 33612 Interpreter: Y N Language: DOB: 6/1/1990 Gender: Female Race: Black DL: FL-B424431907010 Alias: BLAKELY, JERMISHA K; BLAKELY, JERMISHA KEYANNI	Warrant: Date of Offense: 07/08/2026 Date of Arrest: 07/14/2026 Charging Document Date: 8/7/2026 SOID: 00803079 In Custody: NO Booking No: 2026-24418	Bond Out Date: 07/16/2026 BNDADD Bond Type: SURETY Bond Amount: \$7,500.00 Bond Company: ROCHE BAIL BONDS, INC. Cash Bond Depositor:															
PD APP / UNAPP /WDRAW PA APD RC SELPH , BRANDON LAWRENCE; DEFENDER, PUBLIC ACA ASA BRAZZALE , CARMELLA MARIE WITNESS: ISSUING AGENCY: SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS: <table><thead><tr><th>COUNT</th><th>OFFENSE DESCRIPTION</th><th>CITATION #</th><th>PLEA</th><th>DISPO</th></tr></thead><tbody><tr><td>1</td><td>810082B-TRES2000 (MF) TRESPASS IN OCCUPIED STRUCTURE OR CONVEYANCE</td><td></td><td></td><td></td></tr><tr><td>2</td><td>784031 - DVST0003 (MF) DOMESTIC BATTERY</td><td></td><td></td><td></td></tr></tbody></table> SPEED: BAC LEVEL: ☐ Stipulated BAC Below .15 FUTURE HEARINGS: PENDING CASES: Concurrent / Consecutive to Each Count / Case(s)		COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO	1	810082B-TRES2000 (MF) TRESPASS IN OCCUPIED STRUCTURE OR CONVEYANCE				2	784031 - DVST0003 (MF) DOMESTIC BATTERY				PLEA: G NC NG WPNG WST W/JTR CHOP VOP: Admit Deny DISM In Violation: Y N CONT REVK REIN SACO MOD TERM: S U VERDICT: ACQT G NG DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU Incompetent to Proceed Competent to Proceed ☐ Order to be Prepared COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By: Time served Suspended upon:_____ PROB: _____ Months Report w/in:_____ CSH: _____ hrs @ _____ / month May Buy _____ @ \$ _____ / hour CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW) No Return to Offense Location (NRTOL) FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____ REST: \$ _____ To Pay Date_____ May Convert Court Cost to Community Service Hours (MAYC) CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST LICENSE: D6 Set Aside D6 CONTINUE: Hearing Type: _____ Date:_____ Time:_____
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO													
1	810082B-TRES2000 (MF) TRESPASS IN OCCUPIED STRUCTURE OR CONVEYANCE																
2	784031 - DVST0003 (MF) DOMESTIC BATTERY																

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)

☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)

☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)

☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)

☐ IN JAIL PROGRAM (CIJAMP)

☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

☐ Defendant: BLEARY MURDOCK, SHEVOY ANTHONY Address: 2816 MARCONI ST #1213, TAMPA, FL 33605 Interpreter: Y N Language: DOB: 7/16/1992 Gender: Male Race: Black DL: FL-B465781922560 Alias:	Warrant: Date of Offense: 08/03/2026 Date of Arrest: 08/09/2026 Charging Document Date: SOID: 00957334 In Custody: NO Booking No: 2026-27764	Bond Out Date: 08/10/2026 BNDADD Bond Type: CASH Bond Amount: \$1,000.00 Bond Company: Cash Bond Depositor: HIDENRITE, KAITLYN
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PD APP / UNAPP /WDRAW PA APD RC DEFENDER, PUBLIC ACA ASA WITNESS: ISSUING AGENCY: SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS: <table><tr><th>COUNT</th><th>OFFENSE DESCRIPTION</th><th>CITATION #</th><th>PLEA</th><th>DISPO</th></tr><tr><td>1</td><td>784031 - DVST0003 (MF) DOMESTIC BATTERY</td><td></td><td></td><td></td></tr></table> SPEED: BAC LEVEL: ☐ Stipulated BAC Below .15 FUTURE HEARINGS: PENDING CASES: Concurrent / Consecutive to Each Count / Case(s)	COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO	1	784031 - DVST0003 (MF) DOMESTIC BATTERY				PLEA: G NC NG WPNG WST W/JTR CHOP VOP: Admit Deny DISM In Violation: Y N CONT REVK REIN SACO MOD TERM: S U VERDICT: ACQT G NG DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU Incompetent to Proceed Competent to Proceed ☐ Order to be Prepared COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By: Time served Suspended upon: _____ PROB: _____ Months Report w/in: _____ CSH: _____ hrs @ _____ / month May Buy _____ @ \$ _____ / hour CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW) No Return to Offense Location (NRTOL) FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____ REST: \$ _____ To Pay Date _____ May Convert Court Cost to Community Service Hours (MAYC) CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST LICENSE: D6 Set Aside D6 CONTINUE: Hearing Type: _____ Date: _____ Time: _____
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO							
1	784031 - DVST0003 (MF) DOMESTIC BATTERY										

SENTENCING PROVISIONS:

☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)	☐ NO FIREARMS OR WEAPONS (NOWF)
☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)	☐ STAY AWAY FROM OFFENSE LOCATION (STFR)
☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)	☐ NO ALCOHOL (NOAL)
☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)	☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)	☐ ENROLL W/IN _____ DAYS
☐ ☐ IN JAIL PROGRAM (CIJAMP)	☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)
☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)	☐ IGNITION INTERLOCK (IGLOCK)
☐ ☐ IN JAIL PROGRAM (CIJDP)	☐ _____ MONTHS
☐ COMPLETE PETIT THEFT SCHOOL (CPTS)	☐ VEHICLE IMMOBILIZATION (VEIMM)
☐ ☐ ENROLL W/IN _____ DAYS	☐ _____ DAYS
☐ BATTERERS INTERVENTION PROGRAM (CBIP)	☐ DRIVERS LICENSE REVOCATION (DLREV)
☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)	☐ _____ MONTHS / YEARS
☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)	☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
☐ GPS / SOBERTRACK PRIOR TO RELEASE	☐ _____ HOURS
☐ ☐ HCSO ☐ PRIVATE	☐ NO OBJECTION TO APPLY FOR HARSHIP LICENSE FOR WORK PURPOSE (NOHLWP)
☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____	☐ DO NOT DRIVE W/OUT VALID DL (DND)
☐ MAY PETITION FOR EARLY TERM (MPETERM) _____	☐ DO NOT DRIVE (DNDV)
☐ NO EARLY TERMINATION OF PROBATION (NETM)	

☐ Defendant: BRAVO, JASON STEVENS Address: 7413 TAMPANIA AVE N, TAMPA, FL 33614 Interpreter: Y N Language: DOB: 9/13/1982 Gender: Male Race: White DL: FL-B207435111000 Alias: BRAVO, JASON; BRAVO, JASON S; BRAVO, JASON SEVENS; BRAVO, JASON STEVEN; BRAVO, JASON STEVENS; RAW, CARLOS	Warrant: Date of Offense: 07/28/2026 Date of Arrest: 08/03/2026 Charging Document Date: SOID: 00442729 In Custody: NO Booking No: 2026-26907	Bond Out Date: 08/04/2026 BNDADD Bond Type: SURETY Bond Amount: \$20,000.00 Bond Company: ROCHE BAIL BONDS, INC. Cash Bond Depositor:											
PD APP / UNAPP /WDRAW PA APD RC DEFENDER, PUBLIC ACA ASA WITNESS: ISSUING AGENCY: SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS: <table><thead><tr><th>COUNT</th><th>OFFENSE DESCRIPTION</th><th>CITATION #</th><th>PLEA</th><th>DISPO</th></tr></thead><tbody><tr><td>1</td><td>78404874A - MISC2230 (MF) VIOLATION OF STALKING INJUNCTION</td><td></td><td></td><td></td></tr></tbody></table> SPEED: BAC LEVEL: ☐ Stipulated BAC Below .15 FUTURE HEARINGS: PENDING CASES: 26-CF-012999-A Concurrent / Consecutive to Each Count / Case(s)			COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO	1	78404874A - MISC2230 (MF) VIOLATION OF STALKING INJUNCTION				PLEA: G NC NG WPNG WST W/JTR CHOP VOP: Admit Deny DISM In Violation: Y N CONT REVK REIN SACO MOD TERM: S U VERDICT: ACQT G NG DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU Incompetent to Proceed Competent to Proceed ☐ Order to be Prepared COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By: Time served Suspended upon:_____ PROB: _____ Months Report w/in:_____ CSH: _____ hrs @ _____ / month May Buy _____ @ \$ _____ / hour CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW) No Return to Offense Location (NRTOL) FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____ REST: \$ _____ To Pay Date _____ May Convert Court Cost to Community Service Hours (MAYC) CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST LICENSE: D6 Set Aside D6 CONTINUE: Hearing Type: _____ Date: _____ Time: _____
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO									
1	78404874A - MISC2230 (MF) VIOLATION OF STALKING INJUNCTION												

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)

☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)

☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)

☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)

☐ IN JAIL PROGRAM (CIJAMP)

☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

☐ Defendant: BROWN, LARRY CHARVEL Address: 36837 ANNIKA WAY, DADE CITY, FL 33523 Interpreter: Y N Language: DOB: 8/28/1984 Gender: Male Race: Black DL: FL-B202853763000 Alias:	Warrant: Date of Offense: 07/31/2026 Date of Arrest: 08/05/2026 Charging Document Date: SOID: 01016486 In Custody: NO Booking No: 2026-27112	Bond Out Date: BNDADD Bond Type: Bond Amount: Bond Company: Cash Bond Depositor:										
PD APP / UNAPP /WDRAW PA APD RC DEFENDER, PUBLIC ACA ASA WITNESS: ISSUING AGENCY: SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS: <table><thead><tr><th>COUNT</th><th>OFFENSE DESCRIPTION</th><th>CITATION #</th><th>PLEA</th><th>DISPO</th></tr></thead><tbody><tr><td>1</td><td>784031 - DVST0003 (MF) DOMESTIC BATTERY</td><td></td><td></td><td></td></tr></tbody></table> SPEED: BAC LEVEL: ☐ Stipulated BAC Below .15 FUTURE HEARINGS: PENDING CASES: Concurrent / Consecutive to Each Count / Case(s)		COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO	1	784031 - DVST0003 (MF) DOMESTIC BATTERY				PLEA: G NC NG WPNG WST W/JTR CHOP VOP: Admit Deny DISM In Violation: Y N CONT REVK REIN SACO MOD TERM: S U VERDICT: ACQT G NG DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU Incompetent to Proceed Competent to Proceed ☐ Order to be Prepared COJA / SRCJ: Days/Months W/Credit Days Followed By: Time served Suspended upon:_____ PROB: Months Report w/in:_____ CSH: hrs @ / month May Buy_____ @ \$_____ / hour CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW) No Return to Offense Location (NRTOL) FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____ REST: \$_____ To Pay Date_____ May Convert Court Cost to Community Service Hours (MAYC) CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST LICENSE: D6 Set Aside D6 CONTINUE: Hearing Type: _____ Date: _____ Time: _____
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO								
1	784031 - DVST0003 (MF) DOMESTIC BATTERY											

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)

☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)

☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)

☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)

☐ IN JAIL PROGRAM (CIJAMP)

☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

☐ Defendant: BURDIN, AMBER JEWEL Address: 6304 SOUTHERN COMFORT BLVD, TAMPA, FL 33634 Interpreter: Y N Language: DOB: 8/19/1989 Gender: Female Race: White DL: FL-B635010897990 Alias: BURDIN, AMBER; BURDIN, AMBER J; BURDIN, AMBER JEWEL; RAIN, AMBER; RAYNE, AMBER	Warrant: Date of Offense: 08/07/2026 Date of Arrest: 08/07/2026 Charging Document Date: SOID: 00666303 In Custody: NO Booking No: 2026-27451	Bond Out Date: 08/08/2026 BNDADD Bond Type: SURETY Bond Amount: \$1,000.00 Bond Company: I.T. BAIL BOND CO. Cash Bond Depositor:										
PD APP / UNAPP /WDRAW PA APD RC DEFENDER, PUBLIC ACA ASA WITNESS: ISSUING AGENCY: SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS: <table><thead><tr><th>COUNT</th><th>OFFENSE DESCRIPTION</th><th>CITATION #</th><th>PLEA</th><th>DISPO</th></tr></thead><tbody><tr><td>1</td><td>784031 - DVST0003 (MF) DOMESTIC BATTERY</td><td></td><td></td><td></td></tr></tbody></table> SPEED: BAC LEVEL: ☐ Stipulated BAC Below .15 FUTURE HEARINGS: PENDING CASES: Concurrent / Consecutive to Each Count / Case(s) PLEA: VOP: VERDICT: DISP: COJA / SRCJ: PROB: CSH: CONTACT: FINANCIAL: CAPIAS: LICENSE: CONTINUE: G NC NG WPNG WST W/JTR CHOP Admit Deny DISM In Violation: Y N CONT REVK REIN SACO MOD TERM: S U ACQT G NG WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU Incompetent to Proceed Competent to Proceed ☐ Order to be Prepared _____ Days/Months W/Credit _____ Days Followed By: Time served Suspended upon: _____ _____ Months Report w/in: _____ _____ hrs @ _____ / month May Buy _____ @ \$ _____ / hour No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW) No Return to Offense Location (NRTOL) MCCI COP PDLI REC CCCLI Fine \$ _____ REST: \$ _____ To Pay Date _____ May Convert Court Cost to Community Service Hours (MAYC) \$ _____ EST RECALL CAPIAS Set Aside EST D6 Set Aside D6 Hearing Type: _____ Date: _____ Time: _____			COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO	1	784031 - DVST0003 (MF) DOMESTIC BATTERY			
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO								
1	784031 - DVST0003 (MF) DOMESTIC BATTERY											

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)

☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)

☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)

☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)

☐ IN JAIL PROGRAM (CIJAMP)

☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

☐ Defendant: BURFORD, ELIJAH NAYVON Address: 8765 CASTRIES PORT PL APT# 201, TAMPA, FL 33619 Interpreter: Y N Language: DOB: 2/14/2003 Gender: Male Race: Hispanic DL: FL-B245479674000 Alias:	Warrant: Date of Offense: 05/30/2026 Date of Arrest: Charging Document Date: 7/13/2026 SOID: 00936191, J0088765 In Custody: NO Booking No:	Bond Out Date: BNDADD Bond Type: Bond Amount: Bond Company: Cash Bond Depositor:
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PD APP / UNAPP /WDRAW PA APD RC ACA ASA BRAZZALE , CARMELLA MARIE	PLEA: G NC NG WPNG WST W/JTR CHOP										
WITNESS: ISSUING AGENCY:	VOP: Admit Deny DISM In Violation: Y N										
SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS:	CONT REVK REIN SACO MOD TERM: S U										
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COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO							
1	784031 - DVST0001 (MF) BATTERY										
SPEED:	DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU										
BAC LEVEL:	Incompetent to Proceed Competent to Proceed										
☐ Stipulated BAC Below .15	☐ Order to be Prepared										
FUTURE HEARINGS:	COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By:										
PENDING CASES:	Time served Suspended upon: _____										
26-CF-009690-A (W), 26-CF-014239-A (W)	PROB: _____ Months Report w/in: _____										
Concurrent / Consecutive to Each Count / Case(s)	CSH: _____ hrs @ _____ / month										
	May Buy _____ @ \$ _____ / hour										
	CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW)										
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	CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST										
	LICENSE: D6 Set Aside D6										
	CONTINUE: Hearing Type: _____ Date: _____ Time: _____										

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)

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☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARDSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

☐ Defendant: CASSIDY, RACHEL BROOKE	Warrant:	Bond Out Date: 08/10/2026BNDADD
Address: 1085 GRAVES GAP RD, HAYDEN, AL 35079	Date of Offense: 08/09/2026Date of Arrest: 08/09/2026	Bond Type: SURETY
Interpreter: Y N Language:	Charging Document Date:	Bond Amount: \$1,000.00
DOB: 11/21/1991Gender: FemaleRace: White	SOID: 01016700	Bond Company: A-1 RAPID RELEASE BAIL BONDS, INC.
DL: PA-29991182	In Custody: NO	Cash Bond Depositor:
Alias:	Booking No: 2026-27742	

PD APP / UNAPP /WDRAW	PA	APD	RC	DEFENDER, PUBLIC; PI , ASHLEY KRISTEN	ACA	ASA
WITNESS:		ISSUING AGENCY:				
SET FOR: ARRAIGNMENT AT 8:30:00 AM		HEARING COMMENTS:				
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO		
1	784031 - DVST0003 (MF) DOMESTIC BATTERY		WPNG			
SPEED:						
BAC LEVEL:						
☐ Stipulated BAC Below .15						
FUTURE HEARINGS:						
PENDING CASES:						
Concurrent / Consecutive to Each Count / Case(s)						

PLEA:	G	NC	NG	WPNG	WST	W/JTR	CHOP
VOP:	Admit	Deny	DISM	In Violation:	Y	N	
	CONT	REVK	REIN	SACO	MOD	TERM:	S U
VERDICT:	ACQT	G	NG				
DISP:	WH	AGJ	DISM	NOLP	TRDP	DVIP	MIP RIDR VRU
	Incompetent to Proceed			Competent to Proceed			
	☐ Order to be Prepared						
COJA / SRCJ:	_____ Days/Months		W/Credit	_____ Days		Followed By:	
	Time served		Suspended upon:_____				
PROB:	_____ Months			Report w/in:_____			
CSH:	_____ hrs @ _____ / month						
	May Buy_____ @ \$ _____ / hour						
CONTACT:	No Contact w/ Victim (NCWV)			No Violent Contact w/ Victim (NVCW)			
	No Return to Offense Location (NRTOL)						
FINANCIAL:	MCCI	COP	PDLI	REC	CCCLI	Fine \$ _____	
	REST: \$ _____		To Pay Date_____				
	May Convert Court Cost to Community Service Hours (MAYC)						
CAPIAS:	\$ _____		EST	RECALL CAPIAS	Set Aside EST		
LICENSE:	D6		Set Aside D6				
CONTINUE:	Hearing Type: _____ Date:_____ Time:_____						

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)

☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)

☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)

☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)

☐ IN JAIL PROGRAM (CIJAMP)

☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

☐ Defendant: CHERNOV, VLADISLAV Address: 3400 E FLETCHER AVE #235, TAMPA, FL 33613 Interpreter: Y N Language: DOB: 8/12/2002 Gender: Male Race: White DL: FL-C616538073000 Alias:	Warrant: Date of Offense: 08/08/2026 Date of Arrest: 08/09/2026 Charging Document Date: SOID: 01016666, 1016666 In Custody: NO Booking No: 2026-27655	Bond Out Date: 08/10/2026 BNDADD Bond Type: CASH Bond Amount: \$1,000.00; \$1,000.00 Bond Company: Cash Bond Depositor: FUZAYLOV, MAXIM JACOB															
PD APP / UNAPP /WDRAW PA APD RC ADRIEN , JEAN-LUC; DEFENDER, PUBLIC ACA ASA WITNESS: ISSUING AGENCY: SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS: <table><thead><tr><th>COUNT</th><th>OFFENSE DESCRIPTION</th><th>CITATION #</th><th>PLEA</th><th>DISPO</th></tr></thead><tbody><tr><td>1</td><td>784031 - DVST0003 (MF) DOMESTIC BATTERY</td><td></td><td>WPNG</td><td></td></tr><tr><td>2</td><td>784031 - DVST0003 (MF) DOMESTIC BATTERY</td><td></td><td>WPNG</td><td></td></tr></tbody></table> SPEED: BAC LEVEL: ☐ Stipulated BAC Below .15 FUTURE HEARINGS: PENDING CASES: Concurrent / Consecutive to Each Count / Case(s)		COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO	1	784031 - DVST0003 (MF) DOMESTIC BATTERY		WPNG		2	784031 - DVST0003 (MF) DOMESTIC BATTERY		WPNG		PLEA: G NC NG WPNG WST W/JTR CHOP VOP: Admit Deny DISM In Violation: Y N CONT REVK REIN SACO MOD TERM: S U VERDICT: ACQT G NG DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU Incompetent to Proceed Competent to Proceed ☐ Order to be Prepared COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By: Time served Suspended upon:_____ PROB: _____ Months Report w/in:_____ CSH: _____ hrs @ _____ / month May Buy _____ @ \$ _____ / hour CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW) No Return to Offense Location (NRTOL) FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____ REST: \$ _____ To Pay Date _____ May Convert Court Cost to Community Service Hours (MAYC) CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST LICENSE: D6 Set Aside D6 CONTINUE: Hearing Type: _____ Date: _____ Time: _____
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO													
1	784031 - DVST0003 (MF) DOMESTIC BATTERY		WPNG														
2	784031 - DVST0003 (MF) DOMESTIC BATTERY		WPNG														

