

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

OBTS #	REPORT # SO22-371061		DOCKET # 1914204	
Person ID 312032386	SSN# [REDACTED]			
Charge Description <input type="checkbox"/> Felony <input checked="" type="checkbox"/> Misdemeanor <input type="checkbox"/> Warrant <input type="checkbox"/> Traffic <input type="checkbox"/> Ordinance	Traffic Citation # (if any)		Court Case #	
Charge BATTERY; DOMESTIC			22-15831-MM-1	
Defendant's Name (Last, First, Middle) PACITTO, CHRISTOPHER JOHN	DOB 12/15/1976	Sex M	Race W	Ht 602
		Wt 300	Hair XXX	Eyes BRO
Alias	DL # P-230-110-76-455-0	State FL	Scars/Marks/Tattoos/Physical Features	
Local Address (Street, City, State, Zip Code) [REDACTED] FORT MYERS FL 33913	Telephone 2398966376	Place of Birth MASSACHUSE	Citizenship USA	
Permanent Address (Street, City, State, Zip Code)	Telephone	Employed by / School		
Weapon Seized Type <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Indication of Drug Influence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> UNK	Indication of Mental Health Issues <input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> UNK	Indication of Alcohol Influence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> UNK	
Co-Defendant's Name (Last, First, Middle)	DOB	Sex	Race	In Custody <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor
Co-Defendant's Name (Last, First, Middle)	DOB	Sex	Race	In Custody <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor

The undersigned swears that he/she has reasonable grounds to believe that the above named defendant on the 24 day of NOVEMBER, 2022,

at approximately 4:40 AM, at [REDACTED] ST PETE BEACH, FL 33706, in Pinellas County did:

ACTUALLY AND INTENTIONALLY TOUCH OR STRIKE (VICTIM), (HIS) (GIRLFRIEND) AND CO-HABITANT, AGAINST THE WILL OF (VICTIM), TO-WIT: (THREW AN OBJECT AT VICTIM LEAVING BRUISE ON TORSO).

ON THE ABOVE DATE AND TIME, THE DEFENDANT GOT INTO A VERBAL ARGUMENT WITH HIS GIRLFRIEND OF 7 MONTHS. WHILE THE DEFENDANT WAS PACKING HIS SUITCASE TO LEAVE THE ROOM, HE BEGAN THROWING THE VICTIM'S ITEMS OUT OF THE SUITCASE. DURING THAT PROCESS, THE VICTIM ADVISED THE DEFENDANT HIT HER WITH A SEX TOY ON HER TORSO, LEAVING A BRUISE. THE DEFENDANT, POST-MIRANDA, ADMITTED TO THROWING ITEMS BUT DOES NOT RECALL EXACTLY WHAT ITEMS.

Contrary to Florida Statute/Ordinance 784.03 - MISD1

ARREST DATE: 11/24/2022 Time 5:19 AM . Aggravating/Mitigating Factors UNDER THE INFLEUNCE

Booking Officer: GUGLIOTTA, A 54151 Amount of Bond NO BOND Bond Out Date _____ Time a.m. p.m.

Victim Notified of Advisory? Yes No Injuries to Victim? Yes No Medical Treatment to Victim? Yes No

The Court reviewed this complaint and finds there: is probable cause is not probable cause to detain defendant Bond Action, if any: _____
The probable cause determination is passed for: 24 Hrs 24 Hrs on showing of extraordinary circumstances Received by Booking: 11/24/2022 7:24:21 AM

Pursuant to F.S. 92.525 and under penalty of perjury, I declare that I have read the foregoing document and that the facts in it are true.

[Signature]
PINELLAS COUNTY SHERIFF
Declarant Signature Agency

DEPUTY DANDRE SCOTT 58982 310278471
Printed Name Declarant ID#

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

DATE	OFFICER	HOURS X PAY RATE	OR	COST
11/24/2022	DSCOTT	1 25.00		\$25.00

OTHER - Describe _____
Continuation sheet Yes No TOTAL \$ 25.00

Handwritten: \$1000 K
1-NO CONTACT

Handwritten: UNDER THE INFLEUNCE (circled)

Defendant PACITTO, CHRISTOPHER JOHN

Court Case No: 22-15831-MM-1

ADVISORY AND SOLVENCY HEARING

The above named Defendant came before me for Advisory and Solvency hearing and was advised by me of the charge(s) against him; his right to remain silent; that any statements by him may be used against him; his right to counsel, and, if he is financially unable to afford counsel, that counsel forthwith will be appointed; of his right to communicate with his counsel, family or friends, and that reasonable implementation will be afforded him to contact the foregoing.

I FURTHER CERTIFY THAT:

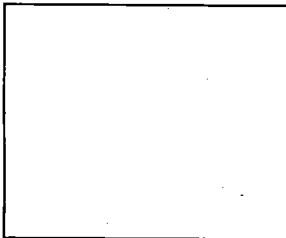
- A. Defendant has advised the Court that he has retained counsel or will retain counsel.
- B. The Court investigated Defendant's solvency and found the Defendant financially able to secure counsel.
- C. The Court investigated Defendant's solvency and provisionally appointed the Public Defender.
- D. The Defendant waived the right to counsel at the first appearance only.

DATE AND TIME



JUDGE

- I hereby waive the right to counsel at the first appearance only.
- I, having been found solvent and financially able to secure counsel, hereby waive counsel until my attorney files an appearance in this case or until I file a written request for a review of my solvency and ability to secure counsel.



Thumb Print

DEFENDANT'S SIGNATURE

I HEREBY acknowledge receipt of a copy of the foregoing Complaint and Advisory.

DEFENDANT'S SIGNATURE

DEFENDANT'S ATTORNEY'S SIGNATURE

DATE