MARREST SWORN COMPLAINT HOLD EIGHTH JUDICIAL CIRCUIT SWORN COMPLAINT HOLD HOLD BIGHTH JUDICIAL CIRCUIT									TO APPE	AR		
OBTÉ NUMBER: 010807045% AGENCY CASE REPORT NUMBER: 02-24-004534												
-	NAME OF SUBJECT (LAST, FIRST, MI):			AL	IAS/MAIDEN:				02-2	4-0045	34	
	LOVE, AUSTIN KYLE 911 HOME ADDRESS (STREET, APARTMENT NUMBER, ETC.): ST. City: ST.											
	911 HOME ADDRESS (STREET, APARTMENT NUMBER, ETC.):	n turi čin zvi	r ar ara	STATE:			ZIP COL		TELEPHONE NUMBER:			
	1577 NW 29TH RD 4 BUSINESS / SCHOOL ADDRESS (STREET, APARTMENT NUMBER, PO BOX	(,ETC.):	GAINESVILLE F			FL_	326	<u>U5</u>	(352) 275-8656 TELEPHONE NUMBER:			
D	MAILING ADDRESS (PO BOX, ETC. IF DIFFERENT THAN 911 ADDRESS): SCARS, MARKS, TATTOOS, FACIAL HAIR, UNIQUE PHYSICAL FEATURES (LOCATION, TYPE, DESCRIPTION):											
F	MAILING ADDRESS (PO BOX, ETC. IF DIFFERENT THAN 911 ADDRESS):	JOS, FACIAL	HAIK, UNIQUE F	'HYSICAL FEAT	JRES (LUCATI	UN, ITPE, U	ESCRIPTION):					
E N	RACE: SEX: DATE OF BIRTH;	HEIGHT:	HEIGHT: WEIGHT:		HAIR COLOR:		EYE COLOR	:	COMPLEXION		JILD:	
D	☐ BLACK ☐ ASIAN/ORIENTAL M 02/17/19	93 5'09		145	BLO		Green	Δ	LIGHT	TRY OF CITIZE	Mrc	3
A N	DRIVERS LICENSE / STATE ID NUMBER: STATE OF DL / ID:			PHOTO NUA	IBER:	PLACE OF BIR	nesvi	ll a	1	TED STAT		MERICA
T		SPN NUMBER:	!!	AGE	NCY OR! NUMBI		SO ID / AGE			BOOKING NU	MBER:	
	STAFF 0010100 DATE OF ARREST: TIME OF ARREST (MILITARY): DATE OF BOOKING: TIME OF BOOKING (MILITARY)											
	4565 NW 13TH ST				1/2025 07:		a mila					
	SUBJECT IDENTIFIED BY WHOM (VICTIM, WITNESS, LEO, ETC.): SUBJECT 'S NAME VERIFIED BY (PHOTO ID, FAMILY MEMBER, KNOWN TO OFFICER, ETC.):											
<u> </u>	LEIBRANDT, CARL #1 (NAME):	DATE OF BIRTH:	RACE:	SEX:	OAVID COURT NUM	MBER:	□ AF	RESTED	TO	FELONY	13	UVENILE:
ő	,						□ sv	VORN COMF	PLAINT	MISDEMEANO TRAFFIC CAS		YES NO
DEF	#2 (NAME):	DATE OF BIRTH:	RACE:	SEX:	COURT NUM	MBER:	☐ AF	RRESTED		FELONY MISDEMEANO	[2	UVENILE:
F								rokin comi ra		TRAFFIC CAS	E [ON
Å	JUVENILE: DISPOSITION: NAME OF PARENT / GUARDIAN (NO	OTIFIED LIYES L	Cas	、些	~! ~	~ ~ ~ ;	5001	791-	SA	WORK TELE	PHONE NO	MBEK:
ķ	SSUED NTA AND RELEASED PARENT / GUARDIAN HOME ADDRESS (STREET, APARTMENT #, PO BOX,	ETC.): CITY:	Cws	<u>u. (</u>	<u> </u>	25 CH	STATE:	ZIP COD) <u>) </u>	HOME TELEPHONE NUMBER:		
Ė	•							7	- <u>-</u>	3		
