

THIS DOCUMENT IS OF POOR QUALITY

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

Felony ☒ Misdemeanor ☐ Ordinance ☐ Warrant ☐ Traffic ☐									
Charge: CONVICTED FELON IN POSS OF FIREARM		CIS Code: 89-00940		Court Case No.:					
Defendant's Name (Last, First, Middle): HERRICK, KEVIN RICHARD		DOB: 10-5-66	Sex: M	Race: W	Ht: 601	Wt: 200	Hair: BRN	Eyes: BLU	Skin: MD
Aliases: NONE		Driver's License No.: HC20-316-66-363		State: FL		Residence Type: ☒ 1. City ☐ 2. County ☐ 3. Florida ☐ 4. Out-of-State		Citizenship: U	
Local Address (Street, City, State): SAME		Zip Code:		Telephone:		Place of Birth: 722/NO15		Citizenship:	
Permanent Address (Street, City, State, Zip Code): 4015 HUDOBON DR. LARGO FL 34640		Telephone: 333-1195		Employed by/School: HILLTOPS MHO					
Scars, Tattoos, Unique Physical Features: SCAR ON RGT ARM		Indication of Drug Influence: ☐ Y ☒ N ☐ UNK		Indication of Alcohol Influence: ☐ Y ☒ N ☐ UNK					
Weapon Seized/Type: 1. Yes ☒ 2. No ☐		DOB: 10-5-66		Sex: M		Race: W		In Custody: Yes ☐ No ☐	
Co-defendant's Name (Last, First, Middle): NONE		DOB: 10-5-66		Sex: M		Race: W		In Custody: Yes ☐ No ☐	
Co-defendant's Name (Last, First, Middle):		DOB:		Sex:		Race:		In Custody: Yes ☐ No ☐	

The undersigned certifies and swears that he has just and reasonable grounds to believe, and does believe that the above named defendant on the 15 day of JULY, 1989, at approximately 1215 a.m. ☐ p.m. ☐ at 4015 HUDOBON DR. in Pinellas County did:

HAVE IN HIS POSSESSION, A RUGER 45 CALIBER HANDGUN, LOADED WITH FIVE AMMUNITION ROUNDS. TO WIT: DEFENDANT HAD A HANDGUN IN BETWEEN HIS MATTRESS IN HIS BEDROOM. DEFENDANT HAD ALREADY BEEN PLACED UNDER ARREST FOR ADMPT. HON. AND SEXUAL BATTERY. DEFENDANT IS A CONVICTED FELON AND HAS ESCAPED FROM PRISON SCARE.

List other traffic citations:

Contrary to Florida Statute 790.23
County ☐ City ☐ State ☐ Ordinance ☐

Sworn to and subscribed before me this

15 day of July, 1989

Affiant (Signature)

Printed Name

Oran LaVigne

Agency

LARGO

SPN (CJIS)

549482

NOTARY PUBLIC
My Commission expires: 7-17-10

Jail (Located)

Arrest Date

Time

a.m. ☐ p.m. ☐

Amount of Bond 15,000

Aggravating Factors

ESCAPE RISK, NUMEROUS CHARGES

Booking Officer

Bond out

(Mo / Da / Yr)

Time

(a.m.)
(p.m.)

By:

NOTICE TO APPEAR ONLY

ORDINANCE VIOLATION ☐

You MUST comply with EITHER A or B:

A. Comply with the instructions on the reverse side of this form and pay the fine for a

Category _____ offense within ten (10) days of this Notice.

Fine amount: _____

B. Appear at 5100-144th Ave. North, Criminal Court Complex, Courtroom A, Clearwater, Florida,

on the _____ day of _____, 19____, at _____ a.m. ☐ p.m. ☐

MISDEMEANOR ☐

You MUST appear at

☐ 5100-144th Ave. North, Criminal Court Complex

☐ 14500-49th St. North, Juvenile Detention Center

(Courtroom)

Clearwater, Florida,

on the _____ day of _____, 19____,

a.m. ☐ p.m. ☐

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

Defendant's Signature

Copies to:

White - Court
Blue - State Attorney

Address

Green - Jail
Pink - Police Dept.