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)

☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)

☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)

☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)

☐ IN JAIL PROGRAM (CIJAMP)

☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

☐ Defendant: CHINO GARCIA, CRUZ Address: 8913 N OLA AVE, TAMPA, FL 33604 Interpreter: Y N Language: DOB: 9/14/1995 Gender: Male Race: White DL: Alias:	Warrant: Date of Offense: 08/01/2026 Date of Arrest: 08/10/2026 Charging Document Date: SOID: 01016751 In Custody: NO Booking No: 2026-27876	Bond Out Date: 08/11/2026 BNDADD Bond Type: CASH Bond Amount: \$1,000.00 Bond Company: Cash Bond Depositor: HERNANDEZ RAMIREZ, MARIE LISSET
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PD APP / UNAPP /WDRAW PA APD RC DEFENDER, PUBLIC ACA ASA WITNESS: ISSUING AGENCY: SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS: COUNT OFFENSE DESCRIPTION CITATION # PLEA DISPO 1 784031 - DVST0003 (MF) DOMESTIC BATTERY SPEED: BAC LEVEL: ☐ Stipulated BAC Below .15 FUTURE HEARINGS: PENDING CASES: Concurrent / Consecutive to Each Count / Case(s)	PLEA: G NC NG WPNG WST W/JTR CHOP VOP: Admit Deny DISM In Violation: Y N CONT REVK REIN SACO MOD TERM: S U VERDICT: ACQT G NG DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU Incompetent to Proceed Competent to Proceed ☐ Order to be Prepared COJA / SRCJ: Days/Months W/Credit Days Followed By: Time served Suspended upon:_____ PROB: Months Report w/in:_____ CSH: hrs @ / month May Buy_____ @ \$_____ / hour CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW) No Return to Offense Location (NRTOL) FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____ REST: \$_____ To Pay Date_____ May Convert Court Cost to Community Service Hours (MAYC) CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST LICENSE: D6 Set Aside D6 CONTINUE: Hearing Type: _____ Date:_____ Time:_____
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SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)

☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)

☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)

☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)

☐ IN JAIL PROGRAM (CIJAMP)

☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

☐ Defendant: CHRISTIAN, CHARLENE MOSLEY Address: 4823 E TEMPLE HEIGHTS RD, TAMPA, FL 33617 Interpreter: Y N Language: DOB: 7/2/1962 Gender: Female Race: Black DL: FL-C331306690000 Alias:	Warrant: Date of Offense: 07/09/2026 Date of Arrest: 08/06/2026 Charging Document Date: SOID: 00411713 In Custody: NO Booking No: 2026-27254	Bond Out Date: 08/08/2026 BNDADD Bond Type: CASH Bond Amount: \$250.00 Bond Company: Cash Bond Depositor: CHRISTIAN, YVONNE
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PD APP / UNAPP /WDRAW PA APD RC DEFENDER, PUBLIC ACA ASA WITNESS: ISSUING AGENCY: SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS: <table><tr><th>COUNT</th><th>OFFENSE DESCRIPTION</th><th>CITATION #</th><th>PLEA</th><th>DISPO</th></tr><tr><td>1</td><td>784031 - DVST0003 (MF) DOMESTIC BATTERY</td><td></td><td></td><td></td></tr></table> SPEED: BAC LEVEL: ☐ Stipulated BAC Below .15 FUTURE HEARINGS: PENDING CASES: Concurrent / Consecutive to Each Count / Case(s)	COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO	1	784031 - DVST0003 (MF) DOMESTIC BATTERY				PLEA: G NC NG WPNG WST W/JTR CHOP VOP: Admit Deny DISM In Violation: Y N CONT REVK REIN SACO MOD TERM: S U VERDICT: ACQT G NG DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU Incompetent to Proceed Competent to Proceed ☐ Order to be Prepared COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By: Time served Suspended upon: _____ PROB: _____ Months Report w/in: _____ CSH: _____ hrs @ _____ / month May Buy _____ @ \$ _____ / hour CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW) No Return to Offense Location (NRTOL) FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____ REST: \$ _____ To Pay Date _____ May Convert Court Cost to Community Service Hours (MAYC) CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST LICENSE: D6 Set Aside D6 CONTINUE: Hearing Type: _____ Date: _____ Time: _____
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO							
1	784031 - DVST0003 (MF) DOMESTIC BATTERY										

SENTENCING PROVISIONS:

☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)	☐ NO FIREARMS OR WEAPONS (NOWF)
☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)	☐ STAY AWAY FROM OFFENSE LOCATION (STFR)
☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)	☐ NO ALCOHOL (NOAL)
☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)	☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)	ENROLL W/IN _____ DAYS
☐ IN JAIL PROGRAM (CIJAMP)	☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)
☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)	☐ IGNITION INTERLOCK (IGLOCK)
☐ IN JAIL PROGRAM (CIJDP)	_____ MONTHS
☐ COMPLETE PETIT THEFT SCHOOL (CPTS)	☐ VEHICLE IMMOBILIZATION (VEIMM)
☐ ENROLL W/IN _____ DAYS	_____ DAYS
☐ BATTERERS INTERVENTION PROGRAM (CBIP)	☐ DRIVERS LICENSE REVOCATION (DLREV)
☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)	_____ MONTHS / YEARS
☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)	☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
☐ GPS / SOBERTRACK PRIOR TO RELEASE	_____ HOURS
☐ HCSO ☐ PRIVATE	☐ NO OBJECTION TO APPLY FOR HARSHIP LICENSE FOR WORK PURPOSE (NOHLWP)
☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____	☐ DO NOT DRIVE W/OUT VALID DL (DND)
☐ MAY PETITION FOR EARLY TERM (MPETERM) _____	☐ DO NOT DRIVE (DNDV)
☐ NO EARLY TERMINATION OF PROBATION (NETM)	

☐ Defendant: COBB, ASHLEY SHERRARIS Address: 10610 N 30TH ST APT 42B, TAMPA, FL 33612 Interpreter: Y N Language: DOB: 7/20/1985 Gender: Female Race: Black DL: FL-C206731781000 Alias:	Warrant: Date of Offense: 08/07/2026 Date of Arrest: 08/08/2026 Charging Document Date: SOID: 01016630 In Custody: NO Booking No: 2026-27551	Bond Out Date: 08/09/2026 BNDADD Bond Type: SURETY Bond Amount: \$1,000.00 Bond Company: PATSYS BAIL BONDS, LLC. Cash Bond Depositor:										
PD APP / UNAPP /WDRAW PA APD RC DEFENDER, PUBLIC ACA ASA WITNESS: ISSUING AGENCY: SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS: <table><thead><tr><th>COUNT</th><th>OFFENSE DESCRIPTION</th><th>CITATION #</th><th>PLEA</th><th>DISPO</th></tr></thead><tbody><tr><td>1</td><td>784031 - DVST0003 (MF) DOMESTIC BATTERY</td><td></td><td></td><td></td></tr></tbody></table> SPEED: BAC LEVEL: ☐ Stipulated BAC Below .15 FUTURE HEARINGS: PENDING CASES: 26-CF-013891-A Concurrent / Consecutive to Each Count / Case(s)		COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO	1	784031 - DVST0003 (MF) DOMESTIC BATTERY				PLEA: G NC NG WPNG WST W/JTR CHOP VOP: Admit Deny DISM In Violation: Y N CONT REVK REIN SACO MOD TERM: S U VERDICT: ACQT G NG DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU Incompetent to Proceed Competent to Proceed ☐ Order to be Prepared COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By: Time served Suspended upon:_____ PROB: _____ Months Report w/in:_____ CSH: _____ hrs @ _____ / month May Buy _____ @ \$ _____ / hour CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW) No Return to Offense Location (NRTOL) FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____ REST: \$ _____ To Pay Date _____ May Convert Court Cost to Community Service Hours (MAYC) CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST LICENSE: D6 Set Aside D6 CONTINUE: Hearing Type: _____ Date: _____ Time: _____
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO								
1	784031 - DVST0003 (MF) DOMESTIC BATTERY											

SENTENCING PROVISIONS:

☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)	☐ NO FIREARMS OR WEAPONS (NOWF)
☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)	☐ STAY AWAY FROM OFFENSE LOCATION (STFR)
☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)	☐ NO ALCOHOL (NOAL)
☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)	☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)	ENROLL W/IN _____ DAYS
☐ IN JAIL PROGRAM (CIJAMP)	☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)
☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)	☐ IGNITION INTERLOCK (IGLOCK)
☐ IN JAIL PROGRAM (CIJDP)	_____ MONTHS
☐ COMPLETE PETIT THEFT SCHOOL (CPTS)	☐ VEHICLE IMMOBILIZATION (VEIMM)
☐ ENROLL W/IN _____ DAYS	_____ DAYS
☐ BATTERERS INTERVENTION PROGRAM (CBIP)	☐ DRIVERS LICENSE REVOCATION (DLREV)
☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)	_____ MONTHS / YEARS
☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)	☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
☐ GPS / SOBERTRACK PRIOR TO RELEASE	_____ HOURS
☐ HCSO ☐ PRIVATE	☐ NO OBJECTION TO APPLY FOR HARSHIP LICENSE FOR WORK PURPOSE (NOHLWP)
☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____	☐ DO NOT DRIVE W/OUT VALID DL (DND)
☐ MAY PETITION FOR EARLY TERM (MPETERM) _____	☐ DO NOT DRIVE (DNDV)
☐ NO EARLY TERMINATION OF PROBATION (NETM)	

☐ Defendant: COBB, DEXTER Address: 29116 ARMOYAN BLVD, LEESBURG, FL 34748 Interpreter: Y N Language: DOB: 11/28/1984 Gender: Male Race: Black DL: FL-C100172844280 Alias: COBB, DEXTER LARAE, II	Warrant: Date of Offense: 07/04/2026 Date of Arrest: 07/04/2026 Charging Document Date: SOID: 00597931 In Custody: NO Booking No: 2026-23071	Bond Out Date: 07/05/2026 BNDADD Bond Type: SURETY Bond Amount: \$1,000.00 Bond Company: ROCHE BAIL BONDS, INC. Cash Bond Depositor:										
PD APP / UNAPP /WDRAW PA APD RC DEFENDER, PUBLIC ACA ASA WITNESS: ISSUING AGENCY: SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS: <table><thead><tr><th>COUNT</th><th>OFFENSE DESCRIPTION</th><th>CITATION #</th><th>PLEA</th><th>DISPO</th></tr></thead><tbody><tr><td>1</td><td>784031 - DVST0003 (MF) DOMESTIC BATTERY</td><td></td><td></td><td></td></tr></tbody></table> SPEED: BAC LEVEL: ☐ Stipulated BAC Below .15 FUTURE HEARINGS: PENDING CASES: Concurrent / Consecutive to Each Count / Case(s)		COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO	1	784031 - DVST0003 (MF) DOMESTIC BATTERY				PLEA: G NC NG WPNG WST W/JTR CHOP VOP: Admit Deny DISM In Violation: Y N CONT REVK REIN SACO MOD TERM: S U VERDICT: ACQT G NG DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU Incompetent to Proceed Competent to Proceed ☐ Order to be Prepared COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By: Time served Suspended upon:_____ PROB: _____ Months Report w/in:_____ CSH: _____ hrs @ _____ / month May Buy _____ @ \$ _____ / hour CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW) No Return to Offense Location (NRTOL) FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____ REST: \$ _____ To Pay Date _____ May Convert Court Cost to Community Service Hours (MAYC) CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST LICENSE: D6 Set Aside D6 CONTINUE: Hearing Type: _____ Date: _____ Time: _____
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO								
1	784031 - DVST0003 (MF) DOMESTIC BATTERY											

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)

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☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)

☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)

☐ IN JAIL PROGRAM (CIJAMP)

☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

☐ Defendant: CREARY, TAURENCE RENARD Address: 1904 E 21ST AVE, TAMPA, FL 33605 Interpreter: Y N Language: DOB: 8/6/2007 Gender: Male Race: Black DL: FL-C616795019000 Alias:	Warrant: Date of Offense: 08/09/2026 Date of Arrest: 08/09/2026 Charging Document Date: SOID: 01016707, 1016707 In Custody: NO Booking No: 2026-27770	Bond Out Date: 08/10/2026 BNDADD Bond Type: SURETY Bond Amount: \$1,000.00 Bond Company: WALK OUT BAIL BONDS, LLC. Cash Bond Depositor:										
PD APP / UNAPP /WDRAW PA APD RC DEFENDER, PUBLIC ACA ASA WITNESS: ISSUING AGENCY: SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS: <table><thead><tr><th>COUNT</th><th>OFFENSE DESCRIPTION</th><th>CITATION #</th><th>PLEA</th><th>DISPO</th></tr></thead><tbody><tr><td>1</td><td>784031 - DVST0003 (MF) DOMESTIC BATTERY</td><td></td><td></td><td></td></tr></tbody></table> SPEED: BAC LEVEL: ☐ Stipulated BAC Below .15 FUTURE HEARINGS: PENDING CASES: Concurrent / Consecutive to Each Count / Case(s)		COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO	1	784031 - DVST0003 (MF) DOMESTIC BATTERY				PLEA: G NC NG WPNG WST W/JTR CHOP VOP: Admit Deny DISM In Violation: Y N CONT REVK REIN SACO MOD TERM: S U VERDICT: ACQT G NG DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU Incompetent to Proceed Competent to Proceed ☐ Order to be Prepared COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By: Time served Suspended upon:_____ PROB: _____ Months Report w/in:_____ CSH: _____ hrs @ _____ / month May Buy _____ @ \$ _____ / hour CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW) No Return to Offense Location (NRTOL) FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____ REST: \$ _____ To Pay Date _____ May Convert Court Cost to Community Service Hours (MAYC) CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST LICENSE: D6 Set Aside D6 CONTINUE: Hearing Type: _____ Date: _____ Time: _____
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO								
1	784031 - DVST0003 (MF) DOMESTIC BATTERY											

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)

☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)

☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)

☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)

☐ IN JAIL PROGRAM (CIJAMP)

☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARDSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

☐ Defendant: CUNNINGHAM, CHRISTOPHER AL	Warrant:	Bond Out Date: 08/11/2026BNDADD
Address: 6204 PADDOCK GLEN DR #303, TAMPA, FL 33634	Date of Offense: 08/10/2026 Date of Arrest: 08/10/2026	Bond Type: SURETY
Interpreter: Y N Language:	Charging Document Date:	Bond Amount: \$1,000.00
DOB: 8/12/1993 Gender: Male Race: Black	SOID: 01016715	Bond Company: FREDDIE DIXON BAIL BONDS
DL: FL-C552101932920	In Custody: NO	Cash Bond Depositor:
Alias:	Booking No: 2026-27795	

PD APP / UNAPP /WDRAW	PA	APD	RC	DEFENDER, PUBLIC	ACA	ASA
WITNESS:		ISSUING AGENCY:				
SET FOR: ARRAIGNMENT AT 8:30:00 AM		HEARING COMMENTS:				
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO		
1	784031 - DVST0003 (MF) DOMESTIC BATTERY					
SPEED:						
BAC LEVEL:						
☐ Stipulated BAC Below .15						
FUTURE HEARINGS:						
PENDING CASES:						
Concurrent / Consecutive to Each Count / Case(s)						

PLEA:	G	NC	NG	WPNG	WST	W/JTR	CHOP
VOP:	Admit	Deny	DISM	In Violation: Y	N		
	CONT	REVK	REIN	SACO	MOD	TERM: S	U
VERDICT:	ACQT	G	NG				
DISP:	WH	AGJ	DISM	NOLP	TRDP	DVIP	MIP
						RIDR	VRU
	Incompetent to Proceed			Competent to Proceed			
	☐ Order to be Prepared						
COJA / SRCJ:	_____ Days/Months		W/Credit _____ Days		Followed By:		
	Time served		Suspended upon: _____				
PROB:	_____ Months			Report w/in: _____			
CSH:	_____ hrs @ _____ / month						
	May Buy _____ @ \$ _____ / hour						
CONTACT:	No Contact w/ Victim (NCWV)			No Violent Contact w/ Victim (NVCW)			
	No Return to Offense Location (NRTOL)						
FINANCIAL:	MCCI	COP	PDLI	REC	CCCLI	Fine \$ _____	
	REST: \$ _____		To Pay Date _____				
	May Convert Court Cost to Community Service Hours (MAYC)						
CAPIAS:	\$ _____		EST	RECALL CAPIAS	Set Aside EST		
LICENSE:	D6	Set Aside D6					
CONTINUE:	Hearing Type: _____ Date: _____ Time: _____						

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)

☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)

☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)

☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)

☐ IN JAIL PROGRAM (CIJAMP)

☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

☐ Defendant: CUS COY, PEDRO	Warrant:	Bond Out Date: BNDADD
Address: 4532 DEVONSHIRE RD, TAMPA, FL 33634	Date of Offense: 08/07/2026 Date of Arrest: 08/07/2026	Bond Type:
Interpreter: Y N Language:	Charging Document Date:	Bond Amount:
DOB: 3/4/1985 Gender: Male Race: White	SOID: 01016622, 1016622	Bond Company:
DL:	In Custody: YES	Cash Bond Depositor:
Alias:	Booking No: 2026-27525	

PD APP / UNAPP /WDRAW	PA	APD	RC	DEFENDER, PUBLIC	ACA	ASA
WITNESS:		ISSUING AGENCY:				
SET FOR: ARRAIGNMENT AT 8:30:00 AM		HEARING COMMENTS:				
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO		
1	784031 - DVST0003 (MF) DOMESTIC BATTERY					
SPEED:						
BAC LEVEL:						
☐ Stipulated BAC Below .15						
FUTURE HEARINGS:						
PENDING CASES:						
Concurrent / Consecutive to Each Count / Case(s)						

PLEA:	G	NC	NG	WPNG	WST	W/JTR	CHOP
VOP:	Admit	Deny	DISM	In Violation: Y	N		
	CONT	REVK	REIN	SACO	MOD	TERM: S	U
VERDICT:	ACQT	G	NG				
DISP:	WH	AGJ	DISM	NOLP	TRDP	DVIP	MIP
						RIDR	VRU
	Incompetent to Proceed			Competent to Proceed			
	☐ Order to be Prepared						
COJA / SRCJ:	_____ Days/Months		W/Credit _____ Days		Followed By:		
	Time served		Suspended upon: _____				
PROB:	_____ Months			Report w/in: _____			
CSH:	_____ hrs @ _____ / month						
	May Buy _____ @ \$ _____ / hour						
CONTACT:	No Contact w/ Victim (NCWV)			No Violent Contact w/ Victim (NVCW)			
	No Return to Offense Location (NRTOL)						
FINANCIAL:	MCCI	COP	PDLI	REC	CCCLI	Fine \$ _____	
	REST: \$ _____		To Pay Date _____				
	May Convert Court Cost to Community Service Hours (MAYC)						
CAPIAS:	\$ _____		EST	RECALL CAPIAS	Set Aside EST		
LICENSE:	D6	Set Aside D6					
CONTINUE:	Hearing Type: _____ Date: _____ Time: _____						

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)

☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)

☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)

☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)