W	#1 (NAME):	ADDRESS:		······				Ţ	<u> </u>	TETEPHONE	NUMBER:	
N												
STHOO	` ′							7	င်္ကြာတ် ကြောက်] 1	XE	I .
Ç	OFFENSE DESCRIPTION: ANIMAL CRUELTY FELONY			X FELON¹ ☐ MISDEN	MEANOR	COMPLETE S	TATUTE / ORD	ć	DOM:	ARREST	OTIFICATION (STATE OF THE STAT	□ NO
H A R	WARRANT □ JUVENILE PU ORDER □ CIVIL ORDER □ CITI	ATION DATE O	OF OFFENSE:		C NTA	828-12 SE:	(2) Bail amount		<u> </u>	PELEASI VICTIM'S TEI		
Ğ	☐ CAPIAS NUMBER:		3/31/20	25	07:0	no l		;	73m	Ċò		
1	VICTIM (NAME):				ER, PO BOX, ET		CITY:	1	- P.	STATE:	ZIP CODE	i
Ė	The State Of Florida OFFENSE DESCRIPTION:			☐ FELON	7	COMPLETE S	TATUTE / ORD	INANCE NU	MBER:		OTIFICATIO	N;
CH				☐ MISDEM							YES YES	
A R	☐ WARRANT ☐ JUVENILE PU ORDER ☐ CIVIL ORDER ☐ CITI	ATION DATE O	OF OFFENSE:		TIME OF OFFENS	BAIL AMOUNT	MOUNT:			VICTIM'S TELEPHONE NUMBER:		
GE	NUMBER:	1.000.000	ACCT 1210		FO BO DOV FT	omv.			STATE: ZIP CODE:			
2	VICTIM (NAME):	ADDRESS (SII	DDRESS (STREET, APARTMENT NUM			IMBER, PO BOX, ETC.): CITY:				SIAIE.	ZIP CODE	:
PR	THE FOLLOWING INCIDENT OCCURRED AT (ADDRESS / LOCATION):	CITY	OF:					COUNTY OF			1	TATE OF:
OSE	1577 NW 29TH RD - 4 On the above date and time, t	G.	AINES	VILLE	, inst	inted	PROCE		CHUA	hmen+		LORIDA
TC:	dog while taking it outside of				-			_	puits	imenc	10 11	T.2
Ĭ								•				
Ĕ	The DEF is seen on RING doort		-	•	-	_						
S	the DEF's legs. The DEF then											
M	dog (approximately 5-6 feet of "bitch ass fuck boy".	orr the	ground	1), a	nd cari	ry it o	lown t	ne st	airs c	arrinc	, lt	a
Ŕ	bitten ass ruck boy .											
N	MANDATORY APPEARANCE IN COURT AT:						DATE OF	APPEARANC	Œ:	TIME OF A	PEARANCI	E AM
T	TAGREE AND PROMISE TO COMPLY AND ANSWER TO THE CHARGES AT					ANT (SIGNATUR	<u> </u> ?E):			DA	TE:	LIPM
Α	TO APPEAR. WILLFUL REFUSAL TO ACCEPT AND SIGN THIS NOTICE TO LUNDERSTAND MY SIGNATURE IS NOT AN ADMISSION OF GUILT OR WA	APPEAR MAY RES	ULT IN PHYS		r.	·						
J	SWORN TO AND SUBSCRIBED BEFORE ME THIS:	2416	<u> </u>			ABOVE, AND REV OF MY KNOWLE			AGES AND STAT	EMENTS ARE	TRUE AND	CORRECT
U R	1 - Jan Wall To Vo	HOV	ر کک			LEIBB	ANDT,	CARL	P			
A	SIGNATURE:	TVL			SIGNATURE:	MINESVILLI	E POLICE	DEDADT	'MENT '	EO ID XII HADET	. 1121	
il .	171LC				mounos, or	ana and William		MAN. SASSA	arendere Li	ID INVINIDEF	······································	