Goldenrod - Defendant

Date of Receipt of Notice

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

Felony ☒ Misdemeanor ☐ Ordinance ☐ Warrant ☐ Traffic ☐								
Charge <u>Kidnaping</u>	CIS Code	Report No. <u>89-6401</u>	Court Case No.					
Defendant's Name (Last, First, Middle) <u>KEVIN MICHAEL</u>	DOB <u>10-3-66</u>	Sex <u>M</u>	Race <u>W</u>	Ht <u>601</u>	Wt <u>200</u>	Hair <u>BRN</u>	Eyes <u>BLU</u>	Skin <u>MC</u>
Alias <u>Kevin McArthur</u>	Driver's License No. <u>F1620-578-6636</u>	State <u>FL</u>	Residence Type <u>IN</u>	City <u>Clearwater</u>		County <u>Pinellas</u>		Out-of-State
Local Address (Street, City, State) <u>Same</u>	Zip Code	Telephone	Place of Birth <u>FLORIDA</u>		Citizenship <u>USA</u>			
Permanent Address (Street, City, State, Zip Code) <u>4015 AUBURN DR. LEO 34640</u>		Telephone <u>335-1195</u>		Employed by/School <u>HILLTOP MHP</u>				
Scars, Tattoos, Unique Physical Features <u>Shin on Rt Arm</u>		Indication of Drug Influence		Y ☐ N ☒ UNK ☐	Indication of Alcohol Influence		Y ☐ N ☒ UNK ☐	
Weapon Seized/Type 1. Yes ☐ 2. No ☒		Co-defendant's Name (Last, First, Middle)		DOB	Sex	Race	In Custody: Yes ☐ No ☐ Felony ☐ Misd ☐	
Co-defendant's Name (Last, First, Middle) <u>ADAM</u>		DOB		Sex	Race	In Custody: Yes ☐ No ☐ Felony ☐ Misd ☐		

The undersigned certifies and swears that he has just and reasonable grounds to believe, and does believe that the above named defendant on the 15 day of July, 1989, at approximately 4:15 a.m. ☐ p.m. ☐ at 4017 Auburn Dr in Pinellas County did kidnap the victim a wife and hold her against her will to commit the offense of sexual battery to wit: by forcibly holding the victim down on her back by sitting on top of her and pinning her arms down with his legs and holding a knife to the victim's throat. The victim was held against her will without lawful authority and committed the act of sexual battery by touching his penis to the lips of the victim while engaged in this act.

List other traffic citations:

Contrary to Florida Statute ☒ 787.01
County ☐ City ☐ State ☐ Ordinance

Sworn to and subscribed before me this

15 day of July, 1989

Affiant (Signature)

Printed Name

Officer S. McMullen

Agency

FL0120800

SPN (CJS)

54604

NOTARY PUBLIC

My Commission expires:

5-11-91

Jail (Located)

Arrest Date

Time

a.m. ☐ p.m. ☐

Amount of Bond

Aggravating Factors

Booking Officer

5000

Bond out

(Mo / Da / Yr)

Time

(a.m.)

(p.m.)

By:

NOTICE TO APPEAR ONLY

MISDEMEANOR ☐

You MUST appear at

- ☐ 5100-144th Ave. North, Criminal Court Complex
☐ 14500-49th St. North, Juvenile Detention Center

(Courtroom)

, Clearwater, Florida,

on the ____ day of _____, 19____,

a.m. ☐ p.m. ☐.

ORDINANCE VIOLATION ☐

You MUST comply with EITHER A or B:

- A. Comply with the Instructions on the reverse side of this form and pay the fine for a Category _____ offense within ten (10) days of this Notice.

Fine amount: _____

- B. Appear at 14500-49th St. North, Juvenile Detention Center, Courtroom H, Clearwater, Florida,

on the ____ day of _____, 19____, at _____ a.m. ☐ p.m. ☐.

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

Defendant's Signature

Address

Date of Receipt of Notice

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

Charge	CIS Code	Report No.	Court Case No.
Sexual Battery		89-6440	
Defendant's Name (Last, First, Middle)	DOB	Sex	Race
Herrick Kevin Richard	10-3-66	M	W
Weight	Height	Hair	Eyes
200	6'1"	BRN	BLU
Skin	State	Residence Type	City
Med	FL	2. County	4. Out-of-State
Local Address (Street, City, State)	Zip Code	Telephone	Place of Birth
Same as below			US
Permanent Address (Street, City, State, Zip Code)			Telephone
4015 Audubon Dr Largo FL 34640			535 1195
Scars, Tattoos, Unique Physical Features	Employed by/School		
Scar on rt.	Hillcrest MHP		
Weapon Seized/Type	Indication of Drug Influence	Y N UNK	Indication of Alcohol Influence
1. Yes 2. No			
1. Yes 2. No			
Co-defendant's Name (Last, First, Middle)	DOB	Sex	Race
None			
Co-defendant's Name (Last, First, Middle)	DOB	Sex	Race

The undersigned certifies and swears that he has just and reasonable grounds to believe, and does believe that the above named defendant on the 15 day of July, 19 89 at approximately 12:15 a.m. ☒ p.m. ☐ at 4015 Audubon Dr in Pinellas County did attempt to force his penis into the mouth of victim tried to get victim to consent by holding a scalpel to her ~~throat~~ and threatening to kill her baby if she didn't comply with his demands. Placing the victim in fear of bodily harm and permanent death.

