

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

OBTS #		REPORT # SO16-440588		DOCKET # 1698946	
Person ID 310742761			SSN#		
Charge Description ☒ Felony ☐ Misdemeanor ☐ Warrant ☐ Traffic ☐ Ordinance			Traffic Citation # (if any)		Court Case #
Charge WARRANT ARREST - CHILD ABUSE CAUSING DEATH					16-06026-OC-CF-1
Defendant's Name (Last, First, Middle) LUNSFORD, LENA MARIE		DOB 08/16/1982	Sex F	Race W	Ht 506
		Wt 159	Hair BRO	Eyes BRO	Skin
Alias LENA CONAWAY	DL #	State TN	Scars/Marks/Tattoos/Physical Features TATTOO: RT FOOT, LIZARD		
Local Address (Street, City, State, Zip Code) 5910 31ST N, #1 ST PETERSBURG FL 33714			Place of Birth		Citizenship USA
Permanent Address (Street, City, State, Zip Code) 5910 31ST N, #1 ST PETERSBURG FL 33714			Employed by / School UNEMPLOYED		
Weapon Seized Type ☐ Yes ☒ No		Indication of Drug Influence Y N UNK ☐ ☒ ☐		Indication of Mental Health Issues Y N UNK ☐ ☒ ☐	
				Indication of Alcohol Influence Y N UNK ☐ ☒ ☐	
Co-Defendant's Name (Last, First, Middle)		DOB	Sex	Race	In Custody ☐ Yes ☐ No ☐ Felony ☐ Misdemeanor
Co-Defendant's Name (Last, First, Middle)		DOB	Sex	Race	In Custody ☐ Yes ☐ No ☐ Felony ☐ Misdemeanor

The undersigned swears that he/she has reasonable grounds to believe that the above named defendant on the 03 day of NOVEMBER, 2016,

at approximately 11:33 AM, at 5910 31ST ST N, #1, ST PETERSBURG, in Pinellas County did:

LEWIS COUNTY, WEST VIRGINIA WARRANT

ARREST ON WARRANT/CAPIAS 16-M21F-00140

BOND: \$250,000 CASH ONLY

ISSUE DATE: NOVEMBER 03, 2016

ON THURSDAY, NOVEMBER 03, 2016 I ASSISTED DETECTIVES FROM WEST VIRGINIA IN LOCATING LENA MARIE LUNSFORD-CONAWAY WITHIN PINELLAS COUNTY. LENA WAS ARRESTED FOR THE ABOVE-LISTED WARRANT.

Contrary to Florida Statute/Ordinance _____.

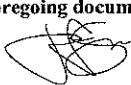
ARREST DATE: 11/3/2016 Time 11:41 AM . Aggravating/Mitigating Factors _____

Booking Officer: POWERS, M 54040 Amount of Bond NONE 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: 11/3/2016 12:08:02 PM

Pursuant to F.S. 92.525 and under penalty of perjury, I declare that I have read the foregoing document and that the facts in it are true.  _____ Declarant Signature DETECTIVE JOHN SUESS 58672 Printed Name _____ PINELLAS COUNTY SHERIFF Agency 03309746 Declarant ID#		REQUEST FOR INVESTIGATIVE COSTS, F.S. 938.27(1) <table style="width:100%;"> <tr> <th>DATE</th> <th>OFFICER</th> <th>HOURS X PAY RATE</th> <th>OR</th> <th>COST</th> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table> OTHER – Describe _____ Continuation sheet ☐ Yes ☐ No TOTAL \$ <u>\$0.00</u>	DATE	OFFICER	HOURS X PAY RATE	OR	COST																				
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