☐ IN JAIL PROGRAM (CIJAMP)

☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARDSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

Defendant: DANG, ANGLINA B Address: 2223 BLUE SPRUCE WAY, TAMPA, FL 33604 Interpreter: Y N Language: DOB: 10/10/1999 Gender: Female Race: Black DL: Alias: Warrant: Date of Offense: 08/07/2026 Date of Arrest: 08/07/2026 Charging Document Date: SOID: 01016595 In Custody: NO Booking No: 2026-27434 Bond Out Date: 08/08/2026 BNDADD Bond Type: SURETY Bond Amount: \$1,000.00 Bond Company: EXIT US BAIL BONDS, INC. Cash Bond Depositor:
--

PD APP / UNAPP /WDRAW PA APD RC DEFENDER, PUBLIC ACA ASA WITNESS: ISSUING AGENCY: SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS: COUNT OFFENSE DESCRIPTION CITATION # PLEA DISPO 1 784031 - DVST0003 (MF) DOMESTIC BATTERY SPEED: BAC LEVEL: Stipulated BAC Below .15 FUTURE HEARINGS: PENDING CASES: Concurrent / Consecutive to Each Count / Case(s)

PLEA: G NC NG WPNG WST W/JTR CHOP	VOP: Admit Deny DISM In Violation: Y N CONT REVK REIN SACO MOD TERM: S U
VERDICT: ACQT G NG	DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU Incompetent to Proceed Competent to Proceed Order to be Prepared
COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By: Time served Suspended upon:_____	PROB: _____ Months Report w/in:_____
CSH: _____ hrs @ _____ / month May Buy_____ @ \$ _____ / hour	CONTACT: No Contact w/ Victim (NCVV) No Violent Contact w/ Victim (NVCW) No Return to Offense Location (NRTOL)
FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____ REST: \$ _____ To Pay Date_____ May Convert Court Cost to Community Service Hours (MAYC)	CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST
LICENSE: D6 Set Aside D6	CONTINUE: Hearing Type: _____ Date:_____ Time:_____

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)

☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)

☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)

☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)

☐ IN JAIL PROGRAM (CIJAMP)

☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

☐ Defendant: DERAVIL, MELINDA Address: 1106 E HILLSBOROUGH AVE #15, TAMPA, FL 33604 Interpreter: Y N Language: DOB: 8/20/1993 Gender: Female Race: Black DL: FL-D614552938000 Alias: DERAVID, MELINDA LABADORE; DERAVID, MELINDA LABORDE	Warrant: Date of Offense: 05/22/2026 Date of Arrest: 08/06/2026 Charging Document Date: 6/26/2026 SOID: 00814960 In Custody: NO Booking No: 2026-27263	Bond Out Date: 08/06/2026 BNDADD Bond Type: SURETY Bond Amount: \$1,000.00 Bond Company: AFTERMATH BAIL BONDS Cash Bond Depositor:
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PD APP / UNAPP /WDRAW PA APD RC ACA ASA BRAZZALE , CARMELLA MARIE	PLEA: G NC NG WPNG WST W/JTR CHOP										
WITNESS: ISSUING AGENCY:	VOP: Admit Deny DISM In Violation: Y N										
SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS:	CONT REVK REIN SACO MOD TERM: S U										
<table><tr><th>COUNT</th><th>OFFENSE DESCRIPTION</th><th>CITATION #</th><th>PLEA</th><th>DISPO</th></tr><tr><td>1</td><td>784031 - DVST0001 (MF) BATTERY</td><td></td><td></td><td></td></tr></table>	COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO	1	784031 - DVST0001 (MF) BATTERY				VERDICT: ACQT G NG
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO							
1	784031 - DVST0001 (MF) BATTERY										
SPEED:	DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU										
BAC LEVEL:	Incompetent to Proceed Competent to Proceed										
☐ Stipulated BAC Below .15	☐ Order to be Prepared										
FUTURE HEARINGS:	COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By:										
PENDING CASES:	Time served Suspended upon: _____										
26-TR-088712	PROB: _____ Months Report w/in: _____										
Concurrent / Consecutive to Each Count / Case(s)	CSH: _____ hrs @ _____ / month										
	May Buy _____ @ \$ _____ / hour										
	CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW)										
	No Return to Offense Location (NRTOL)										
	FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____										
	REST: \$ _____ To Pay Date _____										
	May Convert Court Cost to Community Service Hours (MAYC)										
	CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST										
	LICENSE: D6 Set Aside D6										
	CONTINUE: Hearing Type: _____ Date: _____ Time: _____										

SENTENCING PROVISIONS:

☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)	☐ NO FIREARMS OR WEAPONS (NOWF)
☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)	☐ STAY AWAY FROM OFFENSE LOCATION (STFR)
☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)	☐ NO ALCOHOL (NOAL)
☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)	☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)	ENROLL W/IN _____ DAYS
☐ IN JAIL PROGRAM (CIJAMP)	☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)
☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)	☐ IGNITION INTERLOCK (IGLOCK)
☐ IN JAIL PROGRAM (CIJDP)	_____ MONTHS
☐ COMPLETE PETIT THEFT SCHOOL (CPTS)	☐ VEHICLE IMMOBILIZATION (VEIMM)
☐ ENROLL W/IN _____ DAYS	_____ DAYS
☐ BATTERERS INTERVENTION PROGRAM (CBIP)	☐ DRIVERS LICENSE REVOCATION (DLREV)
☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)	_____ MONTHS / YEARS
☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)	☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
☐ GPS / SOBERTRACK PRIOR TO RELEASE	_____ HOURS
☐ HCSO ☐ PRIVATE	☐ NO OBJECTION TO APPLY FOR HARSHIP LICENSE FOR WORK PURPOSE (NOHLWP)
☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____	☐ DO NOT DRIVE W/OUT VALID DL (DND)
☐ MAY PETITION FOR EARLY TERM (MPETERM) _____	☐ DO NOT DRIVE (DNDV)
☐ NO EARLY TERMINATION OF PROBATION (NETM)	

☐ Defendant: DORR, ANDREA DEANNA Address: 4807 W LONGFELLOW AVE, TAMPA, FL 33629 Interpreter: Y N Language: DOB: 10/11/1995 Gender: Female Race: White DL: FL-D228403354000 Alias:	Warrant: Date of Offense: 08/02/2026 Date of Arrest: 08/05/2026 Charging Document Date: SOID: 00869318 In Custody: NO Booking No: 2026-27164	Bond Out Date: 08/06/2026 BNDADD Bond Type: CASH Bond Amount: \$250.00 Bond Company: Cash Bond Depositor: BROWN, MARC
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PD APP / UNAPP /WDRAW PA APD RC MCKYTON , RICHARD JOSEPH; DEFENDER, PUBLIC ACA ASA WITNESS: ISSUING AGENCY: SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS: <table><tr><th>COUNT</th><th>OFFENSE DESCRIPTION</th><th>CITATION #</th><th>PLEA</th><th>DISPO</th></tr><tr><td>1</td><td>784031 - DVST0003 (MF) DOMESTIC BATTERY</td><td></td><td></td><td></td></tr></table> SPEED: BAC LEVEL: ☐ Stipulated BAC Below .15 FUTURE HEARINGS: PENDING CASES: Concurrent / Consecutive to Each Count / Case(s)	COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO	1	784031 - DVST0003 (MF) DOMESTIC BATTERY				PLEA: G NC NG WPNG WST W/JTR CHOP VOP: Admit Deny DISM In Violation: Y N CONT REVK REIN SACO MOD TERM: S U VERDICT: ACQT G NG DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU Incompetent to Proceed Competent to Proceed ☐ Order to be Prepared COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By: Time served Suspended upon: _____ PROB: _____ Months Report w/in: _____ CSH: _____ hrs @ _____ / month May Buy _____ @ \$ _____ / hour CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW) No Return to Offense Location (NRTOL) FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____ REST: \$ _____ To Pay Date _____ May Convert Court Cost to Community Service Hours (MAYC) CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST LICENSE: D6 Set Aside D6 CONTINUE: Hearing Type: _____ Date: _____ Time: _____
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO							
1	784031 - DVST0003 (MF) DOMESTIC BATTERY										

SENTENCING PROVISIONS:

☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)	☐ NO FIREARMS OR WEAPONS (NOWF)
☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)	☐ STAY AWAY FROM OFFENSE LOCATION (STFR)
☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)	☐ NO ALCOHOL (NOAL)
☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)	☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)	ENROLL W/IN _____ DAYS
☐ IN JAIL PROGRAM (CIJAMP)	☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)
☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)	☐ IGNITION INTERLOCK (IGLOCK)
☐ IN JAIL PROGRAM (CIJDP)	_____ MONTHS
☐ COMPLETE PETIT THEFT SCHOOL (CPTS)	☐ VEHICLE IMMOBILIZATION (VEIMM)
☐ ENROLL W/IN _____ DAYS	_____ DAYS
☐ BATTERERS INTERVENTION PROGRAM (CBIP)	☐ DRIVERS LICENSE REVOCATION (DLREV)
☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)	_____ MONTHS / YEARS
☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)	☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
☐ GPS / SOBERTRACK PRIOR TO RELEASE	_____ HOURS
☐ HCSO ☐ PRIVATE	☐ NO OBJECTION TO APPLY FOR HARSHIP LICENSE FOR WORK PURPOSE (NOHLWP)
☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____	☐ DO NOT DRIVE W/OUT VALID DL (DND)
☐ MAY PETITION FOR EARLY TERM (MPETERM) _____	☐ DO NOT DRIVE (DNDV)
☐ NO EARLY TERMINATION OF PROBATION (NETM)	

☐ Defendant: DOTSON, KATHRYN ELIZIBETH	Warrant:	Bond Out Date: 08/07/2026BNDADD
Address: 6843 CITRUS CREEK LN, TAMPA, FL 33625	Date of Offense: 08/06/2026Date of Arrest: 08/06/2026	Bond Type: CASH
Interpreter: Y N Language:	Charging Document Date:	Bond Amount: \$200.00
DOB: 10/10/1988Gender: FemaleRace: White	SOID: 01016571, 1016571	Bond Company:
DL: FL-D220160929000	In Custody: NO	Cash Bond Depositor: DOTSON, FRIDA ALEXANDRIA
Alias:	Booking No: 2026-27385	

PD APP / UNAPP /WDRAW	PA	APD	RC	CROCKER , AUSTIN DAVID	ACA	ASA
WITNESS:		ISSUING AGENCY:				
SET FOR: ARRAIGNMENT AT 8:30:00 AM		HEARING COMMENTS:				
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO		
1	784031 - DVST0003 (MF) DOMESTIC BATTERY		WPNG			
SPEED:						
BAC LEVEL:						
☐ Stipulated BAC Below .15						
FUTURE HEARINGS:						
PENDING CASES:						
Concurrent / Consecutive to Each Count / Case(s)						

PLEA:	G	NC	NG	WPNG	WST	W/JTR	CHOP
VOP:	Admit	Deny	DISM	In Violation:	Y	N	
	CONT	REVK	REIN	SACO	MOD	TERM:	S U
VERDICT:	ACQT	G	NG				
DISP:	WH	AGJ	DISM	NOLP	TRDP	DVIP	MIP RIDR VRU
	Incompetent to Proceed			Competent to Proceed			
	☐ Order to be Prepared						
COJA / SRCJ:	_____ Days/Months		W/Credit _____ Days		Followed By:		
	Time served		Suspended upon:_____				
PROB:	_____ Months			Report w/in:_____			
CSH:	_____ hrs @ _____ / month						
	May Buy _____ @ \$ _____ / hour						
CONTACT:	No Contact w/ Victim (NCWV)			No Violent Contact w/ Victim (NVCW)			
	No Return to Offense Location (NRTOL)						
FINANCIAL:	MCCI	COP	PDLI	REC	CCCLI	Fine \$ _____	
	REST: \$ _____		To Pay Date _____				
	May Convert Court Cost to Community Service Hours (MAYC)						
CAPIAS:	\$ _____		EST	RECALL CAPIAS	Set Aside EST		
LICENSE:	D6		Set Aside D6				
CONTINUE:	Hearing Type: _____ Date: _____ Time: _____						

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)

☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)

☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)

☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)

☐ IN JAIL PROGRAM (CIJAMP)

☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

☐ Defendant: DUENO-PAGAN, RAMON Address: 7904 DOWNING CIR, TAMPA, FL 33610 Interpreter: Y N Language: DOB: 12/19/1973 Gender: Male Race: White DL: FL-D512720734590 Alias: DUENO PAGAN, RAMON; DUENO, RAMON	Warrant: Date of Offense: 08/08/2026 Date of Arrest: 08/08/2026 Charging Document Date: SOID: 00652136 In Custody: YES Booking No: 2026-27592	Bond Out Date: BNDADD Bond Type: Bond Amount: Bond Company: Cash Bond Depositor:										
PD APP / UNAPP /WDRAW PA APD RC DEFENDER, PUBLIC ACA ASA WITNESS: ISSUING AGENCY: SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS: <table><thead><tr><th>COUNT</th><th>OFFENSE DESCRIPTION</th><th>CITATION #</th><th>PLEA</th><th>DISPO</th></tr></thead><tbody><tr><td>1</td><td>784031 - DVST0003 (MF) DOMESTIC BATTERY</td><td></td><td></td><td></td></tr></tbody></table> SPEED: BAC LEVEL: ☐ Stipulated BAC Below .15 FUTURE HEARINGS: PENDING CASES: 08-TR-095784 Concurrent / Consecutive to Each Count / Case(s)		COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO	1	784031 - DVST0003 (MF) DOMESTIC BATTERY				PLEA: G NC NG WPNG WST W/JTR CHOP VOP: Admit Deny DISM In Violation: Y N CONT REVK REIN SACO MOD TERM: S U VERDICT: ACQT G NG DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU Incompetent to Proceed Competent to Proceed ☐ Order to be Prepared COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By: Time served Suspended upon:_____ PROB: _____ Months Report w/in:_____ CSH: _____ hrs @ _____ / month May Buy _____ @ \$ _____ / hour CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW) No Return to Offense Location (NRTOL) FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____ REST: \$ _____ To Pay Date _____ May Convert Court Cost to Community Service Hours (MAYC) CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST LICENSE: D6 Set Aside D6 CONTINUE: Hearing Type: _____ Date: _____ Time: _____
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO								
1	784031 - DVST0003 (MF) DOMESTIC BATTERY											

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)

☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)

☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)

☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)

☐ IN JAIL PROGRAM (CIJAMP)

☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

☐ Defendant: FAY, THOMAS MICHAEL	Warrant:	Bond Out Date: 08/08/2026BNDADD
Address: 2334 3RD AVE, TAMPA, FL 33605	Date of Offense: 07/05/2026Date of Arrest: 08/07/2026	Bond Type: SURETY
Interpreter: Y N Language:	Charging Document Date:	Bond Amount: \$1,000.00
DOB: 2/3/1997Gender: MaleRace: White	SOID: 01016574	Bond Company: ORIENT ROAD BAIL BONDS, INC.
DL: FL-F000833970430	In Custody: NO	Cash Bond Depositor:
Alias: FAY, THOMAS M	Booking No: 2026-27388	

PD APP / UNAPP /WDRAW	PA	APD	RC	FULLER , CARYNA MERCEDES; DEFENDER, PUBLIC	ACA	ASA
WITNESS:		ISSUING AGENCY:				
SET FOR: ARRAIGNMENT AT 8:30:00 AM		HEARING COMMENTS:				
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO		
1	784031 - DVST0003 (MF) DOMESTIC BATTERY		WPNG			
SPEED:						
BAC LEVEL:						
☐ Stipulated BAC Below .15						
FUTURE HEARINGS:						
PENDING CASES:						
Concurrent / Consecutive to Each Count / Case(s)						

PLEA:	G	NC	NG	WPNG	WST	W/JTR	CHOP
VOP:	Admit	Deny	DISM	In Violation:	Y	N	
	CONT	REVK	REIN	SACO	MOD	TERM:	S U
VERDICT:	ACQT	G	NG				
DISP:	WH	AGJ	DISM	NOLP	TRDP	DVIP	MIP RIDR VRU
	Incompetent to Proceed			Competent to Proceed			
	☐ Order to be Prepared						
COJA / SRCJ:	_____ Days/Months		W/Credit _____ Days		Followed By:		
	Time served		Suspended upon:_____				
PROB:	_____ Months			Report w/in:_____			
CSH:	_____ hrs @ _____ / month						
	May Buy _____ @ \$ _____ / hour						
CONTACT:	No Contact w/ Victim (NCWV)			No Violent Contact w/ Victim (NVCW)			
	No Return to Offense Location (NRTOL)						
FINANCIAL:	MCCI	COP	PDLI	REC	CCCLI	Fine \$ _____	
	REST: \$ _____		To Pay Date _____				
	May Convert Court Cost to Community Service Hours (MAYC)						
CAPIAS:	\$ _____		EST	RECALL CAPIAS	Set Aside EST		
LICENSE:	D6		Set Aside D6				
CONTINUE:	Hearing Type: _____ Date: _____ Time: _____						

SENTENCING PROVISIONS:

☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)	☐ NO FIREARMS OR WEAPONS (NOWF)
☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)	☐ STAY AWAY FROM OFFENSE LOCATION (STFR)
☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)	☐ NO ALCOHOL (NOAL)
☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)	☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)	ENROLL W/IN _____ DAYS
☐ IN JAIL PROGRAM (CIJAMP)	☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)
☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)	☐ IGNITION INTERLOCK (IGLOCK)
☐ IN JAIL PROGRAM (CIJDP)	_____ MONTHS
☐ COMPLETE PETIT THEFT SCHOOL (CPTS)	☐ VEHICLE IMMOBILIZATION (VEIMM)
☐ ENROLL W/IN _____ DAYS	_____ DAYS
☐ BATTERERS INTERVENTION PROGRAM (CBIP)	☐ DRIVERS LICENSE REVOCATION (DLREV)
☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)	_____ MONTHS / YEARS
☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)	☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
☐ GPS / SOBERTRACK PRIOR TO RELEASE	_____ HOURS
☐ HCSO ☐ PRIVATE	☐ NO OBJECTION TO APPLY FOR HARSHIP LICENSE FOR WORK PURPOSE (NOHLWP)
☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____	☐ DO NOT DRIVE W/OUT VALID DL (DND)
☐ MAY PETITION FOR EARLY TERM (MPETERM) _____	☐ DO NOT DRIVE (DNDV)
☐ NO EARLY TERMINATION OF PROBATION (NETM)	

☐ Defendant: GASTON, TERRENCE ARTHUR Address: 43716 COUNTY ROAD 54 E, KATHLEEN, FL 33849 Interpreter: Y N Language: DOB: 12/23/1994 Gender: Male Race: Black DL: FL-G228841518000 Alias: GASTON, TERRENCE ARTHUR; GASTON, TERRENCE ARTHUR J	Warrant: Date of Offense: 08/04/2026 Date of Arrest: 08/05/2026 Charging Document Date: 8/6/2026 SOID: 01012240 In Custody: YES Booking No: 2026-26877	Bond Out Date: BNDADD Bond Type: Bond Amount: Bond Company: Cash Bond Depositor:											
PD APP / UNAPP /WDRAW PA APD RC DEFENDER, PUBLIC ACA ASA WITNESS: ISSUING AGENCY: SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS: <table><thead><tr><th>COUNT</th><th>OFFENSE DESCRIPTION</th><th>CITATION #</th><th>PLEA</th><th>DISPO</th></tr></thead><tbody><tr><td>1</td><td>741297 - MISC3001 (MF) VIOLATION OF PRETRIAL RELEASE CONDITION</td><td></td><td></td><td></td></tr></tbody></table> SPEED: BAC LEVEL: ☐ Stipulated BAC Below .15 FUTURE HEARINGS: PENDING CASES: 24-TR-070955, 24-TR-103886, 25-TR-016477, 25-TR-025570, 26-CF-005326-A, 26-CF-013548-A, 26-CM-009892-A Concurrent / Consecutive to Each Count / Case(s)			COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO	1	741297 - MISC3001 (MF) VIOLATION OF PRETRIAL RELEASE CONDITION				PLEA: G NC NG WPNG WST W/JTR CHOP VOP: Admit Deny DISM In Violation: Y N CONT REVK REIN SACO MOD TERM: S U VERDICT: ACQT G NG DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU Incompetent to Proceed Competent to Proceed ☐ Order to be Prepared COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By: Time served Suspended upon: _____ PROB: _____ Months Report w/in: _____ CSH: _____ hrs @ _____ / month May Buy _____ @ \$ _____ / hour CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW) No Return to Offense Location (NRTOL) FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____ REST: \$ _____ To Pay Date _____ May Convert Court Cost to Community Service Hours (MAYC) CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST LICENSE: D6 Set Aside D6 CONTINUE: Hearing Type: _____ Date: _____ Time: _____
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO									
1	741297 - MISC3001 (MF) VIOLATION OF PRETRIAL RELEASE CONDITION												

