

VOLUSIA COUNTY COURT ACTION FORM

CASE: 2025 102222 CFDL
STATE OF FLORIDA
VS
MATTHEW MOULTON
VCCF BKG# 1160048
SPN: 991453
TRIAL DATE: 12/01/2025

COURT/SESSION TYPE: Pre-trial-PD (Atty. L-Z)
DATE: 11/10/2025
TIME: 08:30 AM
JUDGE: MCNEILLY Div. 07
ATTY: ALEXIS NAVA-MARTINEZ
BNA: _____
LOCATION: DeLand Courtroom 4C, 101 N ALABAMA AVENUE, DELAND, FLORIDA

LAURA E. ROTH
CLERK OF THE CIRCUIT COURT
VOLUSIA COUNTY, FLORIDA
P.O. BOX 6043
DELAND, FL 32721-6043

PARTIES PRESENT	RELEASE ACTIONS	Custody/Capias/Estreat	Continued To: <input type="checkbox"/> By Def. <input type="checkbox"/> By State <input type="checkbox"/> By Court <input type="checkbox"/> Waived Spdy.Tri
<input checked="" type="checkbox"/> DEF. APPEARED <input checked="" type="checkbox"/> APP.W/COUNSEL <input type="checkbox"/> DEF. COUNSEL APP. W/OUT DEF. <input type="checkbox"/> DEF. FAILED TO APPEAR	<input type="checkbox"/> TOTAL BOND FOR CASE SET <input type="checkbox"/> AT \$ _____ <input type="checkbox"/> DEF. ROR'D <input type="checkbox"/> RELEASE TO PTS <input type="checkbox"/> RELEASE TO PTS W/BOND <input type="checkbox"/> OTHER: _____ <input type="checkbox"/> NO CONTACT W/VICTIM <input type="checkbox"/> NO VIOL. CONTACT W/VICTIM <input type="checkbox"/> OTHER:	<input type="checkbox"/> CAPIAS ISSUED-BOND SET <input type="checkbox"/> AT \$ _____ <input type="checkbox"/> BOND ESTREATED <input type="checkbox"/> DO NOT ESTREAT BOND <input type="checkbox"/> CAPIAS WITHDRAWN <input type="checkbox"/> BOND REINSTATED <input type="checkbox"/> BOND ESTR. SET ASIDE <input type="checkbox"/> OTHER: <input type="checkbox"/> HOLD CAPIAS-PTS INVEST. <input type="checkbox"/> 48 HRS	REMARKS: 11/25/2025 FOR TRACKING PURPOSES 01/14/2026 DKS LEAVE ON WRONG SIDE OF DOCKET
ATTORNEY STATUS			
<input type="checkbox"/> APP. IND. STATUS - PD APPT. <input type="checkbox"/> APP. IND. STATUS - NOT INDIGENT <input type="checkbox"/> PD APPT. BY COURT <input type="checkbox"/> DEF. TO RETAIN COUNSEL <input type="checkbox"/> PD WITHDREW <input type="checkbox"/> ATTY. TO BE APPT <input type="checkbox"/> OTHER: <input type="checkbox"/> OTHER:			

CT. CHARGE	COURT ACTION	INCARCERATION/PROBATION/COMMUNITY CONTROL INFORMATION	COSTS
1 WRITTEN THREATS TO KILL OR DO BODILY INJURY (INFO) Statute: 836.10(2) LVL:F DEG:S	<input type="checkbox"/> N.G.PLEA <input type="checkbox"/> NO INFO. <input type="checkbox"/> GUILTY PLEA <input type="checkbox"/> NOLLE PROSS. <input type="checkbox"/> NOLO PLEA <input type="checkbox"/> DISMISSED <input type="checkbox"/> NG.VERDICT <input type="checkbox"/> JGMT ACQT. <input type="checkbox"/> GLTY.VERDICT <input type="checkbox"/> ADJ.WITHHELD <input type="checkbox"/> MISTRIAL <input type="checkbox"/> ADJ.GUILTY <input type="checkbox"/> ADMIT <input type="checkbox"/> DENY : VOP/VOCC <input type="checkbox"/> WAIVED PSI <input type="checkbox"/> PSI ORDERED <input type="checkbox"/> PDR ORDERED <input type="checkbox"/> TO BE SENT:	<input type="checkbox"/> VCJ _____ MO _____ DY _____ <input type="checkbox"/> DOC _____ YR _____ MO _____ DY _____ <input type="checkbox"/> JAIL CREDIT TIME: _____ DY _____ <input type="checkbox"/> PROB _____ YR _____ MO _____ DY _____ <input type="checkbox"/> COM.CONT. _____ YR _____ MO _____ <input type="checkbox"/> DRUG OFFENDER <input type="checkbox"/> SEX OFFENDER <input type="checkbox"/> CONCURRENT <input type="checkbox"/> CONSECUTIVE TO: _____ <input type="checkbox"/> _____ HRS.COM. SERVICE <input type="checkbox"/> SUBST.ABUSE COUNSEL/TREAT. <input type="checkbox"/> RANDOM U/A <input type="checkbox"/> NO ALCOHOL/ILL.DRUG <input type="checkbox"/> MAY CONVERT CRT COST TO CS \$ _____ PER HOUR	<input type="checkbox"/> PROB.REVOKED <input type="checkbox"/> C.C. REVOKED <input type="checkbox"/> PROB. REINSTATE <input type="checkbox"/> C.C. REINSTATE <input type="checkbox"/> PROB. MODIFIED <input type="checkbox"/> C.C. MODIFIED <input type="checkbox"/> STANDARD COND. <input type="checkbox"/> PREVIOUS COND. <input type="checkbox"/> COS WAIVED <input type="checkbox"/> PROB. TERMINATED
AMENDED CHARGE:			
BOND SET AT \$			CRT. COSTS \$ FINE \$ PD FEE \$ SAO FEE \$ LEO FEE \$ PD APP.FEE \$ REST. \$ OTHER: <input type="checkbox"/> CONVRT. FINE/COST JDGMT <input type="checkbox"/> PREVIOUS COST TO JDGMT
AMENDED CHARGE:			
BOND SET AT \$			CRT. COSTS \$ FINE \$ PD FEE \$ SAO FEE \$ LEO FEE \$ PD APP.FEE \$ REST. \$ OTHER: <input type="checkbox"/> CONVRT. FINE/COST JDGMT <input type="checkbox"/> PREVIOUS COST TO JDGMT

LAURA E. ROTH, CLERK OF THE CIRCUIT COURT

Filed in Open Court this 10 day of November, 2025

/S/ RACHEL M LEIHGEBER
DEPUTY CLERK IN ATTENDANCE

A KATHLEEN MCNEILLY

ASSISTANT STATE ATTORNEY