

Leon County Pretrial Defendant Information

GLEE, AARON (SPN# 259041)

Run Date/Time
30-MAY-2020 02:21 AM

Interview Date 30-MAY-2020

Interviewed by GRIGGS, QUINNETTI

Note: READ TO EACH PERSON INTERVIEWED

The information provided during this interview will be used to make a decision as to the nature of your pretrial release including the amount of any monetary bond. You are not required to answer any questions and you have the right to consult an attorney before providing any information.

Do you consent to this interview? Unavailable, Behavior Management Issue

SECTION 1 - General Information

Last name: GLEE First name: AARON Middle: LEE
Aliases: 259041 GLEE / Sex: M Race: BLACK
SS#: Age: 49 D.O.B: 08 APR 1971
Email



ORAS Risk Level --- INCOMPLETE

SECTION 2 - Current Case Number(s) and Charge(s)

JIS Case#	Offns. Date	Statute#	Charge Literal	Bond \$	Bond Type
2020CF1444A1	29-MAY-20	784.045 1A1	AGGRAV BATTERY CAUSE BODILY HARM OR DISABILITY		

SECTION 3 - Pending Leon County Case(s)

JIS Case#	Offns. Date	Statute#	Charge Literal	Last Court Date
NONE				

SECTION 4 - Criminal History Summary (Originals Attached)

JIS Case#	Offns. Date	Statute#	Charge Literal	Final Disposition
2019MM693A1	01-MAR-19	893.13 6B	FTA/POSSESSION OF CANNABIS	NOLP 14-AUG-19

NONE

DMV: LICENSE NOT VALID
FAIL TOPAY CT FIN OBL X7, DL CANCELLED, THEFT OF MTR VEH/PARTS/COMPONENTS, VIO CHA 893
CONTOLD SUB

DOM INJ: NO RECORD FOUND

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SECTION 5 - Current Court Ordered Supervision

Currently on Probation?	NO	Details	No probation cases as of 30-MAY-20	Officer:
Currently on Pretrial?	NO	Details	No pretrial-released cases as of 30-MAY-20	Officer:
Currently on Bond?		Details	No bond-released cases as of 30-MAY-20	Agent:
Currently on Parole?	NO	Details		Officer:

Start of Self Assessment

Any prior arrests or convictions?	How old were you when arrested first time?	What is it for?
Any FTAs filed as an adult?	How many times?	How many FTAs in the last 2 years?
What happened as a result of FTAs?		
Incarcerated in Jail after conviction?	How many times?	Have you been in prison? How many times?

SECTION 6 - Employment/School Information

Employed at time of arrest?	How many hours weekly?	Type of work?
Employer:		Phone# _____
Are you in school?	If Yes, full-time or part-time	
If not employed or enrolled in school, are you retired, disabled, or full-time home-maker?		

SECTION 7 - Residency/Time in 2nd Judicial Circuit Information

Present Address:

City: Tallahassee	State: FL	Zip Code:	Rent/own: OTHER
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How long have you lived in your current residence? Is this primary residence?

if not primary residence, please explain

Reason if moved in the last 6 month:

Live with family/friend? NO Relationship?

Membership of local organizations?

Responsible adults willing to provide supervision?

Trade or occupational licenses?

SECTION 8 - Family Ties/References

Marital Status: SINGLE

References	Name	Address	Phone#
	Name	Address	Phone#
	Name	Address	Phone#

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SECTION 9 - Medical History

Current Health Condition: GOOD		Health Insurance	
Treated for Physical/Mental Disorder?	NO	Month/Year?	
Treated for Drug/Alcohol Use?	NO	Month/Year?	
Mental Disorder?	NO	Receive SSI/Disability \$\$\$?	NO
Last Treatment		How Much Per Month?	
Doctor's Name		Taking Med. As Prescribed?	NO
Diagnosed?	NO	Name of Mental Facility	NO
On Prescription?	NO	Location	
Have ever had problems with non-alcohol drug:		If yes, explain	
Have been arrested for drug use?		If yes, explain	When?
What drugs have you used?			Drug of choice?
How often on aver. have you used			When was the last time you used drug?
Drug use affected parts of your life?			For exp., a doctor told you qui
Had problems at work b/c of drugs?			How family feel about drug use?
Rate the severity of drug use by your self (1=no problems; 5 = many)			

SECTION 10 - Financial Information (Did client complete financial affidavit? NO)

Public Defender Requested? NO	Number of Dependents:	AFDC/SSI Recipient? NO
Other Income		
Income From Job (after tax)0	Unemployment:	SSI, Food Stamps:
Spouse Income:	AFDC:	Rental Income:
Child Support/Alimony:	Financial Aid to School	Parents/Grants/Others:
S.S./Retirement/Disability:	Direct Financial Aid:	Email:
Monthly Debts		
Auto Loans:	Rental/Mortgate:	Child Support:
Utilities:	Gas/Transportation:	Phone:
Cable:	Student Loans:	Food:
Day Care:	Car Insurance:	CREDIT CARD

What is the maximum amount of financial security that you can post or pay up front within 24 hours of this arrest? This amount should include any assistance that you can reasonably expect from family or friends:

I certify that all information that I have provided is true and correct to the best of my knowledge.

Defendant

Probation/Pretrial Officer

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PART II. ORAS Pretrial Assessment Tool

	ORAS Scoring	Verified
1. Age at First Arrest 0 = 32 or older		[YES]
2. Number of Failure to Appear Warrants 0 = None 1 = 1 warrant for FTA 2 = 2 or more FTA warrants		[YES]
3. Three or more prior incarcerations 0 = No 1 = Yes		[YES]
4. Employed at the Time of Arrest 0 = Yes, full-time 1 = Yes, part-time 2 = Not employed		[NO]
5. Residential Stability 0 = Lived at current residence in past six months 1 = Not lived at the same residence		[NO]
6. Illegal drug use during past six months 0 = No 1 = Yes		[NO]
7. Severe drug use problem 0 = No 1 = Yes		[NO]
Total Score	---	INCOMPLETE