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)

☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)

☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)

☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)

☐ IN JAIL PROGRAM (CIJAMP)

☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

☐ Defendant: GELPI, YARELIS Address: 11803 MOUNTAIN RETREAT LN, RIVERVIEW, FL 33569-5691 Interpreter: Y N Language: DOB: 11/18/1993 Gender: Female Race: White DL: FL-G229244492000 Alias:	Warrant: Date of Offense: 08/08/2026 Date of Arrest: 08/08/2026 Charging Document Date: SOID: 01016671, 1016671 In Custody: NO Booking No: 2026-27664	Bond Out Date: 08/10/2026 BNDADD Bond Type: SURETY Bond Amount: \$1,000.00 Bond Company: PATSYS BAIL BONDS, LLC. Cash Bond Depositor:										
PD APP / UNAPP /WDRAW PA APD RC MATASSINI , NICHOLAS GIANNI ACA ASA WITNESS: ISSUING AGENCY: SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS: <table><thead><tr><th>COUNT</th><th>OFFENSE DESCRIPTION</th><th>CITATION #</th><th>PLEA</th><th>DISPO</th></tr></thead><tbody><tr><td>1</td><td>784031 - DVST0003 (MF) DOMESTIC BATTERY</td><td></td><td>WPNG</td><td></td></tr></tbody></table> SPEED: BAC LEVEL: ☐ Stipulated BAC Below .15 FUTURE HEARINGS: PENDING CASES: Concurrent / Consecutive to Each Count / Case(s)		COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO	1	784031 - DVST0003 (MF) DOMESTIC BATTERY		WPNG		PLEA: G NC NG WPNG WST W/JTR CHOP VOP: Admit Deny DISM In Violation: Y N CONT REVK REIN SACO MOD TERM: S U VERDICT: ACQT G NG DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU Incompetent to Proceed Competent to Proceed ☐ Order to be Prepared COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By: Time served Suspended upon: _____ PROB: _____ Months Report w/in: _____ CSH: _____ hrs @ _____ / month May Buy _____ @ \$ _____ / hour CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW) No Return to Offense Location (NRTOL) FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____ REST: \$ _____ To Pay Date _____ May Convert Court Cost to Community Service Hours (MAYC) CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST LICENSE: D6 Set Aside D6 CONTINUE: Hearing Type: _____ Date: _____ Time: _____
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO								
1	784031 - DVST0003 (MF) DOMESTIC BATTERY		WPNG									

SENTENCING PROVISIONS:

☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)	☐ NO FIREARMS OR WEAPONS (NOWF)
☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)	☐ STAY AWAY FROM OFFENSE LOCATION (STFR)
☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)	☐ NO ALCOHOL (NOAL)
☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)	☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)	ENROLL W/IN _____ DAYS
☐ IN JAIL PROGRAM (CIJAMP)	☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)
☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)	☐ IGNITION INTERLOCK (IGLOCK)
☐ IN JAIL PROGRAM (CIJDP)	_____ MONTHS
☐ COMPLETE PETIT THEFT SCHOOL (CPTS)	☐ VEHICLE IMMOBILIZATION (VEIMM)
☐ ENROLL W/IN _____ DAYS	_____ DAYS
☐ BATTERERS INTERVENTION PROGRAM (CBIP)	☐ DRIVERS LICENSE REVOCATION (DLREV)
☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)	_____ MONTHS / YEARS
☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)	☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
☐ GPS / SOBERTRACK PRIOR TO RELEASE	_____ HOURS
☐ HCSO ☐ PRIVATE	☐ NO OBJECTION TO APPLY FOR HARSHIP LICENSE FOR WORK PURPOSE (NOHLWP)
☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____	☐ DO NOT DRIVE W/OUT VALID DL (DND)
☐ MAY PETITION FOR EARLY TERM (MPETERM) _____	☐ DO NOT DRIVE (DNDV)
☐ NO EARLY TERMINATION OF PROBATION (NETM)	

☐ Defendant: GOMEZ, SAMANTHA K Address: 703 E CLAY AVE, BRANDON, FL 33510 Interpreter: Y N Language: DOB: 12/9/1987 Gender: Female Race: White DL: FL-G215513288000 Alias: GOMEZ, SAMANTHA	Warrant: Date of Offense: 08/10/2026 Date of Arrest: 08/10/2026 Charging Document Date: SOID: 00596988 In Custody: NO Booking No: 2026-27863	Bond Out Date: 08/12/2026 BNDADD Bond Type: SURETY Bond Amount: \$1,000.00 Bond Company: AARON'S BAIL BONDS, INC. Cash Bond Depositor:
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PD APP / UNAPP /WDRAW PA APD RC DEFENDER, PUBLIC ACA ASA WITNESS: ISSUING AGENCY: SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS: <table><tr><th>COUNT</th><th>OFFENSE DESCRIPTION</th><th>CITATION #</th><th>PLEA</th><th>DISPO</th></tr><tr><td>1</td><td>784031 - DVST0003 (MF) DOMESTIC BATTERY</td><td></td><td></td><td></td></tr></table> SPEED: BAC LEVEL: ☐ Stipulated BAC Below .15 FUTURE HEARINGS: PENDING CASES: Concurrent / Consecutive to Each Count / Case(s)	COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO	1	784031 - DVST0003 (MF) DOMESTIC BATTERY				PLEA: G NC NG WPNG WST W/JTR CHOP VOP: Admit Deny DISM In Violation: Y N CONT REVK REIN SACO MOD TERM: S U VERDICT: ACQT G NG DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU Incompetent to Proceed Competent to Proceed ☐ Order to be Prepared COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By: Time served Suspended upon:_____ PROB: _____ Months Report w/in:_____ CSH: _____ hrs @ _____ / month May Buy _____ @ \$ _____ / hour CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW) No Return to Offense Location (NRTOL) FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____ REST: \$ _____ To Pay Date _____ May Convert Court Cost to Community Service Hours (MAYC) CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST LICENSE: D6 Set Aside D6 CONTINUE: Hearing Type: _____ Date: _____ Time: _____
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO							
1	784031 - DVST0003 (MF) DOMESTIC BATTERY										

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)

☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)

☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)

☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)

☐ IN JAIL PROGRAM (CIJAMP)

☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

☐ Defendant: GRIFFIN, ALECZANDRIA JAYCE'ANN Address: 10811 ARMITAGE DR, SEFFNER, FL 33584 Interpreter: Y N Language: DOB: 12/1/2003 Gender: Female Race: White DL: FL-G615010039410 Alias: GRIFFIN, ALECZANDRIA JAYCEANN	Warrant: Date of Offense: 08/05/2026 Date of Arrest: 08/05/2026 Charging Document Date: SOID: 01016518 In Custody: NO Booking No: 2026-27227	Bond Out Date: 08/06/2026 BNDADD Bond Type: SURETY Bond Amount: \$1,000.00 Bond Company: A-1 RAPID RELEASE BAIL BONDS, INC. Cash Bond Depositor:
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PD APP / UNAPP /WDRAW PA APD RC DEFENDER, PUBLIC ACA ASA	PLEA: G NC NG WPNG WST W/JTR CHOP
WITNESS:	VOP: Admit Deny DISM In Violation: Y N
SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS:	CONT REVK REIN SACO MOD TERM: S U
COUNT OFFENSE DESCRIPTION CITATION # PLEA DISPO	VERDICT: ACQT G NG
1 784031 - DVST0003 (MF) DOMESTIC BATTERY	DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU
SPEED:	Incompetent to Proceed Competent to Proceed
BAC LEVEL:	☐ Order to be Prepared
☐ Stipulated BAC Below .15	COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By:
FUTURE HEARINGS:	Time served Suspended upon: _____
PENDING CASES:	PROB: _____ Months Report w/in: _____
Concurrent / Consecutive to Each Count / Case(s)	CSH: _____ hrs @ _____ / month
	May Buy _____ @ \$ _____ / hour
	CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW)
	No Return to Offense Location (NRTOL)
	FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____
	REST: \$ _____ To Pay Date _____
	May Convert Court Cost to Community Service Hours (MAYC)
	CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST
	LICENSE: D6 Set Aside D6
	CONTINUE: Hearing Type: _____ Date: _____ Time: _____

SENTENCING PROVISIONS:

☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)	☐ NO FIREARMS OR WEAPONS (NOWF)
☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)	☐ STAY AWAY FROM OFFENSE LOCATION (STFR)
☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)	☐ NO ALCOHOL (NOAL)
☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)	☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)	ENROLL W/IN _____ DAYS
☐ IN JAIL PROGRAM (CIJAMP)	☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)
☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)	☐ IGNITION INTERLOCK (IGLOCK)
☐ IN JAIL PROGRAM (CIJDP)	_____ MONTHS
☐ COMPLETE PETIT THEFT SCHOOL (CPTS)	☐ VEHICLE IMMOBILIZATION (VEIMM)
☐ ENROLL W/IN _____ DAYS	_____ DAYS
☐ BATTERERS INTERVENTION PROGRAM (CBIP)	☐ DRIVERS LICENSE REVOCATION (DLREV)
☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)	_____ MONTHS / YEARS
☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)	☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
☐ GPS / SOBERTRACK PRIOR TO RELEASE	_____ HOURS
☐ HCSO ☐ PRIVATE	☐ NO OBJECTION TO APPLY FOR HARSHIP LICENSE FOR WORK PURPOSE (NOHLWP)
☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____	☐ DO NOT DRIVE W/OUT VALID DL (DND)
☐ MAY PETITION FOR EARLY TERM (MPETERM) _____	☐ DO NOT DRIVE (DNDV)
☐ NO EARLY TERMINATION OF PROBATION (NETM)	

☐ Defendant: HAMLET, VERONICA Address: 4225 E EMMA ST, TAMPA, FL 33610 Interpreter: Y N Language: DOB: 5/2/1988 Gender: Female Race: White DL: FL-H543843018336 Alias:	Warrant: Date of Offense: 09/09/2024 Date of Arrest: 07/17/2026 Charging Document Date: 12/11/2024 SOID: 00953796 In Custody: NO Booking No:	Bond Out Date: 07/17/2026 BNDADD Bond Type: CASH Bond Amount: \$1,000.00 Bond Company: Cash Bond Depositor: COTTO, LUZ
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PD APP / UNAPP /WDRAW PA APD RC ACA ASA BRAZZALE , CARMELLA MARIE WITNESS: ISSUING AGENCY: SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS: <table><tr><th>COUNT</th><th>OFFENSE DESCRIPTION</th><th>CITATION #</th><th>PLEA</th><th>DISPO</th></tr><tr><td>1</td><td>784031 - DVST0001 (MF) BATTERY</td><td></td><td></td><td></td></tr></table> SPEED: BAC LEVEL: ☐ Stipulated BAC Below .15 FUTURE HEARINGS: PENDING CASES: Concurrent / Consecutive to Each Count / Case(s)	COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO	1	784031 - DVST0001 (MF) BATTERY				PLEA: G NC NG WPNG WST W/JTR CHOP VOP: Admit Deny DISM In Violation: Y N CONT REVK REIN SACO MOD TERM: S U VERDICT: ACQT G NG DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU Incompetent to Proceed Competent to Proceed ☐ Order to be Prepared COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By: Time served Suspended upon:_____ PROB: _____ Months Report w/in:_____ CSH: _____ hrs @ _____ / month May Buy _____ @ \$ _____ / hour CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW) No Return to Offense Location (NRTOL) FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____ REST: \$ _____ To Pay Date _____ May Convert Court Cost to Community Service Hours (MAYC) CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST LICENSE: D6 Set Aside D6 CONTINUE: Hearing Type: _____ Date: _____ Time: _____
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO							
1	784031 - DVST0001 (MF) BATTERY										

SENTENCING PROVISIONS:

☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)	☐ NO FIREARMS OR WEAPONS (NOWF)
☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)	☐ STAY AWAY FROM OFFENSE LOCATION (STFR)
☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)	☐ NO ALCOHOL (NOAL)
☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)	☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)	☐ ENROLL W/IN _____ DAYS
☐ ☐ IN JAIL PROGRAM (CIJAMP)	☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)
☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)	☐ IGNITION INTERLOCK (IGLOCK)
☐ ☐ IN JAIL PROGRAM (CIJDP)	☐ _____ MONTHS
☐ COMPLETE PETIT THEFT SCHOOL (CPTS)	☐ VEHICLE IMMOBILIZATION (VEIMM)
☐ ☐ ENROLL W/IN _____ DAYS	☐ _____ DAYS
☐ BATTERERS INTERVENTION PROGRAM (CBIP)	☐ DRIVERS LICENSE REVOCATION (DLREV)
☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)	☐ _____ MONTHS / YEARS
☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)	☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
☐ GPS / SOBERTRACK PRIOR TO RELEASE	☐ _____ HOURS
☐ ☐ HCSO ☐ PRIVATE	☐ NO OBJECTION TO APPLY FOR HARSHIP LICENSE FOR WORK PURPOSE (NOHLWP)
☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____	☐ DO NOT DRIVE W/OUT VALID DL (DND)
☐ MAY PETITION FOR EARLY TERM (MPETERM) _____	☐ DO NOT DRIVE (DNDV)
☐ NO EARLY TERMINATION OF PROBATION (NETM)	

☐ Defendant: HAMPTON, VONTRILLA MONIQUE Address: 1314 W SLIGH AVE #1201, TAMPA, FL 33604 Interpreter: Y N Language: DOB: 2/16/1991 Gender: Female Race: Black DL: FL-H227396660000 Alias:	Warrant: Date of Offense: 08/08/2026 Date of Arrest: 08/08/2026 Charging Document Date: SOID: 01016652 In Custody: NO Booking No: 2026-27623	Bond Out Date: 08/09/2026 BNDADD Bond Type: SURETY Bond Amount: \$1,000.00 Bond Company: ROCHE BAIL BONDS, INC. Cash Bond Depositor:										
PD APP / UNAPP /WDRAW PA APD RC DEFENDER, PUBLIC ACA ASA WITNESS: ISSUING AGENCY: SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS: <table><thead><tr><th>COUNT</th><th>OFFENSE DESCRIPTION</th><th>CITATION #</th><th>PLEA</th><th>DISPO</th></tr></thead><tbody><tr><td>1</td><td>784031 - DVST0003 (MF) DOMESTIC BATTERY</td><td></td><td></td><td></td></tr></tbody></table> SPEED: BAC LEVEL: ☐ Stipulated BAC Below .15 FUTURE HEARINGS: PENDING CASES: 14-TR-045983 Concurrent / Consecutive to Each Count / Case(s)		COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO	1	784031 - DVST0003 (MF) DOMESTIC BATTERY				PLEA: G NC NG WPNG WST W/JTR CHOP VOP: Admit Deny DISM In Violation: Y N CONT REVK REIN SACO MOD TERM: S U VERDICT: ACQT G NG DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU Incompetent to Proceed Competent to Proceed ☐ Order to be Prepared COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By: Time served Suspended upon: _____ PROB: _____ Months Report w/in: _____ CSH: _____ hrs @ _____ / month May Buy _____ @ \$ _____ / hour CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW) No Return to Offense Location (NRTOL) FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____ REST: \$ _____ To Pay Date _____ May Convert Court Cost to Community Service Hours (MAYC) CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST LICENSE: D6 Set Aside D6 CONTINUE: Hearing Type: _____ Date: _____ Time: _____
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO								
1	784031 - DVST0003 (MF) DOMESTIC BATTERY											

SENTENCING PROVISIONS:

☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)	☐ NO FIREARMS OR WEAPONS (NOWF)
☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)	☐ STAY AWAY FROM OFFENSE LOCATION (STFR)
☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)	☐ NO ALCOHOL (NOAL)
☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)	☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)	ENROLL W/IN _____ DAYS
☐ IN JAIL PROGRAM (CIJAMP)	☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)
☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)	☐ IGNITION INTERLOCK (IGLOCK)
☐ IN JAIL PROGRAM (CIJDP)	_____ MONTHS
☐ COMPLETE PETIT THEFT SCHOOL (CPTS)	☐ VEHICLE IMMOBILIZATION (VEIMM)
☐ ENROLL W/IN _____ DAYS	_____ DAYS
☐ BATTERERS INTERVENTION PROGRAM (CBIP)	☐ DRIVERS LICENSE REVOCATION (DLREV)
☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)	_____ MONTHS / YEARS
☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)	☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
☐ GPS / SOBERTRACK PRIOR TO RELEASE	_____ HOURS
☐ HCSO ☐ PRIVATE	☐ NO OBJECTION TO APPLY FOR HARSHIP LICENSE FOR WORK PURPOSE (NOHLWP)
☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____	☐ DO NOT DRIVE W/OUT VALID DL (DND)
☐ MAY PETITION FOR EARLY TERM (MPETERM) _____	☐ DO NOT DRIVE (DNDV)
☐ NO EARLY TERMINATION OF PROBATION (NETM)	

☐ Defendant: HANSEN, PATRICK DAVID Address: 620 EAST BROCK AVENUE B5, BONIFAY, FL 32425 Interpreter: Y N Language: DOB: 12/29/1987 Gender: Male Race: White DL: FL-H525664874690 Alias:			Warrant: Date of Offense: 07/28/2026 Date of Arrest: 08/05/2026 Charging Document Date: SOID: 01016494 In Custody: NO Booking No: 2026-27138			Bond Out Date: 08/06/2026 BNDADD Bond Type: SURETY Bond Amount: \$500.00 Bond Company: ROCHE BAIL BONDS, INC. Cash Bond Depositor:		
PD APP / UNAPP /WDRAW PA APD RC DEFENDER, PUBLIC ACA ASA WITNESS: ISSUING AGENCY: SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS: COUNT OFFENSE DESCRIPTION CITATION # PLEA DISPO 1 784031 - DVST0003 (MF) DOMESTIC BATTERY SPEED: BAC LEVEL: ☐ Stipulated BAC Below .15 FUTURE HEARINGS: PENDING CASES: Concurrent / Consecutive to Each Count / Case(s)			PLEA: G NC NG WPNG WST W/JTR CHOP VOP: Admit Deny DISM In Violation: Y N CONT REVK REIN SACO MOD TERM: S U VERDICT: ACQT G NG DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU Incompetent to Proceed Competent to Proceed ☐ Order to be Prepared COJA / SRCJ: Days/Months W/Credit Days Followed By: Time served Suspended upon: PROB: Months Report w/in: CSH: hrs @ / month May Buy @ \$ / hour CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW) No Return to Offense Location (NRTOL) FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ REST: \$ To Pay Date May Convert Court Cost to Community Service Hours (MAYC) CAPIAS: \$ EST RECALL CAPIAS Set Aside EST LICENSE: D6 Set Aside D6 CONTINUE: Hearing Type: Date: Time:					

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)

☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)

☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)

☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)

☐ IN JAIL PROGRAM (CIJAMP)

☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

☐ Defendant: HARRISON, ASHLEY CHERVON Address: 8407 N SEMMES ST, TAMPA, FL 33604 Interpreter: Y N Language: DOB: 12/23/1987 Gender: Female Race: Black DL: FL-Y520003879630 Alias: YOUNG, ASHLEY	Warrant: Date of Offense: 08/01/2026 Date of Arrest: 08/09/2026 Charging Document Date: SOID: 00622793 In Custody: NO Booking No: 2026-27763	Bond Out Date: 08/10/2026 BNDADD Bond Type: SURETY Bond Amount: \$1,000.00 Bond Company: ROCHE BAIL BONDS, INC. Cash Bond Depositor:
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PD APP / UNAPP /WDRAW PA APD RC DEFENDER, PUBLIC ACA ASA	PLEA: G NC NG WPNG WST W/JTR CHOP										
WITNESS: ISSUING AGENCY:	VOP: Admit Deny DISM In Violation: Y N										
SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS:	CONT REVK REIN SACO MOD TERM: S U										
<table><tr><th>COUNT</th><th>OFFENSE DESCRIPTION</th><th>CITATION #</th><th>PLEA</th><th>DISPO</th></tr><tr><td>1</td><td>784031 - DVST0003 (MF) DOMESTIC BATTERY</td><td></td><td></td><td></td></tr></table>	COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO	1	784031 - DVST0003 (MF) DOMESTIC BATTERY				VERDICT: ACQT G NG
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO							
1	784031 - DVST0003 (MF) DOMESTIC BATTERY										
SPEED:	DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU										
BAC LEVEL:	Incompetent to Proceed Competent to Proceed										
☐ Stipulated BAC Below .15	☐ Order to be Prepared										
FUTURE HEARINGS:	COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By:										
PENDING CASES:	Time served Suspended upon: _____										
Concurrent / Consecutive to Each Count / Case(s)	PROB: _____ Months Report w/in: _____										
	CSH: _____ hrs @ _____ / month										
	May Buy _____ @ \$ _____ / hour										
	CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW)										
	No Return to Offense Location (NRTOL)										
	FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____										
	REST: \$ _____ To Pay Date _____										
	May Convert Court Cost to Community Service Hours (MAYC)										
	CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST										
	LICENSE: D6 Set Aside D6										
	CONTINUE: Hearing Type: _____ Date: _____ Time: _____										

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)

☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)

☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)

☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)

☐ IN JAIL PROGRAM (CIJAMP)

☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO

☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____

ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)

_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)

_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)

_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)

_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARSHIP LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

☐ Defendant: HERON, JASMINE ANN Address: 8606 PAMELA PL, TAMPA, FL 33584 Interpreter: Y N Language: DOB: 8/28/1989 Gender: Female Race: Black DL: FL-H217314617000 Alias:	Warrant: Date of Offense: 08/06/2026 Date of Arrest: 08/06/2026 Charging Document Date: SOID: 00885367 In Custody: NO Booking No: 2026-27350	Bond Out Date: 08/07/2026 BNDADD Bond Type: SURETY Bond Amount: \$100.00 Bond Company: HILLSBOROUGH COUNTY BAIL BONDS, INC Cash Bond Depositor:										
PD APP / UNAPP /WDRAW PA APD RC DEFENDER, PUBLIC ACA ASA WITNESS: ISSUING AGENCY: SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS: <table><thead><tr><th>COUNT</th><th>OFFENSE DESCRIPTION</th><th>CITATION #</th><th>PLEA</th><th>DISPO</th></tr></thead><tbody><tr><td>1</td><td>7840112 - ASSA0999 (MS) ASSAULT</td><td></td><td></td><td></td></tr></tbody></table> SPEED: BAC LEVEL: ☐ Stipulated BAC Below .15 FUTURE HEARINGS: PENDING CASES: Concurrent / Consecutive to Each Count / Case(s)		COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO	1	7840112 - ASSA0999 (MS) ASSAULT				PLEA: G NC NG WPNG WST W/JTR CHOP VOP: Admit Deny DISM In Violation: Y N CONT REVK REIN SACO MOD TERM: S U VERDICT: ACQT G NG DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU Incompetent to Proceed Competent to Proceed ☐ Order to be Prepared COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By: Time served Suspended upon: _____ PROB: _____ Months Report w/in: _____ CSH: _____ hrs @ _____ / month May Buy _____ @ \$ _____ / hour CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW) No Return to Offense Location (NRTOL) FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____ REST: \$ _____ To Pay Date _____ May Convert Court Cost to Community Service Hours (MAYC) CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST LICENSE: D6 Set Aside D6 CONTINUE: Hearing Type: _____ Date: _____ Time: _____
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO								
1	7840112 - ASSA0999 (MS) ASSAULT											

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)

☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)

☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)

☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)

☐ IN JAIL PROGRAM (CIJAMP)

☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

☐ Defendant: HOLLIS, SERGIO MENDEZ Address: 9017 WESTCHESTER CIR #A, TAMPA, FL 33604 Interpreter: Y N Language: DOB: 5/20/2005 Gender: Male Race: Black DL: FL-H420793051800 Alias:	Warrant: Date of Offense: 08/07/2026 Date of Arrest: 08/07/2026 Charging Document Date: SOID: 00970835, J0096125 In Custody: YES Booking No: 2026-27494	Bond Out Date: BNDADD Bond Type: Bond Amount: Bond Company: Cash Bond Depositor:
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PD APP / UNAPP /WDRAW PA APD RC DEFENDER, PUBLIC ACA ASA	PLEA: G NC NG WPNG WST W/JTR CHOP
WITNESS:	VOP: Admit Deny DISM In Violation: Y N
SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS:	CONT REVK REIN SACO MOD TERM: S U
COUNT OFFENSE DESCRIPTION CITATION # PLEA DISPO	VERDICT: ACQT G NG
1 784031 - DVST0003 (MF) DOMESTIC BATTERY	DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU
SPEED:	Incompetent to Proceed Competent to Proceed
BAC LEVEL:	☐ Order to be Prepared
☐ Stipulated BAC Below .15	COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By:
FUTURE HEARINGS:	Time served Suspended upon: _____
PENDING CASES:	PROB: _____ Months Report w/in: _____
26-CF-014306-A	CSH: _____ hrs @ _____ / month
Concurrent / Consecutive to Each Count / Case(s)	May Buy _____ @ \$ _____ / hour
	CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW)
	No Return to Offense Location (NRTOL)
	FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____
	REST: \$ _____ To Pay Date _____
	May Convert Court Cost to Community Service Hours (MAYC)
	CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST
	LICENSE: D6 Set Aside D6
	CONTINUE: Hearing Type: _____ Date: _____ Time: _____

SENTENCING PROVISIONS:

☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)	☐ NO FIREARMS OR WEAPONS (NOWF)
☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)	☐ STAY AWAY FROM OFFENSE LOCATION (STFR)
☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)	☐ NO ALCOHOL (NOAL)
☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)	☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)	☐ ENROLL W/IN _____ DAYS
☐ ☐ IN JAIL PROGRAM (CIJAMP)	☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)
☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)	☐ IGNITION INTERLOCK (IGLOCK)
☐ ☐ IN JAIL PROGRAM (CIJDP)	☐ _____ MONTHS
☐ COMPLETE PETIT THEFT SCHOOL (CPTS)	☐ VEHICLE IMMOBILIZATION (VEIMM)
☐ ☐ ENROLL W/IN _____ DAYS	☐ _____ DAYS
☐ BATTERERS INTERVENTION PROGRAM (CBIP)	☐ DRIVERS LICENSE REVOCATION (DLREV)
☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)	☐ _____ MONTHS / YEARS
☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)	☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
☐ GPS / SOBERTRACK PRIOR TO RELEASE	☐ _____ HOURS
☐ ☐ HCSO ☐ PRIVATE	☐ NO OBJECTION TO APPLY FOR HARSHIP LICENSE FOR WORK PURPOSE (NOHLWP)
☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____	☐ DO NOT DRIVE W/OUT VALID DL (DND)
☐ MAY PETITION FOR EARLY TERM (MPETERM) _____	☐ DO NOT DRIVE (DNDV)
☐ NO EARLY TERMINATION OF PROBATION (NETM)	

☐ Defendant: HOPSON, FABIAN GEORGE Address: 6413 RIVERBEND CIRCLE, TAMPA, FL 33610 Interpreter: Y N Language: DOB: 10/16/1985 Gender: Male Race: Black DL: FL-H125247853760 Alias: HOPSON, FABIAN G	Warrant: Date of Offense: 06/12/2026 Date of Arrest: 08/03/2026 Charging Document Date: SOID: 00615350 In Custody: NO Booking No: 2026-26980	Bond Out Date: 08/08/2026 BNDADD Bond Type: SURETY Bond Amount: \$2,500.00 Bond Company: PATSYS BAIL BONDS, LLC. Cash Bond Depositor:
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PD APP / UNAPP /WDRAW PA APD RC DEFENDER, PUBLIC ACA ASA	PLEA: G NC NG WPNG WST W/JTR CHOP
WITNESS:	VOP: Admit Deny DISM In Violation: Y N
	CONT REVK REIN SACO MOD TERM: S U
SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS:	VERDICT: ACQT G NG
	DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU
	Incompetent to Proceed Competent to Proceed
	☐ Order to be Prepared
	COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By:
	Time served Suspended upon: _____
	PROB: _____ Months Report w/in: _____
	CSH: _____ hrs @ _____ / month
	May Buy _____ @ \$ _____ / hour
	CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW)
	No Return to Offense Location (NRTOL)
	FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____
	REST: \$ _____ To Pay Date _____
	May Convert Court Cost to Community Service Hours (MAYC)
	CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST
	LICENSE: D6 Set Aside D6
	CONTINUE: Hearing Type: _____ Date: _____ Time: _____

Concurrent / Consecutive to Each Count / Case(s)

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)

☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)

☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)

☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)

☐ IN JAIL PROGRAM (CIJAMP)

☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

☐ Defendant: HOPSON, FABIAN GEORGE Address: 5011 SUNRIDGE PALMS DR #203, TAMPA, FL 33617 Interpreter: Y N Language: DOB: 10/16/1985 Gender: Male Race: Black DL: FL-H125247853760 Alias: HOPSON, FABIAN G	Warrant: Date of Offense: 08/07/2026 Date of Arrest: 08/07/2026 Charging Document Date: SOID: 00615350 In Custody: NO Booking No: 2026-26980	Bond Out Date: 08/08/2026 BNDADD Bond Type: ROR Bond Amount: Bond Company: Cash Bond Depositor:
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PD APP / UNAPP /WDRAW PA APD RC DEFENDER, PUBLIC ACA ASA	PLEA: G NC NG WPNG WST W/JTR CHOP
WITNESS: ISSUING AGENCY:	VOP: Admit Deny DISM In Violation: Y N
SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS:	CONT REVK REIN SACO MOD TERM: S U
COUNT OFFENSE DESCRIPTION CITATION # PLEA DISPO	VERDICT: ACQT G NG
1 741297 - MISC3001 (MF) VIOLATION OF PRETRIAL RELEASE CONDITION	DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU
SPEED:	Incompetent to Proceed Competent to Proceed
BAC LEVEL:	☐ Order to be Prepared
☐ Stipulated BAC Below .15	COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By:
FUTURE HEARINGS:	Time served Suspended upon: _____
PENDING CASES:	PROB: _____ Months Report w/in: _____
26-TR-050980	CSH: _____ hrs @ _____ / month
Concurrent / Consecutive to Each Count / Case(s)	May Buy _____ @ \$ _____ / hour
	CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW)
	No Return to Offense Location (NRTOL)
	FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____
	REST: \$ _____ To Pay Date _____
	May Convert Court Cost to Community Service Hours (MAYC)
	CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST
	LICENSE: D6 Set Aside D6
	CONTINUE: Hearing Type: _____ Date: _____ Time: _____

SENTENCING PROVISIONS:

☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)	☐ NO FIREARMS OR WEAPONS (NOWF)
☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)	☐ STAY AWAY FROM OFFENSE LOCATION (STFR)
☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)	☐ NO ALCOHOL (NOAL)
☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)	☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)	ENROLL W/IN _____ DAYS
☐ IN JAIL PROGRAM (CIJAMP)	☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)
☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)	☐ IGNITION INTERLOCK (IGLOCK)
☐ IN JAIL PROGRAM (CIJDP)	_____ MONTHS
☐ COMPLETE PETIT THEFT SCHOOL (CPTS)	☐ VEHICLE IMMOBILIZATION (VEIMM)
☐ ENROLL W/IN _____ DAYS	_____ DAYS
☐ BATTERERS INTERVENTION PROGRAM (CBIP)	☐ DRIVERS LICENSE REVOCATION (DLREV)
☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)	_____ MONTHS / YEARS
☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)	☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
☐ GPS / SOBERTRACK PRIOR TO RELEASE	_____ HOURS
☐ HCSO ☐ PRIVATE	☐ NO OBJECTION TO APPLY FOR HARSHIP LICENSE FOR WORK PURPOSE (NOHLWP)
☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____	☐ DO NOT DRIVE W/OUT VALID DL (DND)
☐ MAY PETITION FOR EARLY TERM (MPETERM) _____	☐ DO NOT DRIVE (DNDV)
☐ NO EARLY TERMINATION OF PROBATION (NETM)	

☐ Defendant: HORNE, CHRISTIAN REED Address: 2551 ARBORWOOD DR, VALRICO, FL 33596 Interpreter: Y N Language: DOB: 9/25/1992 Gender: Male Race: White DL: FL-H650116923450 Alias:	Warrant: Date of Offense: 08/10/2026 Date of Arrest: 08/10/2026 Charging Document Date: SOID: 01016756 In Custody: NO Booking No: 2026-27860	Bond Out Date: 08/11/2026 BNDADD Bond Type: CASH Bond Amount: \$1,000.00 Bond Company: Cash Bond Depositor: HORNE, KATHERINE E										
PD APP / UNAPP /WDRAW PA APD RC DEFENDER, PUBLIC ACA ASA WITNESS: ISSUING AGENCY: SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS: <table><thead><tr><th>COUNT</th><th>OFFENSE DESCRIPTION</th><th>CITATION #</th><th>PLEA</th><th>DISPO</th></tr></thead><tbody><tr><td>1</td><td>784031 - DVST0003 (MF) DOMESTIC BATTERY</td><td></td><td></td><td></td></tr></tbody></table> SPEED: BAC LEVEL: ☐ Stipulated BAC Below .15 FUTURE HEARINGS: PENDING CASES: Concurrent / Consecutive to Each Count / Case(s)		COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO	1	784031 - DVST0003 (MF) DOMESTIC BATTERY				PLEA: G NC NG WPNG WST W/JTR CHOP VOP: Admit Deny DISM In Violation: Y N CONT REVK REIN SACO MOD TERM: S U VERDICT: ACQT G NG DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU Incompetent to Proceed Competent to Proceed ☐ Order to be Prepared COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By: Time served Suspended upon:_____ PROB: _____ Months Report w/in:_____ CSH: _____ hrs @ _____ / month May Buy _____ @ \$ _____ / hour CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW) No Return to Offense Location (NRTOL) FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____ REST: \$ _____ To Pay Date _____ May Convert Court Cost to Community Service Hours (MAYC) CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST LICENSE: D6 Set Aside D6 CONTINUE: Hearing Type: _____ Date: _____ Time: _____
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO								
1	784031 - DVST0003 (MF) DOMESTIC BATTERY											

SENTENCING PROVISIONS:

☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)	☐ NO FIREARMS OR WEAPONS (NOWF)
☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)	☐ STAY AWAY FROM OFFENSE LOCATION (STFR)
☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)	☐ NO ALCOHOL (NOAL)
☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)	☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)	ENROLL W/IN _____ DAYS
☐ IN JAIL PROGRAM (CIJAMP)	☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)
☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)	☐ IGNITION INTERLOCK (IGLOCK)
☐ IN JAIL PROGRAM (CIJDP)	_____ MONTHS
☐ COMPLETE PETIT THEFT SCHOOL (CPTS)	☐ VEHICLE IMMOBILIZATION (VEIMM)
☐ ENROLL W/IN _____ DAYS	_____ DAYS
☐ BATTERERS INTERVENTION PROGRAM (CBIP)	☐ DRIVERS LICENSE REVOCATION (DLREV)
☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)	_____ MONTHS / YEARS
☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)	☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
☐ GPS / SOBERTRACK PRIOR TO RELEASE	_____ HOURS
☐ HCSO ☐ PRIVATE	☐ NO OBJECTION TO APPLY FOR HARSHIP LICENSE FOR WORK PURPOSE (NOHLWP)
☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____	☐ DO NOT DRIVE W/OUT VALID DL (DND)
☐ MAY PETITION FOR EARLY TERM (MPETERM) _____	☐ DO NOT DRIVE (DNDV)
☐ NO EARLY TERMINATION OF PROBATION (NETM)	

☐ Defendant: HOWARD, JUWUAN DEONTE Address: 121 HOLLY TREE LN, BRANDON, FL 33511 Interpreter: Y N Language: DOB: 2/14/2000 Gender: Male Race: Black DL: FL-H238797802000 Alias:	Warrant: Date of Offense: 08/07/2026 Date of Arrest: 08/07/2026 Charging Document Date: SOID: 00982963 In Custody: NO Booking No: 2026-27450	Bond Out Date: 08/08/2026 BNDADD Bond Type: SURETY Bond Amount: \$1,000.00 Bond Company: NICKY'S RIVERVIEW BAIL BONDS, LLC. Cash Bond Depositor:										
PD APP / UNAPP /WDRAW PA APD RC DEFENDER, PUBLIC ACA ASA WITNESS: ISSUING AGENCY: SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS: <table><thead><tr><th>COUNT</th><th>OFFENSE DESCRIPTION</th><th>CITATION #</th><th>PLEA</th><th>DISPO</th></tr></thead><tbody><tr><td>1</td><td>784031 - DVST0003 (MF) DOMESTIC BATTERY</td><td></td><td></td><td></td></tr></tbody></table> SPEED: BAC LEVEL: ☐ Stipulated BAC Below .15 FUTURE HEARINGS: PENDING CASES: Concurrent / Consecutive to Each Count / Case(s)		COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO	1	784031 - DVST0003 (MF) DOMESTIC BATTERY				PLEA: G NC NG WPNG WST W/JTR CHOP VOP: Admit Deny DISM In Violation: Y N CONT REVK REIN SACO MOD TERM: S U VERDICT: ACQT G NG DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU Incompetent to Proceed Competent to Proceed ☐ Order to be Prepared COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By: Time served Suspended upon: _____ PROB: _____ Months Report w/in: _____ CSH: _____ hrs @ _____ / month May Buy _____ @ \$ _____ / hour CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW) No Return to Offense Location (NRTOL) FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____ REST: \$ _____ To Pay Date _____ May Convert Court Cost to Community Service Hours (MAYC) CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST LICENSE: D6 Set Aside D6 CONTINUE: Hearing Type: _____ Date: _____ Time: _____
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO								
1	784031 - DVST0003 (MF) DOMESTIC BATTERY											

SENTENCING PROVISIONS:

☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)	☐ NO FIREARMS OR WEAPONS (NOWF)
☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)	☐ STAY AWAY FROM OFFENSE LOCATION (STFR)
☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)	☐ NO ALCOHOL (NOAL)
☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)	☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)	ENROLL W/IN _____ DAYS
☐ IN JAIL PROGRAM (CIJAMP)	☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)
☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)	☐ IGNITION INTERLOCK (IGLOCK)
☐ IN JAIL PROGRAM (CIJDP)	_____ MONTHS
☐ COMPLETE PETIT THEFT SCHOOL (CPTS)	☐ VEHICLE IMMOBILIZATION (VEIMM)
☐ ENROLL W/IN _____ DAYS	_____ DAYS
☐ BATTERERS INTERVENTION PROGRAM (CBIP)	☐ DRIVERS LICENSE REVOCATION (DLREV)
☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)	_____ MONTHS / YEARS
☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)	☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
☐ GPS / SOBERTRACK PRIOR TO RELEASE	_____ HOURS
☐ HCSO ☐ PRIVATE	☐ NO OBJECTION TO APPLY FOR HARSHIP LICENSE FOR WORK PURPOSE (NOHLWP)
☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____	☐ DO NOT DRIVE W/OUT VALID DL (DND)
☐ MAY PETITION FOR EARLY TERM (MPETERM) _____	☐ DO NOT DRIVE (DNDV)
☐ NO EARLY TERMINATION OF PROBATION (NETM)	