Said victim known to affiant, and related these facts.

List other traffic citations:

Contrary to Florida Statute ☒ 794.011 (3)
County ☐ City ☐ State ☐ Ordinance

Sworn to and subscribed before me this	Affiant (Signature)	Agency
15 day of July, 19 89		Largo PD
NOTARY PUBLIC	Printed Name	SPN (CJIS)
My Commission expires: 1-31-90	Brian Calvigne	844482

Jail (Located)	Arrest Date	Time
Amount of Bond	Aggravating Factors	
50,000	Has escaped prison before, numerous charges	
Booking Officer	Bond out	Time

NOTICE TO APPEAR ONLY

MISDEMEANOR ☐

ORDINANCE VIOLATION ☐

You MUST appear at

You MUST comply with EITHER A or B:

- ☐ 5100-144th Ave. North, Criminal Court Complex
☐ 14500-49th St. North, Juvenile Detention Center

A. Comply with the Instructions on the reverse side of this form and pay the fine for a Category _____ offense within ten (10) days of this Notice.

Fine amount: _____

B. Appear at 5100-144th Ave. North, Criminal Court Complex, Courtroom A, Clearwater, Florida.

on the _____ day of _____, 19 _____, at _____ a.m. ☐ p.m. ☐

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

Defendant's Signature

Address

Date of Receipt of Notice

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

OETS NUMBER		Felony ☒ Misdemeanor ☐ Ordinance ☐ Warrant ☐ Traffic ☐							
Charge <u>Attempt Homicide</u>		CIS Code <u>89-6440</u>	Report No. <u>89-6440</u>	Court Case No.					
Defendant's Name (Last, First, Middle) <u>Heerick Kevin Richard</u>		DOB <u>10/31/66</u>	Sex <u>M</u>	Race <u>W</u>	Ht <u>6'1</u>	Wt <u>200</u>	Hair <u>brn</u>	Eyes <u>blue</u>	Skin <u>med</u>
Alias		Drivers License No. <u>H 620516636 3</u>		State <u>FL</u>		Residence Type <u>City</u>		City <u>02 Florida</u>	
Local Address (Street, City, State) <u>Same as below</u>		Zip Code		Telephone		Place of Birth <u>ILL</u>		Citizenship <u>US</u>	
Permanent Address (Street, City, State, Zip Code) <u>4015 Audubon Dr Largo FL 34640</u>		Telephone <u>5331195</u>		Employed by/School <u>Hilcrest MHS</u>					
Scars, Tattoos, Unique Physical Features <u>Shola on rt arm</u>		Indication of Drug Influence Y ☐ N ☒ UNK ☐		Indication of Alcohol Influence Y ☐ N ☒ UNK ☐					
Weapon Seized/Type 1. Yes ☒ 2. No ☐ <u>Ruger 45 Scalpel</u>		DOB		Sex		Race		In Custody Yes ☐ No ☐	
Co-defendant's Name (Last, First, Middle) <u>none</u>		DOB		Sex		Race		In Custody Yes ☐ No ☐	
Co-defendant's Name (Last, First, Middle)		DOB		Sex		Race		In Custody Yes ☐ No ☐	

The undersigned certifies and swears that he has just and reasonable grounds to believe, and does believe that the above named defendant, on the 15 day of July, 19 89, at approximately 0015 a.m. ☒ p.m. ☐ at 4017 Audubon in Pinellas County did attempt to unlawfully kill a human being by subjects engagement in Burglary and Sexual Battery. To wit: Subject had unlawfully entered a premises armed with the intent to commit Sexual Battery. While escaping from victim's boyfriend, he stabbed said boyfriend twice in the chest and stomach area, then fled the scene. He did this with a scalpel/knife.

List other traffic citations:

Contrary to Florida Statute ☒
County ☐ City ☐ State ☐ Ordinance ☐

Sworn to and subscribed before me this

15 day of July, 19 89

Affiant (Signature)

Printed Name

NOTARY PUBLIC

My Commission expires:

(Seal)

Jail (Located)

Arrest Date

Time

a.m. ☐ p.m. ☐

Amount of Bond

Aggravating Factors

Booking Officer

Bond out

(Mo / Da / Yr) Time

(a.m.)
(p.m.)