AGENCY

DEFENDANT

PAGE _1 _ OF _2

□ SWORN COMPLAINT □ HOLD □ JUVENILE □ NOTICE TO APPE									TO APPEAR					
ОВ	OB'S NUMBER: SPN NUMBER: SPN NUMBER:													
AGI	ENCY ORI NUMBER:	FI					AGENCY CASE REPORT NUMBER:							
 	0010100 IL NAME OF SUBJECT (LAST, FIRST, MI):		EIGHTH JUDICIAL CIRCUIT							02-24-004534				
D	LOVE, AUSTIN KYLE	ALIAS / MAIDEN:												
E F	RACE: SEX: DATE OF SEX: DATE OF SEX:		HT: WEIGHT: JAIL NUMBER:					SO ID / AGENCY ID / NUMBER:						
w	☐ BLACK ☐ ASIAN/ORIENTAL M 02/17/1993 5'09 145								TELEPHONE	NUMBER:				
İ										West rest to the AULUSCO				
THE SE	#4 (NAME): ADDRESS:								TELEPHONE NUMBER:					
c	OFFENSE DESCRIPTION:	FELONY COMPLETE STATUTE / OR MISDEMEANOR						RDINANCE N	UMBER:		NOTIFICATION: : YES NO			
HA	☐ WARRANT ☐ JUVENILE PU ORDER ☐ CIVIL ORDER	☐ TRAFFIC ☐ NTA					BAIL AMOUN	IT:			RELEASE: ☐ YES ☐ NO VICTIM'S TELEPHONE NUMBER:			
Ğ	☐ CAPIAS NUMBER:													
-	VICTIM (NAME):	***************************************	ADDRESS (STREET, APARTMENT NUMBER, PO BOX, ETC.): CITY:						STATE: ZIP CO			ZIP CODE:		
<u>-</u>	OFFENSE DESCRIPTION:		FELONY COMPLETE STATUTE.						E / ORDINANCE NUMBER:			NOTIFICATION:		
H					☐ TR	DEMEANOR AFFIC NTA					ARREST: YES NO RELEASE: YES NO			
R	☐ WARRANT ☐ JUVENILE PU ORDER ☐ CIVIL ORDER ☐ CAPIAS	CITATI	ON D	DATE OF OFFENS	E:	TIME OF OFFEN	NSE: BAIL AM		AMOUNT:		VICTIM'S TELEPHONE NUMBER:			
Ē	NUMBER: VICTIM (NAME):			SS (STREET, APA	RTMENT N	UMBER, PO BOX, ET	rc.): CITY:		***************************************		STATE:	ZIP CODE:		
	OFFENCE DECEMBRICAL		<u> </u>		∏ FE	i auni	LCOUGLETES	TATUTE LOC	MINANCE N	INADEO.	LVICTIMA	NOTIFICATION:		
G H	OFFENSE DESCRIPTION:				☐ MIS	BDEMEANOR AFFIC	COMPLETES	STATUTE / ORDINANCE NUMBER:		OMDER.	ARREST	YES NO		
R	☐ WARRANT ☐ JUVENILE PU ORDER ☐ CIVIL ORDER ☐ CAPIAS	ON D	DATE OF OFFENS		TIME OF OFFEN	SE: BAIL AMOU		UNT:			LEPHONE NUMBER:			
G E	NUMBER: VICTIM (NAME):	MBER:				JMBER, PO BOX, ETC.): CITY:		CITY:	177-		STATE:	ZIP CODE:		
	(54112).													
CH	OFFENSE DESCRIPTION:	MISDEMEANOR				COMPLETE S	PLETE STATUTE / ORDINANCE NUMBER:			ARREST	NOTIFICATION: ': YES NO E: YES NO			
A R	☐ WARRANT ☐ JUVENILE PU ORDER ☐ CIVIL ORDER ☐ CITATI			DATE OF OFFENS		RAFFIC NTA TIME OF OFFENSE: B		BAIL AMOUNT:		VICTIM'S TELEPHONE NUMBER:				
G E	CAPIAS NUMBER:	TANDDESS STREET ADARTMENT			INDEA DO DOVETO V		CITY:		STATE: ZIP CODE:					
-	VICTIM (NAME):	ADDRES	ADDRESS (STREET, APARTMENT NUMBER, PO BOX, ETC.):			C.):								
	The DEF then throws the	log ba	ck o	nto the	gro	ound (con	crete	surfa	ice),	and hi	ts the	dog		
	again on the head. The DE off the RING doorbell can											TICKS		
P R	occasions she has witness											:k		
0 S	during the dogs walks.													
E	The DEF first agreed to s													
Ų	because it peed on his fl statements admitting to h													
Å.	work. Animal control resp													
s	internal injuries.													
Ŭ	The DEF was identified by	FL D	L, W	IIT, and	RIN	IG survei	llance	vide	ю.	*~ C_	.			
M A										CO:	2025 APR -	* -		
R Y											哥			
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CON										227				
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D												1.3		

Form Date (Revised 1/00) COURT STATE ATTORNEY AGENCY DEFENDANT PAGE 2 OF 2