☐ Defendant: HUNTER, KENNETH Address: 3633 SUGARCREEK DR, TAMPA, FL 33619 Interpreter: Y N Language: DOB: 11/29/1976 Gender: Male Race: Black DL: FL-H536500764290 Alias: HUNTER, KENNETH; HUNTER, KENNETH J; HUNTER, KENNETH H; HUNTER, KENNETH JR; HUNTER, KENNETH, SR; HUNTERS, KENNETH, JR	Warrant: Date of Offense: 08/08/2026 Date of Arrest: 08/08/2026 Charging Document Date: SOID: 00368748 In Custody: NO Booking No: 2026-27543	Bond Out Date: 08/09/2026 BNDADD Bond Type: SURETY Bond Amount: \$1,000.00 Bond Company: I.T. BAIL BOND CO. Cash Bond Depositor:													
PD APP / UNAPP /WDRAW PA APD RC DEFENDER, PUBLIC ACA ASA WITNESS: ISSUING AGENCY: SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS: <table><thead><tr><th>COUNT</th><th>OFFENSE DESCRIPTION</th><th>CITATION #</th><th>PLEA</th><th>DISPO</th></tr></thead><tbody><tr><td>1</td><td>784031 - DVST0003 (MF) DOMESTIC BATTERY</td><td></td><td></td><td></td></tr></tbody></table> SPEED: BAC LEVEL: ☐ Stipulated BAC Below .15 FUTURE HEARINGS: PENDING CASES: 24-TR-074265, 25-TR-048148, 25-TR-048185, 25-TR-048197, 25-TR-059977 Concurrent / Consecutive to Each Count / Case(s)			COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO	1	784031 - DVST0003 (MF) DOMESTIC BATTERY				PLEA: G NC NG WPNG WST W/JTR CHOP VOP: Admit Deny DISM In Violation: Y N CONT REVK REIN SACO MOD TERM: S U VERDICT: ACQT G NG DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU Incompetent to Proceed Competent to Proceed ☐ Order to be Prepared COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By: Time served Suspended upon: _____ PROB: _____ Months Report w/in: _____ CSH: _____ hrs @ _____ / month May Buy _____ @ \$ _____ / hour CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW) No Return to Offense Location (NRTOL) FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____ REST: \$ _____ To Pay Date _____ May Convert Court Cost to Community Service Hours (MAYC) CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST LICENSE: D6 Set Aside D6 CONTINUE: Hearing Type: _____ Date: _____ Time: _____		
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO											
1	784031 - DVST0003 (MF) DOMESTIC BATTERY														

SENTENCING PROVISIONS:

☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)	☐ NO FIREARMS OR WEAPONS (NOWF)
☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)	☐ STAY AWAY FROM OFFENSE LOCATION (STFR)
☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)	☐ NO ALCOHOL (NOAL)
☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)	☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)	ENROLL W/IN _____ DAYS
☐ IN JAIL PROGRAM (CIJAMP)	☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)
☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)	☐ IGNITION INTERLOCK (IGLOCK)
☐ IN JAIL PROGRAM (CIJDP)	_____ MONTHS
☐ COMPLETE PETIT THEFT SCHOOL (CPTS)	☐ VEHICLE IMMOBILIZATION (VEIMM)
☐ ENROLL W/IN _____ DAYS	_____ DAYS
☐ BATTERERS INTERVENTION PROGRAM (CBIP)	☐ DRIVERS LICENSE REVOCATION (DLREV)
☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)	_____ MONTHS / YEARS
☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)	☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
☐ GPS / SOBERTRACK PRIOR TO RELEASE	_____ HOURS
☐ HCSO ☐ PRIVATE	☐ NO OBJECTION TO APPLY FOR HARDSHIP LICENSE FOR WORK PURPOSE (NOHLWP)
☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____	☐ DO NOT DRIVE W/OUT VALID DL (DND)
☐ MAY PETITION FOR EARLY TERM (MPETERM) _____	☐ DO NOT DRIVE (DNDV)
☐ NO EARLY TERMINATION OF PROBATION (NETM)	

☐ Defendant: JARVIS, SEAN DILLON Address: 13619 TONYA ANNE DR, RIVERVIEW, FL 33579 Interpreter: Y N Language: DOB: 1/9/1983 Gender: Male Race: White DL: FL-J376629640000 Alias:	Warrant: Date of Offense: 08/04/2026 Date of Arrest: 08/04/2026 Charging Document Date: SOID: 01016488 In Custody: NO Booking No: 2026-27125	Bond Out Date: 08/06/2026 BNDADD Bond Type: SURETY Bond Amount: \$500.00 Bond Company: ARMANDO ARCOS BAIL BONDS, INC. Cash Bond Depositor:
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PD APP / UNAPP /WDRAW PA APD RC METCALF , BRETT NICHOLLS; FALLS , JAMES MILES ACA ASA	PLEA: G NC NG WPNG WST W/JTR CHOP
WITNESS: ISSUING AGENCY:	VOP: Admit Deny DISM In Violation: Y N
SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS:	CONT REVK REIN SACO MOD TERM: S U
COUNT OFFENSE DESCRIPTION CITATION # PLEA DISPO	VERDICT: ACQT G NG
1 784031 - DVST0003 (MF) DOMESTIC BATTERY WPNG	DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU
	Incompetent to Proceed Competent to Proceed
	☐ Order to be Prepared
	COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By:
	Time served Suspended upon:_____
SPEED:	PROB: _____ Months Report w/in:_____
BAC LEVEL:	CSH: _____ hrs @ _____ / month
☐ Stipulated BAC Below .15	May Buy _____ @ \$ _____ / hour
FUTURE HEARINGS:	CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW)
	No Return to Offense Location (NRTOL)
PENDING CASES:	FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____
	REST: \$ _____ To Pay Date _____
	May Convert Court Cost to Community Service Hours (MAYC)
	CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST
	LICENSE: D6 Set Aside D6
	CONTINUE: Hearing Type: _____ Date: _____ Time: _____

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)

☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)

☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)

☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)

☐ IN JAIL PROGRAM (CIJAMP)

☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARDSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

☐ Defendant: JENKINS, COLBY Address: 5605 E 29TH AVE, TAMPA, FL 33619 Interpreter: Y N Language: DOB: 6/29/2005 Gender: Male Race: White DL: NC-46476991 Alias:	Warrant: Date of Offense: 08/10/2026 Date of Arrest: 08/10/2026 Charging Document Date: SOID: 01016721, 1016721 In Custody: YES Booking No: 2026-27805	Bond Out Date: 08/11/2026 BNDADD Bond Type: SURETY Bond Amount: \$1,000.00 Bond Company: PATSYS BAIL BONDS, LLC. Cash Bond Depositor:										
PD APP / UNAPP /WDRAW PA APD RC DEFENDER, PUBLIC ACA ASA WITNESS: ISSUING AGENCY: SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS: <table><thead><tr><th>COUNT</th><th>OFFENSE DESCRIPTION</th><th>CITATION #</th><th>PLEA</th><th>DISPO</th></tr></thead><tbody><tr><td>1</td><td>784031 - DVST0003 (MF) DOMESTIC BATTERY</td><td></td><td></td><td></td></tr></tbody></table> SPEED: BAC LEVEL: ☐ Stipulated BAC Below .15 FUTURE HEARINGS: PENDING CASES: 26-CM-009601-A Concurrent / Consecutive to Each Count / Case(s)		COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO	1	784031 - DVST0003 (MF) DOMESTIC BATTERY				PLEA: G NC NG WPNG WST W/JTR CHOP VOP: Admit Deny DISM In Violation: Y N CONT REVK REIN SACO MOD TERM: S U VERDICT: ACQT G NG DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU Incompetent to Proceed Competent to Proceed ☐ Order to be Prepared COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By: Time served Suspended upon: _____ PROB: _____ Months Report w/in: _____ CSH: _____ hrs @ _____ / month May Buy _____ @ \$ _____ / hour CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW) No Return to Offense Location (NRTOL) FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____ REST: \$ _____ To Pay Date _____ May Convert Court Cost to Community Service Hours (MAYC) CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST LICENSE: D6 Set Aside D6 CONTINUE: Hearing Type: _____ Date: _____ Time: _____
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO								
1	784031 - DVST0003 (MF) DOMESTIC BATTERY											

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)

☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)

☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)

☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)

☐ IN JAIL PROGRAM (CIJAMP)

☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

☐ Defendant: KABONA, MARIAM NANFUKA Address: 5719 LAS VENTANAS DR, TAMPA, FL 33617 Interpreter: Y N Language: DOB: 5/15/1985 Gender: Female Race: Black DL: FL-K237411452000 Alias:	Warrant: Date of Offense: 08/07/2026 Date of Arrest: 08/07/2026 Charging Document Date: SOID: 01016615 In Custody: NO Booking No: 2026-27493	Bond Out Date: 08/08/2026 BNDADD Bond Type: SURETY Bond Amount: \$1,000.00 Bond Company: # ONE STOP BAIL BONDS, LLC. Cash Bond Depositor:										
PD APP / UNAPP /WDRAW PA APD RC DEFENDER, PUBLIC ACA ASA WITNESS: ISSUING AGENCY: SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS: <table><thead><tr><th>COUNT</th><th>OFFENSE DESCRIPTION</th><th>CITATION #</th><th>PLEA</th><th>DISPO</th></tr></thead><tbody><tr><td>1</td><td>784031 - DVST0003 (MF) DOMESTIC BATTERY</td><td></td><td></td><td></td></tr></tbody></table> SPEED: BAC LEVEL: ☐ Stipulated BAC Below .15 FUTURE HEARINGS: PENDING CASES: Concurrent / Consecutive to Each Count / Case(s)		COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO	1	784031 - DVST0003 (MF) DOMESTIC BATTERY				PLEA: G NC NG WPNG WST W/JTR CHOP VOP: Admit Deny DISM In Violation: Y N CONT REVK REIN SACO MOD TERM: S U VERDICT: ACQT G NG DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU Incompetent to Proceed Competent to Proceed ☐ Order to be Prepared COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By: Time served Suspended upon:_____ PROB: _____ Months Report w/in:_____ CSH: _____ hrs @ _____ / month May Buy _____ @ \$ _____ / hour CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW) No Return to Offense Location (NRTOL) FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____ REST: \$ _____ To Pay Date _____ May Convert Court Cost to Community Service Hours (MAYC) CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST LICENSE: D6 Set Aside D6 CONTINUE: Hearing Type: _____ Date: _____ Time: _____
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO								
1	784031 - DVST0003 (MF) DOMESTIC BATTERY											

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)

☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)

☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)

☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)

☐ IN JAIL PROGRAM (CIJAMP)

☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

☐ Defendant: KEATING, EDWARD FRANCIS Address: 106 KILMER AVE, CLEARWATER, FL 33765 Interpreter: Y N Language: DOB: 3/10/1988 Gender: Male Race: White DL: FL-K352226880900 Alias: KEATING, EDWARD; KEATING, EDWARD FRANCIS; WICKS, WARD	Warrant: Date of Offense: 07/25/2026 Date of Arrest: 08/05/2026 Charging Document Date: SOID: 00955943 In Custody: YES Booking No: 2026-27129	Bond Out Date: BNDADD Bond Type: Bond Amount: Bond Company: Cash Bond Depositor:
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PD APP / UNAPP /WDRAW PA APD RC DEFENDER, PUBLIC ACA ASA	PLEA: G NC NG WPNG WST W/JTR CHOP										
WITNESS: ISSUING AGENCY:	VOP: Admit Deny DISM In Violation: Y N CONT REVK REIN SACO MOD TERM: S U										
SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS:	VERDICT: ACQT G NG										
<table><tr><th>COUNT</th><th>OFFENSE DESCRIPTION</th><th>CITATION #</th><th>PLEA</th><th>DISPO</th></tr><tr><td>1</td><td>741314A - MISC2240 (MF) VIOLATION OF DOMESTIC VIOLENCE INJUNCTION</td><td></td><td></td><td></td></tr></table>	COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO	1	741314A - MISC2240 (MF) VIOLATION OF DOMESTIC VIOLENCE INJUNCTION				DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU Incompetent to Proceed Competent to Proceed ☐ Order to be Prepared
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO							
1	741314A - MISC2240 (MF) VIOLATION OF DOMESTIC VIOLENCE INJUNCTION										
SPEED:	COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By: _____ Time served Suspended upon: _____										
BAC LEVEL:	PROB: _____ Months Report w/in: _____										
☐ Stipulated BAC Below .15	CSH: _____ hrs @ _____ / month May Buy _____ @ \$ _____ / hour										
FUTURE HEARINGS:	CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW) No Return to Offense Location (NRTOL)										
PENDING CASES:	FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____ REST: \$ _____ To Pay Date _____ May Convert Court Cost to Community Service Hours (MAYC)										
26-CT-011854	CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST										
Concurrent / Consecutive to Each Count / Case(s)	LICENSE: D6 Set Aside D6										
	CONTINUE: Hearing Type: _____ Date: _____ Time: _____										

SENTENCING PROVISIONS:

☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)	☐ NO FIREARMS OR WEAPONS (NOWF)
☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)	☐ STAY AWAY FROM OFFENSE LOCATION (STFR)
☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)	☐ NO ALCOHOL (NOAL)
☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)	☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)	ENROLL W/IN _____ DAYS
☐ IN JAIL PROGRAM (CIJAMP)	☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)
☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)	☐ IGNITION INTERLOCK (IGLOCK)
☐ IN JAIL PROGRAM (CIJDP)	_____ MONTHS
☐ COMPLETE PETIT THEFT SCHOOL (CPTS)	☐ VEHICLE IMMOBILIZATION (VEIMM)
☐ ENROLL W/IN _____ DAYS	_____ DAYS
☐ BATTERERS INTERVENTION PROGRAM (CBIP)	☐ DRIVERS LICENSE REVOCATION (DLREV)
☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)	_____ MONTHS / YEARS
☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)	☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
☐ GPS / SOBERTRACK PRIOR TO RELEASE	_____ HOURS
☐ HCSO ☐ PRIVATE	☐ NO OBJECTION TO APPLY FOR HARSHIP LICENSE FOR WORK PURPOSE (NOHLWP)
☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____	☐ DO NOT DRIVE W/OUT VALID DL (DND)
☐ MAY PETITION FOR EARLY TERM (MPETERM) _____	☐ DO NOT DRIVE (DNDV)
☐ NO EARLY TERMINATION OF PROBATION (NETM)	

☐ Defendant: KNIGHTON, CENNYIA TY'JANAE Address: 8015 DREHER PARK LN #303, TAMPA, FL 33610 Interpreter: Y N Language: DOB: 4/5/2002 Gender: Female Race: Black DL: FL-K523118026250 Alias:	Warrant: Date of Offense: 08/09/2026 Date of Arrest: 08/09/2026 Charging Document Date: SOID: 01016685, 1016685 In Custody: NO Booking No: 2026-27669	Bond Out Date: 08/10/2026 BNDADD Bond Type: SURETY Bond Amount: \$1,000.00 Bond Company: # ONE STOP BAIL BONDS, LLC. Cash Bond Depositor:										
PD APP / UNAPP /WDRAW PA APD RC DEFENDER, PUBLIC ACA ASA WITNESS: ISSUING AGENCY: SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS: <table><thead><tr><th>COUNT</th><th>OFFENSE DESCRIPTION</th><th>CITATION #</th><th>PLEA</th><th>DISPO</th></tr></thead><tbody><tr><td>1</td><td>784031 - DVST0003 (MF) DOMESTIC BATTERY</td><td></td><td></td><td></td></tr></tbody></table> SPEED: BAC LEVEL: ☐ Stipulated BAC Below .15 FUTURE HEARINGS: PENDING CASES: Concurrent / Consecutive to Each Count / Case(s)		COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO	1	784031 - DVST0003 (MF) DOMESTIC BATTERY				PLEA: G NC NG WPNG WST W/JTR CHOP VOP: Admit Deny DISM In Violation: Y N CONT REVK REIN SACO MOD TERM: S U VERDICT: ACQT G NG DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU Incompetent to Proceed Competent to Proceed ☐ Order to be Prepared COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By: Time served Suspended upon: _____ PROB: _____ Months Report w/in: _____ CSH: _____ hrs @ _____ / month May Buy _____ @ \$ _____ / hour CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW) No Return to Offense Location (NRTOL) FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____ REST: \$ _____ To Pay Date _____ May Convert Court Cost to Community Service Hours (MAYC) CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST LICENSE: D6 Set Aside D6 CONTINUE: Hearing Type: _____ Date: _____ Time: _____
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO								
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SENTENCING PROVISIONS:

☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)	☐ NO FIREARMS OR WEAPONS (NOWF)
☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)	☐ STAY AWAY FROM OFFENSE LOCATION (STFR)
☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)	☐ NO ALCOHOL (NOAL)
☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)	☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)	ENROLL W/IN _____ DAYS
☐ IN JAIL PROGRAM (CIJAMP)	☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)
☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)	☐ IGNITION INTERLOCK (IGLOCK)
☐ IN JAIL PROGRAM (CIJDP)	_____ MONTHS
☐ COMPLETE PETIT THEFT SCHOOL (CPTS)	☐ VEHICLE IMMOBILIZATION (VEIMM)
☐ ENROLL W/IN _____ DAYS	_____ DAYS
☐ BATTERERS INTERVENTION PROGRAM (CBIP)	☐ DRIVERS LICENSE REVOCATION (DLREV)
☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)	_____ MONTHS / YEARS
☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)	☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
☐ GPS / SOBERTRACK PRIOR TO RELEASE	_____ HOURS
☐ HCSO ☐ PRIVATE	☐ NO OBJECTION TO APPLY FOR HARDSHIP LICENSE FOR WORK PURPOSE (NOHLWP)
☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____	☐ DO NOT DRIVE W/OUT VALID DL (DND)
☐ MAY PETITION FOR EARLY TERM (MPETERM) _____	☐ DO NOT DRIVE (DNDV)
☐ NO EARLY TERMINATION OF PROBATION (NETM)	

☐ Defendant: LONG, STEVEN Address: 8801 HUNTERS LAKE DR #425, TAMPA, FL 33647 Interpreter: Y N Language: DOB: 1/2/2002 Gender: Male Race: White DL: FL-L520784020020 Alias: LONG, STEVEN DANIEL	Warrant: Date of Offense: 08/02/2025 Date of Arrest: Charging Document Date: 8/3/2026 SOID: 01000506 In Custody: NO Booking No:	Bond Out Date: BNDADD Bond Type: Bond Amount: Bond Company: Cash Bond Depositor:										
PD APP / UNAPP /WDRAW PA APD RC MICHAELS , DINO MIKE ACA ASA OBERT , CAMILLE MARIE WITNESS: ISSUING AGENCY: SET FOR: DIRECT INFORMATION ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS: <table><thead><tr><th>COUNT</th><th>OFFENSE DESCRIPTION</th><th>CITATION #</th><th>PLEA</th><th>DISPO</th></tr></thead><tbody><tr><td>1</td><td>784031 - DVST0003 (MF) DOMESTIC BATTERY</td><td></td><td>WPNG</td><td></td></tr></tbody></table> SPEED: BAC LEVEL: ☐ Stipulated BAC Below .15 FUTURE HEARINGS: PENDING CASES: 25-CF-015192-A, 25-CM-009011-A Concurrent / Consecutive to Each Count / Case(s)		COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO	1	784031 - DVST0003 (MF) DOMESTIC BATTERY		WPNG		PLEA: G NC NG WPNG WST W/JTR CHOP VOP: Admit Deny DISM In Violation: Y N CONT REVK REIN SACO MOD TERM: S U VERDICT: ACQT G NG DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU Incompetent to Proceed Competent to Proceed ☐ Order to be Prepared COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By: Time served Suspended upon:_____ PROB: _____ Months Report w/in:_____ CSH: _____ hrs @ _____ / month May Buy _____ @ \$ _____ / hour CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW) No Return to Offense Location (NRTOL) FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____ REST: \$ _____ To Pay Date_____ May Convert Court Cost to Community Service Hours (MAYC) CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST LICENSE: D6 Set Aside D6 CONTINUE: Hearing Type: _____ Date:_____ Time:_____
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1	784031 - DVST0003 (MF) DOMESTIC BATTERY		WPNG									