By

NOTICE TO APPEAR ONLY

MISDEMEANOR ☐

You MUST appear at

- ☐ 5100-144th Ave. North, Criminal Court Complex
☐ 14500-49th St. North, Juvenile Detention Center

(Courtroom)

on the _____ day of _____, 19 _____

at _____ a.m. ☐ p.m. ☐

ORDINANCE VIOLATION ☐

You MUST comply with EITHER A or B:

- A. Comply with the Instructions on the reverse side of this form and pay the fine for

Category _____ offense within ten (10) days of this Notice.

Fine amount: _____

- B. Appear at 5100-144th Ave. North, Criminal Court Complex, Courtroom A, Clearwater, Florida,

on the _____ day of _____, 19 _____, at _____ a.m. ☐ p.m. ☐

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

Defendant's Signature

Copies to:

White - Court
Blue - State Attorney

Address

Green - Jail
Pink - Police Dept.

Goldenrod - Defendant

Date of Receipt of Notice

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

Case Number 2430372

Felony ☒ Misdemeanor ☐ Ordinance ☐ Warrant ☐ Traffic ☐

Charge ARMED BURGLARY C/S Code 55-6470 Report No. 8711425 Court Case No. SCFANC

Defendant's Name (Last, First, Middle) HERRICK, KEVIN RICHARD DOB 10-3-66 Sex M Race W Ht 601 Wt 200 Hair BRN Eyes BLU Skin MED

Alias None Drivers License No. 1462051666363 State FL Residence Type 1 2 Court 3 Florida 4 Out of State

Local Address (Street, City, State) SAME AS BELOW Zip Code 34640 Telephone 535-1195 Place of Birth ILLINOIS Citizenship US

Permanent Address (Street, City, State, Zip Code) 4015 AUDUBON DR LARSO FL 34640 Telephone 535-1195

Scars, Tattoos, Unique Physical Features Shc. la on rt arm Employed by/School Intercoast MAP

Weapon Seized/Type 1 Yes 2 No Ruger 45 Scalpel Indication of Drug Influence Y N UNK Y N UNK Indication of Alcohol Influence Y N UNK

Co-defendant's Name (Last, First, Middle) NONE DOB DOB Sex Sex Race Race In Custody Yes ☐ No ☐ Felony ☐ Misd ☐

Co-defendant's Name (Last, First, Middle) NONE DOB DOB Sex Sex Race Race In Custody Yes ☐ No ☐ Felony ☐ Misd ☐

The undersigned certifies and swears that he has just and reasonable grounds to believe, and does believe that the above named defendant on the 15 day of July, 1989, at approximately 1215 a.m. ☒ p.m. ☐ at 4017 AUDUBON DR. in Pinellas County did:

enter or remain in a structure or a conveyance with the intent to commit an offense therein Did make an assault or battery upon a person and was armed to wit Did enter premises without being invited carrying a scalpel and attempted to sexually battery one victim Then when thwarted by boyfriend of the first victim did stab said boyfriend twice and battered him several times while escaping from the scene.

other traffic citations:

Contrary to Florida Statute 810.02(b)County ☐ City ☐ State ☐ Ordinance ☐

Subscribed before me this

5 day of July, 1989

Affiant (Signature)

Printed Name

Agency

LARSO P.D.

SPN (CJIS)

849482Y PUBLIC
Commission expires: FF8117-10 (Seal)

located)

Arrest
Date

Time

a.m. ☐ p.m. ☐

of Bond

Aggravating Factors

Officer

Bond out

(Mo / Da / Yr)

Time

(a.m.)

(p.m.)

By

CHARGES

NOTICE TO APPEAR ONLY

MEANOR ☐ORDINANCE VIOLATION ☐

MUST appear at:

You MUST comply with EITHER A or B:

144th Ave. North, Criminal Court Complex
J-49th St. North, Juvenile Detention Center

A. Comply with the Instructions on the reverse side of this form and pay the fine for a Category _____ offense within ten (10) days of this Notice.

(Courtroom) _____, Clearwater, Florida.

Fine amount _____

_____ day of _____, 19____.

B. Appear at 5100-144th Ave. North, Criminal Court Complex,
Courtroom A, Clearwater, Florida,_____ a.m. ☐ p.m. ☐on the _____ day of _____, 19____, at _____ a.m. ☐ p.m. ☐.

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

Defendant's Signature

Sec 3/1/88

Copies to

White - Court
Blue - State Attorney

1

Address

Green - Jail
Pink - Police Dept

Goldenrod - Defendant

Date of Receipt of Notice