

RUN TIME: 1:00:10 PM

RUN DATE: 7/23/2024

CLERK OF THE CIRCUIT COURT

COURT CALENDAR

COUNTY CRIMINAL COURT CALENDAR

Session Description

Court Session:	DIV E JTR ADD ON 9:00AM
Court Date:	7/24/2024
Judge:	SCOTT, MONIQUE M
Court Room:	COURTROOM 33 IN-PERSON
Court Convene:	_____
Court Adjourn:	_____
Court Reporter:	_____
State Attorney:	_____
Public Defender:	_____
Court Clerk:	_____
Ext:	_____

CASE NO: 24-CT-002757

TRAFFIC DIVISION E SCOTT, MONIQUE M

DIV E JTR ADD ON 9:00AM

LUMPKINS, LORENZO DEWAYNE

3659 COOPERS POND DR #201, TAMPA, FL 33614

ALIAS:

SET FOR: JURY TRIAL AT 9:00:00 AM

Gender: Male

Race: Black

DOB: 6/28/1981

DL: FL-L512524812280

Warrant:

OFFENSE DATE: 2/10/2024

IN CUSTODY: NO

DATE OF ARREST:

BOOKING NO: 2024-4505

SOID: 00902869

BOND OUT DATE: 02/10/2024

BOND TYPE: SURETY

BOND AMOUNT: \$2,500.00

BOND COMPANY: US #1 BAIL BONDS

CASH BOND DEP:

PD APP / UNAPP / WDRAW

PA  PD  RC

DEFENDER, PUBLIC

PROSECUTOR: PENT, APRIL R.

INTERPRETER

LANGUAGE:

WITNESS:

LEO AGENCY: HCSO

In Person  Remote  Combination

HEARING COMMENTS:

COUNT OFFENSE DESCRIPTION

CITATION #

PLEA

DISPO

1 32234(2)(A) - 613 OPER WHILE DL SUSP/CANCEL/REVOK  
- 1ST CONV AJBD62E

SPEEDS:

BAC LEVEL:

ADDITIONAL INFORMATION:

FUTURE HEARINGS:

PENDING CASES:

18-TR-039900, 18-TR-039901, 24-CT-002571, 24-TR-017894

Concurrent / Consecutive to Each Count / Case(s)

PLEA: G NC NG WPNG WST WJTR CHOP

VOP: Admit Deny DISM In Violation: Y N

VERDICT: ACQT G NG

DISP: WH AGJ DISM NOLP

DLAP DVIP MIP RIDR

COJA / SRCJ: \_\_\_\_\_Days/Months W/Credit \_\_\_\_\_ Time served SUSP

PROB: \_\_\_\_\_Months AUTOET NOAUTO Report

\_\_\_\_\_Total CSH (W/HCSOWD\_\_\_\_\_) (May Buy \_\_\_\_\_)

CONT REVK REIN SACO MOD TERM: S U

PROV: NCWV NVCW STFR LOAP GADL OGED

AEAT ACAM DETN DVET STHS PPET

ATNAW CRTDDS ADUI CPTS AVIO

DND IGINTER VIMF \_\_\_\_\_ days DLRE \_\_\_\_\_ months

RDSU \_\_\_\_\_ First no sooner than \_\_\_\_\_ days

JURY: JRSEL JRSWR JTRC

FINANCIAL: MCCI COP COI \$\_\_\_\_\_ PDLI PPFEE

Convert CC to CSH / Lien

Fine \$ \_\_\_\_\_ Rest \$ \_\_\_\_\_

To Pay By:

CAPIAS: \$\_\_\_\_\_ EA CT Recall Capias

EST Revoke Set Aside Discharge Reinstate

D6 Reinstate

CONTINUE: Hearing Type Date Time