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

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☐ IN JAIL PROGRAM (CIJAMP)

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☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

☐ Defendant: NETTLES, ERIN Address: 2418 E 20TH AVE, TAMPA, FL 33605 Interpreter: Y N Language: DOB: 7/9/1978 Gender: Male Race: White DL: FL-N342200782490 Alias:	Warrant: Date of Offense: 08/09/2026 Date of Arrest: 08/09/2026 Charging Document Date: SOID: 00690424 In Custody: YES Booking No: 2026-27744	Bond Out Date: BNDADD Bond Type: Bond Amount: Bond Company: Cash Bond Depositor:										
PD APP / UNAPP /WDRAW PA APD RC DEFENDER, PUBLIC ACA ASA WITNESS: ISSUING AGENCY: SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS: <table><thead><tr><th>COUNT</th><th>OFFENSE DESCRIPTION</th><th>CITATION #</th><th>PLEA</th><th>DISPO</th></tr></thead><tbody><tr><td>1</td><td>784031 - DVST0003 (MF) DOMESTIC BATTERY</td><td></td><td></td><td></td></tr></tbody></table> SPEED: BAC LEVEL: ☐ Stipulated BAC Below .15 FUTURE HEARINGS: PENDING CASES: Concurrent / Consecutive to Each Count / Case(s)		COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO	1	784031 - DVST0003 (MF) DOMESTIC BATTERY				PLEA: G NC NG WPNG WST W/JTR CHOP VOP: Admit Deny DISM In Violation: Y N CONT REVK REIN SACO MOD TERM: S U VERDICT: ACQT G NG DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU Incompetent to Proceed Competent to Proceed ☐ Order to be Prepared COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By: Time served Suspended upon: _____ PROB: _____ Months Report w/in: _____ CSH: _____ hrs @ _____ / month May Buy _____ @ \$ _____ / hour CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW) No Return to Offense Location (NRTOL) FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____ REST: \$ _____ To Pay Date _____ May Convert Court Cost to Community Service Hours (MAYC) CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST LICENSE: D6 Set Aside D6 CONTINUE: Hearing Type: _____ Date: _____ Time: _____
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO								
1	784031 - DVST0003 (MF) DOMESTIC BATTERY											

SENTENCING PROVISIONS:

☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)	☐ NO FIREARMS OR WEAPONS (NOWF)
☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)	☐ STAY AWAY FROM OFFENSE LOCATION (STFR)
☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)	☐ NO ALCOHOL (NOAL)
☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)	☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)	☐ ENROLL W/IN _____ DAYS
☐ IN JAIL PROGRAM (CIJAMP)	☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)
☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)	☐ IGNITION INTERLOCK (IGLOCK)
☐ IN JAIL PROGRAM (CIJDP)	☐ _____ MONTHS
☐ COMPLETE PETIT THEFT SCHOOL (CPTS)	☐ VEHICLE IMMOBILIZATION (VEIMM)
☐ ENROLL W/IN _____ DAYS	☐ _____ DAYS
☐ BATTERERS INTERVENTION PROGRAM (CBIP)	☐ DRIVERS LICENSE REVOCATION (DLREV)
☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)	☐ _____ MONTHS / YEARS
☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)	☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
☐ GPS / SOBERTRACK PRIOR TO RELEASE	☐ _____ HOURS
☐ HCSO ☐ PRIVATE	☐ NO OBJECTION TO APPLY FOR HARSHIP LICENSE FOR WORK PURPOSE (NOHLWP)
☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____	☐ DO NOT DRIVE W/OUT VALID DL (DND)
☐ MAY PETITION FOR EARLY TERM (MPETERM) _____	☐ DO NOT DRIVE (DNDV)
☐ NO EARLY TERMINATION OF PROBATION (NETM)	

☐ Defendant: NORTON, MELISSA ANN Address: 11750 N US HIGHWAY 301 #2, THONOTOSASSA, FL 33592 Interpreter: Y N Language: DOB: 9/5/1970 Gender: Female Race: White DL: FL-N409142050000 Alias: NORTON, MELISSA	Warrant: Date of Offense: 08/07/2026 Date of Arrest: 08/07/2026 Charging Document Date: SOID: 00519011 In Custody: NO Booking No: 2026-27519	Bond Out Date: 08/09/2026 BNDADD Bond Type: SURETY Bond Amount: \$1,000.00 Bond Company: WALK OUT BAIL BONDS, LLC. Cash Bond Depositor:
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PD APP / UNAPP /WDRAW PA APD RC DEFENDER, PUBLIC ACA ASA WITNESS: ISSUING AGENCY: SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS: <table><tr><th>COUNT</th><th>OFFENSE DESCRIPTION</th><th>CITATION #</th><th>PLEA</th><th>DISPO</th></tr><tr><td>1</td><td>784031 - DVST0003 (MF) DOMESTIC BATTERY</td><td></td><td></td><td></td></tr></table> SPEED: BAC LEVEL: ☐ Stipulated BAC Below .15 FUTURE HEARINGS: PENDING CASES: 26-CF-013884-A Concurrent / Consecutive to Each Count / Case(s)	COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO	1	784031 - DVST0003 (MF) DOMESTIC BATTERY				PLEA: G NC NG WPNG WST W/JTR CHOP VOP: Admit Deny DISM In Violation: Y N CONT REVK REIN SACO MOD TERM: S U VERDICT: ACQT G NG DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU Incompetent to Proceed Competent to Proceed ☐ Order to be Prepared COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By: Time served Suspended upon:_____ PROB: _____ Months Report w/in:_____ CSH: _____ hrs @ _____ / month May Buy_____ @ \$ _____ / hour CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW) No Return to Offense Location (NRTOL) FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____ REST: \$ _____ To Pay Date_____ May Convert Court Cost to Community Service Hours (MAYC) CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST LICENSE: D6 Set Aside D6 CONTINUE: Hearing Type: _____ Date:_____ Time:_____
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO							
1	784031 - DVST0003 (MF) DOMESTIC BATTERY										

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)

☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)

☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)

☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)

☐ IN JAIL PROGRAM (CIJAMP)

☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

Defendant: PANICO, DANIEL J Address: 170 ARIZONA AVE, LAKELAND, FL 33801 Interpreter: Y N Language: DOB: 7/5/1989 Gender: Male Race: White DL: FL-P520170892450 Alias:	Warrant: Date of Offense: 08/08/2026 Date of Arrest: 08/08/2026 Charging Document Date: SOID: 01016674 In Custody: YES Booking No: 2026-27646	Bond Out Date: BNDADD Bond Type: Bond Amount: Bond Company: Cash Bond Depositor:									
PD APP / UNAPP /WDRAWPAAPDRCDEFENDER, PUBLICACAASA WITNESS:ISSUING AGENCY: SET FOR:ARRAIGNMENT AT 8:30:00 AMHEARING COMMENTS: <table><thead><tr><th>COUNT</th><th>OFFENSE DESCRIPTION</th><th>CITATION #</th><th>PLEA</th><th>DISPO</th></tr></thead><tbody><tr><td>1</td><td>784031 - DVST0003 (MF) DOMESTIC BATTERY</td><td></td><td></td><td></td></tr></tbody></table> SPEED: BAC LEVEL: Stipulated BAC Below .15 FUTURE HEARINGS: PENDING CASES: Concurrent / Consecutive to Each Count / Case(s)	COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO	1	784031 - DVST0003 (MF) DOMESTIC BATTERY				PLEA:GNCNGWPNGWSTW/JTRCHOP VOP:AdmitDenyDISMIn Violation: YN CONTREVKREINSACOMODTERM:S U VERDICT:ACQTGN DISP:WHAGJDISMNOLPTRDPDVIPMIPRIDRVRU Incompetent to ProceedCompetent to Proceed Order to be Prepared COJA / SRCJ:_____Days/MonthsW/Credit_____DaysFollowed By: Time servedSuspended upon:_____ PROB:_____MonthsReport w/in:_____ CSH:_____hrs @ _____/ month May Buy____@ \$_____/ hour CONTACT:No Contact w/ Victim (NCWW)No Violent Contact w/ Victim (NVCW) No Return to Offense Location (NRTOL) FINANCIAL:MCCICOPPDLIREC CCCLIFine \$ _____ REST: \$ _____To Pay Date_____ May Convert Court Cost to Community Service Hours (MAYC) CAPIAS:\$ _____ESTRECALL CAPIASSet Aside EST LICENSE:D6Set Aside D6 CONTINUE:Hearing Type: _____Date: _____Time: _____
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO							
1	784031 - DVST0003 (MF) DOMESTIC BATTERY										

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)

☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)

☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)

☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)

☐ IN JAIL PROGRAM (CIJAMP)

☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARDSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

☐ Defendant: PILO-GUARCAX, FIDEL Address: 8920 N OLA AVE, TAMPA, FL 33604 Interpreter: Y N Language: DOB: 12/14/1983 Gender: Male Race: White DL: FL-P426240834540 Alias:	Warrant: Date of Offense: 08/08/2026 Date of Arrest: 08/08/2026 Charging Document Date: SOID: 00810123 In Custody: YES Booking No: 2026-27572	Bond Out Date: BNDADD Bond Type: Bond Amount: Bond Company: Cash Bond Depositor:
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PD APP / UNAPP /WDRAW PA APD RC DEFENDER, PUBLIC ACA ASA	PLEA: G NC NG WPNG WST W/JTR CHOP															
WITNESS:	VOP: Admit Deny DISM In Violation: Y N															
SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS:	CONT REVK REIN SACO MOD TERM: S U															
<table><tr><th>COUNT</th><th>OFFENSE DESCRIPTION</th><th>CITATION #</th><th>PLEA</th><th>DISPO</th></tr><tr><td>1</td><td>806131B2-CRMS2000 (MF) CRIMINAL MISCHIEF \$200 TO \$1000</td><td></td><td></td><td></td></tr><tr><td>2</td><td>784031 - DVST0003 (MF) DOMESTIC BATTERY</td><td></td><td></td><td></td></tr></table>	COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO	1	806131B2-CRMS2000 (MF) CRIMINAL MISCHIEF \$200 TO \$1000				2	784031 - DVST0003 (MF) DOMESTIC BATTERY				VERDICT: ACQT G NG
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO												
1	806131B2-CRMS2000 (MF) CRIMINAL MISCHIEF \$200 TO \$1000															
2	784031 - DVST0003 (MF) DOMESTIC BATTERY															
SPEED:	DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU															
BAC LEVEL:	Incompetent to Proceed Competent to Proceed															
☐ Stipulated BAC Below .15	☐ Order to be Prepared															
FUTURE HEARINGS:	COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By:															
PENDING CASES:	Time served Suspended upon: _____															
Concurrent / Consecutive to Each Count / Case(s)	PROB: _____ Months Report w/in: _____															
	CSH: _____ hrs @ _____ / month															
	May Buy _____ @ \$ _____ / hour															
	CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW)															
	No Return to Offense Location (NRTOL)															
	FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____															
	REST: \$ _____ To Pay Date _____															
	May Convert Court Cost to Community Service Hours (MAYC)															
	CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST															
	LICENSE: D6 Set Aside D6															
	CONTINUE: Hearing Type: _____ Date: _____ Time: _____															

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)

☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)

☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)

☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)

☐ IN JAIL PROGRAM (CIJAMP)

☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

☐ Defendant: PUENTES, LISA JULIA Address: 1514 S LOIS AV, TAMPA, FL 33629 Interpreter: Y N Language: DOB: 7/6/1973 Gender: Female Race: White DL: FL-P416923920000 Alias: PUENTES, LISA; PUENTES, LISA J	Warrant: Date of Offense: 08/09/2026 Date of Arrest: 08/09/2026 Charging Document Date: SOID: 00405242 In Custody: NO Booking No: 2026-27768	Bond Out Date: 08/11/2026 BNDADD Bond Type: SURETY Bond Amount: \$2,500.00 Bond Company: RUBEN & STEVE BAZARTE BAIL BONDS, INC. Cash Bond Depositor:
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PD APP / UNAPP /WDRAW PA APD RC DEFENDER, PUBLIC ACA ASA WITNESS: ISSUING AGENCY: SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS: <table><tr><th>COUNT</th><th>OFFENSE DESCRIPTION</th><th>CITATION #</th><th>PLEA</th><th>DISPO</th></tr><tr><td>1</td><td>784031 - DVST0003 (MF) DOMESTIC BATTERY</td><td></td><td></td><td></td></tr></table> SPEED: BAC LEVEL: ☐ Stipulated BAC Below .15 FUTURE HEARINGS: PENDING CASES: 26-CM-009698-A Concurrent / Consecutive to Each Count / Case(s)	COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO	1	784031 - DVST0003 (MF) DOMESTIC BATTERY				PLEA: G NC NG WPNG WST W/JTR CHOP VOP: Admit Deny DISM In Violation: Y N CONT REVK REIN SACO MOD TERM: S U VERDICT: ACQT G NG DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU Incompetent to Proceed Competent to Proceed ☐ Order to be Prepared COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By: Time served Suspended upon: _____ PROB: _____ Months Report w/in: _____ CSH: _____ hrs @ _____ / month May Buy _____ @ \$ _____ / hour CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW) No Return to Offense Location (NRTOL) FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____ REST: \$ _____ To Pay Date _____ May Convert Court Cost to Community Service Hours (MAYC) CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST LICENSE: D6 Set Aside D6 CONTINUE: Hearing Type: _____ Date: _____ Time: _____
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO							
1	784031 - DVST0003 (MF) DOMESTIC BATTERY										

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)

☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)

☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)

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☐ IN JAIL PROGRAM (CIJAMP)

☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARDSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

☐ Defendant: PUJOLS, REINALDO	Warrant:	Bond Out Date: 08/10/2026BNDADD
Address: 5138 BERNARD CIR #245, TAMPA, FL 33617	Date of Offense: 08/09/2026Date of Arrest: 08/09/2026	Bond Type: SURETY
Interpreter: Y N Language:	Charging Document Date:	Bond Amount: \$1,000.00
DOB: 1/16/1994Gender: MaleRace: White	SOID: 01016684, 1016684	Bond Company: RUBEN & STEVE BAZARTE BAIL BONDS, INC.
DL: FL-P641552835000	In Custody: NO	Cash Bond Depositor:
Alias:	Booking No: 2026-27688	

PD APP / UNAPP /WDRAW	PA	APD	RC	DEFENDER, PUBLIC	ACA	ASA
WITNESS:		ISSUING AGENCY:				
SET FOR: ARRAIGNMENT AT 8:30:00 AM		HEARING COMMENTS:				
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO		
1	784031 - DVST0003 (MF) DOMESTIC BATTERY					
SPEED:						
BAC LEVEL:						
☐ Stipulated BAC Below .15						
FUTURE HEARINGS:						
PENDING CASES:						
Concurrent / Consecutive to Each Count / Case(s)						

PLEA:	G	NC	NG	WPNG	WST	W/JTR	CHOP
VOP:	Admit	Deny	DISM	In Violation:	Y	N	
	CONT	REVK	REIN	SACO	MOD	TERM:	S U
VERDICT:	ACQT	G	NG				
DISP:	WH	AGJ	DISM	NOLP	TRDP	DVIP	MIP RIDR VRU
	Incompetent to Proceed			Competent to Proceed			
	☐ Order to be Prepared						
COJA / SRCJ:	_____ Days/Months		W/Credit _____ Days		Followed By:		
	Time served		Suspended upon: _____				
PROB:	_____ Months			Report w/in: _____			
CSH:	_____ hrs @ _____ / month						
	May Buy _____ @ \$ _____ / hour						
CONTACT:	No Contact w/ Victim (NCWV)			No Violent Contact w/ Victim (NVCW)			
	No Return to Offense Location (NRTOL)						
FINANCIAL:	MCCI	COP	PDLI	REC	CCCLI	Fine \$ _____	
	REST: \$ _____		To Pay Date _____				
	May Convert Court Cost to Community Service Hours (MAYC)						
CAPIAS:	\$ _____		EST	RECALL CAPIAS	Set Aside EST		
LICENSE:	D6	Set Aside D6					
CONTINUE:	Hearing Type: _____ Date: _____ Time: _____						

SENTENCING PROVISIONS:

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☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

☐ Defendant: RICARDO, HELLEM Address: 10210 CASA PALARMO DR #4, RIVERVIEW, FL 33578 Interpreter: Y N Language: DOB: 4/18/2005 Gender: Female Race: White DL: FL-R263320056380 Alias:	Warrant: Date of Offense: 08/10/2026 Date of Arrest: 08/10/2026 Charging Document Date: SOID: 01016747 In Custody: NO Booking No: 2026-27851	Bond Out Date: 08/11/2026 BNDADD Bond Type: SURETY Bond Amount: \$500.00 Bond Company: WALK OUT BAIL BONDS, LLC. Cash Bond Depositor:
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PD APP / UNAPP /WDRAW PA APD RC DEFENDER, PUBLIC ACA ASA	PLEA: G NC NG WPNG WST W/JTR CHOP										
WITNESS:	VOP: Admit Deny DISM In Violation: Y N										
SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS:	CONT REVK REIN SACO MOD TERM: S U										
<table><thead><tr><th>COUNT</th><th>OFFENSE DESCRIPTION</th><th>CITATION #</th><th>PLEA</th><th>DISPO</th></tr></thead><tbody><tr><td>1</td><td>784031 - DVST0003 (MF) DOMESTIC BATTERY</td><td></td><td></td><td></td></tr></tbody></table>	COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO	1	784031 - DVST0003 (MF) DOMESTIC BATTERY				VERDICT: ACQT G NG
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO							
1	784031 - DVST0003 (MF) DOMESTIC BATTERY										
SPEED:	DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU										
BAC LEVEL:	Incompetent to Proceed Competent to Proceed										
☐ Stipulated BAC Below .15	☐ Order to be Prepared										
FUTURE HEARINGS:	COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By:										
PENDING CASES:	Time served Suspended upon: _____										
Concurrent / Consecutive to Each Count / Case(s)	PROB: _____ Months Report w/in: _____										
	CSH: _____ hrs @ _____ / month										
	May Buy _____ @ \$ _____ / hour										
	CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW)										
	No Return to Offense Location (NRTOL)										
	FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____										
	REST: \$ _____ To Pay Date _____										
	May Convert Court Cost to Community Service Hours (MAYC)										
	CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST										
	LICENSE: D6 Set Aside D6										
	CONTINUE: Hearing Type: _____ Date: _____ Time: _____										

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)

☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)

☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)

☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)

☐ IN JAIL PROGRAM (CIJAMP)

☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

☐ Defendant: ROJAS SANTANA, FREDYVEL Address: 9320 BARRINGTON LANE, PORT RICHEY, FL 34668 Interpreter: Y N Language: DOB: 4/22/1995 Gender: Male Race: White DL: FL-R225240951420 Alias:	Warrant: Date of Offense: 07/03/2026 Date of Arrest: 07/24/2026 Charging Document Date: SOID: In Custody: NO Booking No:	Bond Out Date: 07/24/2026 BNDADD Bond Type: CASH Bond Amount: \$1,000.00 Bond Company: Cash Bond Depositor: LOPEZ PENA, ANIBAL
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PD APP / UNAPP /WDRAW	PA	APD	RC	ACA	ASA
WITNESS:		ISSUING AGENCY:			
SET FOR: ARRAIGNMENT AT 8:30:00 AM		HEARING COMMENTS:			
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO	
1	784031 - DVST0003 (MF) DOMESTIC BATTERY				
SPEED:					
BAC LEVEL:					
☐ Stipulated BAC Below .15					
FUTURE HEARINGS:					
PENDING CASES:					
Concurrent / Consecutive to Each Count / Case(s)					

PLEA:	G	NC	NG	WPNG	WST	W/JTR	CHOP
VOP:	Admit	Deny	DISM	In Violation: Y	N		
	CONT	REVK	REIN	SACO	MOD	TERM: S	U
VERDICT:	ACQT	G	NG				
DISP:	WH	AGJ	DISM	NOLP	TRDP	DVIP	MIP
							RIDR
							VRU
	Incompetent to Proceed			Competent to Proceed			
	☐ Order to be Prepared						
COJA / SRCJ:	_____ Days/Months		W/Credit _____ Days		Followed By:		
	Time served		Suspended upon: _____				
PROB:	_____ Months			Report w/in: _____			
CSH:	_____ hrs @ _____ / month						
	May Buy _____ @ \$ _____ / hour						
CONTACT:	No Contact w/ Victim (NCWV)			No Violent Contact w/ Victim (NVCW)			
	No Return to Offense Location (NRTOL)						
FINANCIAL:	MCCI	COP	PDLI	REC	CCCLI	Fine \$ _____	
	REST: \$ _____		To Pay Date _____				
	May Convert Court Cost to Community Service Hours (MAYC)						
CAPIAS:	\$ _____		EST	RECALL CAPIAS	Set Aside EST		
LICENSE:	D6	Set Aside D6					
CONTINUE:	Hearing Type: _____ Date: _____ Time: _____						

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)

☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)

☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)

☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)

☐ IN JAIL PROGRAM (CIJAMP)

☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

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☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)

☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)

☐ IN JAIL PROGRAM (CIJAMP)

☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

☐ Defendant: THRASHER, VINCENT DOUGLAS Address: 6115 HADLEY COMMONS DR, RIVERVIEW, FL 33578 Interpreter: Y N Language: DOB: 1/2/1983 Gender: Male Race: White DL: AL-6876912 Alias:	Warrant: Date of Offense: 08/07/2026 Date of Arrest: 08/08/2026 Charging Document Date: SOID: 00991206 In Custody: NO Booking No: 2026-27560	Bond Out Date: 08/09/2026 BNDADD Bond Type: SURETY Bond Amount: \$1,500.00 Bond Company: ARMANDO ARCOS BAIL BONDS, INC. Cash Bond Depositor:
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PD APP / UNAPP /WDRAW PA APD RC DEFENDER, PUBLIC ACA ASA	PLEA: G NC NG WPNG WST W/JTR CHOP										
WITNESS: ISSUING AGENCY:	VOP: Admit Deny DISM In Violation: Y N										
SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS:	CONT REVK REIN SACO MOD TERM: S U										
<table><tr><th>COUNT</th><th>OFFENSE DESCRIPTION</th><th>CITATION #</th><th>PLEA</th><th>DISPO</th></tr><tr><td>1</td><td>784031 - DVST0003 (MF) DOMESTIC BATTERY</td><td></td><td></td><td></td></tr></table>	COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO	1	784031 - DVST0003 (MF) DOMESTIC BATTERY				VERDICT: ACQT G NG
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO							
1	784031 - DVST0003 (MF) DOMESTIC BATTERY										
SPEED:	DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU										
BAC LEVEL:	Incompetent to Proceed Competent to Proceed										
☐ Stipulated BAC Below .15	☐ Order to be Prepared										
FUTURE HEARINGS:	COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By:										
PENDING CASES:	Time served Suspended upon: _____										
Concurrent / Consecutive to Each Count / Case(s)	PROB: _____ Months Report w/in: _____										
	CSH: _____ hrs @ _____ / month										
	May Buy _____ @ \$ _____ / hour										
	CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW)										
	No Return to Offense Location (NRTOL)										
	FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____										
	REST: \$ _____ To Pay Date _____										
	May Convert Court Cost to Community Service Hours (MAYC)										
	CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST										
	LICENSE: D6 Set Aside D6										
	CONTINUE: Hearing Type: _____ Date: _____ Time: _____										

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)

☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)

☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)

☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)

☐ IN JAIL PROGRAM (CIJAMP)

☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

☐ Defendant: TITUS SHALLAND, D'AUNDRA ZHAI	Warrant:	Bond Out Date: 08/11/2026BNDADD
Address: 466 MANGROVE SHADE CIR, APOLLO BEACH, FL 33572	Date of Offense: 08/09/2026Date of Arrest: 08/09/2026	Bond Type: SURETY
Interpreter: Y N Language:	Charging Document Date:	Bond Amount: \$500.00
DOB: 6/21/1995Gender: FemaleRace: Black	SOID: 01016706, 1016706	Bond Company: PATSYS BAIL BONDS, LLC.
DL: FL-T229824466000	In Custody: NO	Cash Bond Depositor:
Alias:	Booking No: 2026-27782	

PD APP / UNAPP /WDRAW	PA	APD	RC	DEFENDER, PUBLIC	ACA	ASA
WITNESS:		ISSUING AGENCY:				
SET FOR: ARRAIGNMENT AT 8:30:00 AM		HEARING COMMENTS:				
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO		
1	784031 - DVST0003 (MF) DOMESTIC BATTERY					
SPEED:						
BAC LEVEL:						
☐ Stipulated BAC Below .15						
FUTURE HEARINGS:						
PENDING CASES:						
Concurrent / Consecutive to Each Count / Case(s)						

PLEA:	G	NC	NG	WPNG	WST	W/JTR	CHOP
VOP:	Admit	Deny	DISM	In Violation:	Y	N	
	CONT	REVK	REIN	SACO	MOD	TERM:	S U
VERDICT:	ACQT	G	NG				
DISP:	WH	AGJ	DISM	NOLP	TRDP	DVIP	MIP RIDR VRU
	Incompetent to Proceed			Competent to Proceed			
	☐ Order to be Prepared						
COJA / SRCJ:	_____ Days/Months		W/Credit _____ Days		Followed By:		
	Time served		Suspended upon: _____				
PROB:	_____ Months			Report w/in: _____			
CSH:	_____ hrs @ _____ / month						
	May Buy _____ @ \$ _____ / hour						
CONTACT:	No Contact w/ Victim (NCWV)			No Violent Contact w/ Victim (NVCW)			
	No Return to Offense Location (NRTOL)						
FINANCIAL:	MCCI	COP	PDLI	REC	CCCLI	Fine \$ _____	
	REST: \$ _____		To Pay Date _____				
	May Convert Court Cost to Community Service Hours (MAYC)						
CAPIAS:	\$ _____		EST	RECALL CAPIAS	Set Aside EST		
LICENSE:	D6	Set Aside D6					
CONTINUE:	Hearing Type: _____ Date: _____ Time: _____						

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)

☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)

☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)

☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)

☐ IN JAIL PROGRAM (CIJAMP)

☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

☐ Defendant: UWERA, SHAKILLA	Warrant:	Bond Out Date: 08/06/2026BNDADD
Address: 144 PARK ST, MEDFORD, MA 02155	Date of Offense: 08/05/2026Date of Arrest: 08/05/2026	Bond Type: CASH
Interpreter: Y N Language:	Charging Document Date:	Bond Amount: \$500.00
DOB: 12/12/1998Gender: FemaleRace: Black	SOID: 01016508	Bond Company:
DL: MA-SA7990011	In Custody: NO	Cash Bond Depositor: UMUHHOZA, ASSIA
Alias:	Booking No: 2026-27183	

PD APP / UNAPP /WDRAW	PA	APD	RC	DEFENDER, PUBLIC; MONTEIRO , JOSHUA LOPES	ACA	ASA
WITNESS:		ISSUING AGENCY:				
SET FOR: ARRAIGNMENT AT 8:30:00 AM		HEARING COMMENTS:				
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO		
1	784031 - DVST0003 (MF) DOMESTIC BATTERY		WPNG			
SPEED:						
BAC LEVEL:						
☐ Stipulated BAC Below .15						
FUTURE HEARINGS:						
PENDING CASES:						
Concurrent / Consecutive to Each Count / Case(s)						

PLEA:	G	NC	NG	WPNG	WST	W/JTR	CHOP
VOP:	Admit	Deny	DISM	In Violation:	Y	N	
	CONT	REVK	REIN	SACO	MOD	TERM:	S U
VERDICT:	ACQT	G	NG				
DISP:	WH	AGJ	DISM	NOLP	TRDP	DVIP	MIP RIDR VRU
	Incompetent to Proceed			Competent to Proceed			
	☐ Order to be Prepared						
COJA / SRCJ:	_____ Days/Months		W/Credit	_____ Days		Followed By:	
	Time served		Suspended upon:_____				
PROB:	_____ Months			Report w/in:_____			
CSH:	_____ hrs @ _____ / month						
	May Buy_____ @ \$ _____ / hour						
CONTACT:	No Contact w/ Victim (NCWV)			No Violent Contact w/ Victim (NVCW)			
	No Return to Offense Location (NRTOL)						
FINANCIAL:	MCCI	COP	PDLI	REC	CCCLI	Fine \$ _____	
	REST: \$ _____		To Pay Date_____				
	May Convert Court Cost to Community Service Hours (MAYC)						
CAPIAS:	\$ _____		EST	RECALL CAPIAS	Set Aside EST		
LICENSE:	D6		Set Aside D6				
CONTINUE:	Hearing Type: _____ Date:_____ Time:_____						

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)

☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)

☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)

☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)

☐ IN JAIL PROGRAM (CIJAMP)

☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

☐ Defendant: VILLA NIEVES, DANELYS Address: 6506 W CLIFTON ST, TAMPA, FL 33634 Interpreter: Y N Language: DOB: 12/30/1985 Gender: Female Race: White DL: FL-V235596958000 Alias:	Warrant: Date of Offense: 08/08/2026 Date of Arrest: 08/08/2026 Charging Document Date: SOID: 01016629, 1016629 In Custody: NO Booking No: 2026-27553	Bond Out Date: 08/09/2026 BNDADD Bond Type: SURETY Bond Amount: \$1,000.00 Bond Company: A-1 RAPID RELEASE BAIL BONDS, INC. Cash Bond Depositor:
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PD APP / UNAPP /WDRAW PA APD RC DEFENDER, PUBLIC ACA ASA	PLEA: G NC NG WPNG WST W/JTR CHOP										
WITNESS:	VOP: Admit Deny DISM In Violation: Y N										
SET FOR: ARRAIGNMENT AT 8:30:00 AM HEARING COMMENTS:	CONT REVK REIN SACO MOD TERM: S U										
<table><tr><th>COUNT</th><th>OFFENSE DESCRIPTION</th><th>CITATION #</th><th>PLEA</th><th>DISPO</th></tr><tr><td>1</td><td>784031 - DVST0003 (MF) DOMESTIC BATTERY</td><td></td><td></td><td></td></tr></table>	COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO	1	784031 - DVST0003 (MF) DOMESTIC BATTERY				VERDICT: ACQT G NG
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO							
1	784031 - DVST0003 (MF) DOMESTIC BATTERY										
SPEED:	DISP: WH AGJ DISM NOLP TRDP DVIP MIP RIDR VRU										
BAC LEVEL:	Incompetent to Proceed Competent to Proceed										
☐ Stipulated BAC Below .15	☐ Order to be Prepared										
FUTURE HEARINGS:	COJA / SRCJ: _____ Days/Months W/Credit _____ Days Followed By:										
PENDING CASES:	Time served Suspended upon: _____										
Concurrent / Consecutive to Each Count / Case(s)	PROB: _____ Months Report w/in: _____										
	CSH: _____ hrs @ _____ / month										
	May Buy _____ @ \$ _____ / hour										
	CONTACT: No Contact w/ Victim (NCWV) No Violent Contact w/ Victim (NVCW)										
	No Return to Offense Location (NRTOL)										
	FINANCIAL: MCCI COP PDLI REC CCCLI Fine \$ _____										
	REST: \$ _____ To Pay Date _____										
	May Convert Court Cost to Community Service Hours (MAYC)										
	CAPIAS: \$ _____ EST RECALL CAPIAS Set Aside EST										
	LICENSE: D6 Set Aside D6										
	CONTINUE: Hearing Type: _____ Date: _____ Time: _____										

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)

☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)

☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)

☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)

☐ IN JAIL PROGRAM (CIJAMP)

☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

☐ Defendant: WATKINS, MONIKA SYLWIA	Warrant:	Bond Out Date:	BNDADD
Address: 7512 FOREST MERE DRIVE, RIVERVIEW, FL 33578	Date of Offense: 07/27/2026 Date of Arrest: 08/03/2026	Bond Type:	
Interpreter: Y N Language:	Charging Document Date:	Bond Amount:	
DOB: 11/29/1975 Gender: Female Race: White	SOID: 01004197	Bond Company:	
DL: FL-W325557759290	In Custody: YES	Cash Bond Depositor:	
Alias: WATKINS, MONIKA	Booking No: 2026-27154		

PD APP / UNAPP /WDRAW	PA	APD	RC	DEFENDER, PUBLIC	ACA	ASA
WITNESS:		ISSUING AGENCY:				
SET FOR: ARRAIGNMENT AT 8:30:00 AM		HEARING COMMENTS:				
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO		
1	84302-COPS1001 (MF) RESISTING OFFICER WITHOUT VIOLENCE					
2	784031 - DVST0003 (MF) DOMESTIC BATTERY					
SPEED:						
BAC LEVEL:						
☐ Stipulated BAC Below .15						
FUTURE HEARINGS:						
PENDING CASES:						
Concurrent / Consecutive to Each Count / Case(s)						

PLEA:	G	NC	NG	WPNG	WST	W/JTR	CHOP		
VOP:	Admit	Deny	DISM	In Violation:	Y	N			
	CONT	REVK	REIN	SACO	MOD	TERM: S U			
VERDICT:	ACQT	G	NG						
DISP:	WH	AGJ	DISM	NOLP	TRDP	DVIP	MIP	RIDR	VRU
	Incompetent to Proceed			Competent to Proceed					
	☐ Order to be Prepared								
COJA / SRCJ:	_____ Days/Months		W/Credit _____ Days		Followed By:				
	Time served		Suspended upon: _____						
PROB:	_____ Months		Report w/in: _____						
CSH:	_____ hrs @ _____ / month								
	May Buy _____ @ \$ _____ / hour								
CONTACT:	No Contact w/ Victim (NCWV)			No Violent Contact w/ Victim (NVCW)					
	No Return to Offense Location (NRTOL)								
FINANCIAL:	MCCI	COP	PDLI	REC	CCCLI	Fine \$ _____			
	REST: \$ _____		To Pay Date _____						
	May Convert Court Cost to Community Service Hours (MAYC)								
CAPIAS:	\$ _____		EST	RECALL CAPIAS	Set Aside EST				
LICENSE:	D6		Set Aside D6						
CONTINUE:	Hearing Type: _____ Date: _____ Time: _____								

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)

☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)

☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)

☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)

☐ IN JAIL PROGRAM (CIJAMP)

☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)

☐ Defendant: WINSTON, COREY MASHEA	Warrant:	Bond Out Date: 08/10/2026BNDADD
Address: 519 CAMINO REAL CT #E, BRANDON, FL 33510	Date of Offense: 08/08/2026Date of Arrest: 08/08/2026	Bond Type: SURETY
Interpreter: Y N Language:	Charging Document Date:	Bond Amount: \$1,000.00
DOB: 10/18/1974Gender: MaleRace: Black	SOID: 00961103	Bond Company: ORIENT ROAD BAIL BONDS, INC.
DL: FL-W523113743780	In Custody: NO	Cash Bond Depositor:
Alias: WINSTON, COREY M	Booking No: 2026-27649	

PD APP / UNAPP /WDRAW	PA	APD	RC	DEFENDER, PUBLIC	ACA	ASA
WITNESS:		ISSUING AGENCY:				
SET FOR: ARRAIGNMENT AT 8:30:00 AM		HEARING COMMENTS:				
COUNT	OFFENSE DESCRIPTION	CITATION #	PLEA	DISPO		
1	784031 - DVST0003 (MF) DOMESTIC BATTERY					
SPEED:						
BAC LEVEL:						
☐ Stipulated BAC Below .15						
FUTURE HEARINGS:						
PENDING CASES:						
Concurrent / Consecutive to Each Count / Case(s)						

PLEA:	G	NC	NG	WPNG	WST	W/JTR	CHOP
VOP:	Admit	Deny	DISM	In Violation:	Y	N	
	CONT	REVK	REIN	SACO	MOD	TERM:	S U
VERDICT:	ACQT	G	NG				
DISP:	WH	AGJ	DISM	NOLP	TRDP	DVIP	MIP RIDR VRU
	Incompetent to Proceed			Competent to Proceed			
	☐ Order to be Prepared						
COJA / SRCJ:	_____ Days/Months		W/Credit _____ Days		Followed By:		
	Time served		Suspended upon:_____				
PROB:	_____ Months			Report w/in:_____			
CSH:	_____ hrs @ _____ / month						
	May Buy _____ @ \$ _____ / hour						
CONTACT:	No Contact w/ Victim (NCWV)			No Violent Contact w/ Victim (NVCW)			
	No Return to Offense Location (NRTOL)						
FINANCIAL:	MCCI	COP	PDLI	REC	CCCLI	Fine \$ _____	
	REST: \$ _____		To Pay Date _____				
	May Convert Court Cost to Community Service Hours (MAYC)						
CAPIAS:	\$ _____		EST	RECALL CAPIAS	Set Aside EST		
LICENSE:	D6	Set Aside D6					
CONTINUE:	Hearing Type: _____ Date: _____ Time: _____						

SENTENCING PROVISIONS:

- ☐ ALCOHOL EVALUATION AND RECOMMENDED TREATMENT (AERT)

☐ DRUG EVALUATION AND RECOMMENDED TREATMENT (DERT)

☐ DOMESTIC VIOLENCE EVALUATION AND RECOMMENDED TREATMENT (DVET)

☐ MENTAL HEALTH EVALUATION AND RECOMMENDED TREATMENT (MHERT)

☐ ENTER AND COMPLETE ANGER MANAGEMENT PROGRAM (ACAM)

☐ IN JAIL PROGRAM (CIJAMP)

☐ ENTER AND COMPLETE DRUG TREATMENT PROGRAM (ECDP)

☐ IN JAIL PROGRAM (CIJDP)

☐ COMPLETE PETIT THEFT SCHOOL (CPTS)

☐ ENROLL W/IN _____ DAYS

☐ BATTERERS INTERVENTION PROGRAM (CBIP)

☐ RANDOM DRUG SCREENING URINALYSIS (RDSU)

☐ CREDIT FOR ANY CONDITIONS COMPLETED (CFAC)

☐ GPS / SOBERTRACK PRIOR TO RELEASE

☐ HCSO ☐ PRIVATE

☐ AUTO EARLY TERM WHEN CONDITIONS COMPLETE _____

☐ MAY PETITION FOR EARLY TERM (MPETERM) _____

☐ NO EARLY TERMINATION OF PROBATION (NETM)
- ☐ NO FIREARMS OR WEAPONS (NOWF)

☐ STAY AWAY FROM OFFENSE LOCATION (STFR)

☐ NO ALCOHOL (NOAL)

☐ ATTEND DUI SCHOOL (ADUI) - LEVEL _____
ENROLL W/IN _____ DAYS

☐ TREATMENT REQ'D IF RECOMMENDED (TRREC)

☐ IGNITION INTERLOCK (IGLOCK)
_____ MONTHS

☐ VEHICLE IMMOBILIZATION (VEIMM)
_____ DAYS

☐ DRIVERS LICENSE REVOCATION (DLREV)
_____ MONTHS / YEARS

☐ COURT ORDERED DEFENSIVE DRIVING SCHOOL (CRTDDS)
_____ HOURS

☐ NO OBJECTION TO APPLY FOR HARSHIP
LICENSE FOR WORK PURPOSE (NOHLWP)

☐ DO NOT DRIVE W/OUT VALID DL (DND)

☐ DO NOT DRIVE (DNDV)