



A0SGB9E

CHECK DIGIT 9

COMPLAINT

CASE NO _____ DOCKET NO _____ PAGE NO _____

DATE _____ COURT ACTION AND OTHER ORDERS _____

FLORIDA UNIFORM TRAFFIC CITATION

COUNTY OF DUVAL (2)		<input type="checkbox"/> (1) FHP <input type="checkbox"/> (2) P.D. <input checked="" type="checkbox"/> (3) S.O. <input type="checkbox"/> (4) OTHER	
CITY (IF APPLICABLE) JACKSONVILLE		JACKSONVILLE SHERIFFS OFFICE	
IN THE COURT DESIGNATED BELOW THE UNDERSIGNED CERTIFIES THAT HE/SHE HAS JUST AND REASONABLE GROUNDS TO BELIEVE AND DOES BELIEVE THAT CH			
DAY OF WEEK WED		MONTH 10	YEAR 2013
NAME (PRINT) FIRST DEMION		MIDDLE CALLEAF	LAST SMALL
STREET 3500 UNIVERSITY BV N 1512			
CITY JACKSONVILLE		STATE FL	ZIP CODE 32277
TELEPHONE NUMBER	DATE OF BIRTH	MO 12	DAY 10
	YEAR 1987	RACE B	SEX M
DRIVER LICENSE NUMBER	CLASS E	CDL LICENSE <input checked="" type="checkbox"/> NO	YR. LICENSE EXP 2021
VEHICLE YEAR 2011	MAKE DODG	STYLE 4D	COLOR SIL
VEHICLE LICENSE NO. BA87471	TRAILER TAG NO	STATE FL	YEAR TAG EXPIRES 2014
UPON A PUBLIC STREET OR HIGHWAY, OR OTHER LOCATION, NAMED 1100 MLK PWKY S		MOTORCYCLE <input checked="" type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
DID UNLAWFULLY COMMIT THE FOLLOWING OFFENSE.		CHECK ONLY ONE OFFENSE EACH CITATION.	

UNLAWFUL SPEED **62** MPH SPEED APPLICABLE **30** MPH

INTERSTATE SCHOOL ZONE CONSTRUCTION WORKERS PRESENT

- SPEED MEASUREMENT DEVICE
PYTHON/SERIES II/347000583
- CARELESS DRIVING
 - VIOLATION OF TRAFFIC CONTROL DEVICE
 - FAILURE TO STOP AT A TRAFFIC SIGNAL
 - IMPROPER LANE CHANGE OR COURSE
 - NO PROOF OF INSURANCE
 - VIOLATION OF RIGHT-OF-WAY
 - CHILD RESTRAINT
 - SAFETY BELT VIOLATION
 - IMPROPER OR UNSAFE EQUIPMENT
 - EXPIRED TAG SIX (6) MONTHS OR LESS
 - EXPIRED TAG MORE THAN SIX (6) MONTHS
 - IMPROPER PASSING
 - EXPIRED DRIVER LICENSE SIX (6) MONTHS OR LESS
 - EXPIRED DRIVER LICENSE MORE THAN SIX (6) MONTHS
 - NO VALID DRIVER LICENSE
 - DRIVING WHILE LICENSE SUSPENDED OR REVOKED
 - DRIVING UNDER THE INFLUENCE
 - Passenger Under 18 Yrs

OTHER VIOLATIONS OR COMMENTS PERTAINING TO OFFENSE
EXCEEDING POSTED SPEED IN A WORK-ZONE. WRKS PRESENT

RE-EXAM YES NO
DL SEIZED YES NO

AGGRESSIVE DRIVING	IN VIOLATION OF STATE STATUTE	SECTION 316.183(6)	SUB-SECTION
CRASH	PROPERTY DAMAGE	INJURY TO ANOTHER	SERIOUS BODILY INJURY TO ANOTHER
<input checked="" type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
CRIMINAL VIOLATION (COURT APPEARANCE REQUIRED AS INDICATED BELOW)	INFRACTION (COURT APPEARANCE REQUIRED AS INDICATED BELOW)	INFRACTION WHICH DOES NOT REQUIRE APPEARANCE IN COURT	FATAL
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

A0SGB9E

CHECK DIGIT 9

CIVIL PENALTY IS \$ _____

← WITHIN 30 CALENDAR DAYS CONTACT TRAFFIC VIOLATIONS 501 WEST ADAMS STREET - 1ST FLOOR EASTSIDE LOBBY JACKSONVILLE, FL 32202 (904)255-2300

ARREST DELIVERED TO _____ DATE _____

I AGREE AND PROMISE TO COMPLY AND ANSWER TO THE CHARGES AND INSTRUCTIONS SPECIFIED IN THIS CITATION. WILLFUL REFUSAL TO ACCEPT AND SIGN THE CITATION MAY RESULT IN ARREST. I UNDERSTAND MY SIGNATURE IS NOT A GUILTY OR WAIVER OF RIGHTS. IF YOU NEED REASONABLE FACILITY ACCOMMODATION WITH THIS CITATION, CONTACT THE CLERK OF THE COURT.

X Dominick Sc

SIGNATURE OF VIOLATOR (SIGNATURE IS REQUIRED IF INFRACTION REQUIRES AN APPEARANCE IN COURT)

OFFICER **T.L. TERRELL** 61134 61134

RANK - NAME OF OFFICER BADGE NO ID NO TROOP / UNIT

I CERTIFY THIS CITATION WAS DELIVERED TO THE PERSON CITED ABOVE

HSMV 75901 (REV. 07/12)

BAIL FIXED AT \$ _____ OR CASH DEPOSIT OF \$ _____

SIGNATURE OF PERSON GIVING BAIL _____

SIGNATURE OF PERSON TAKING BAIL _____

FINE IN THE AMOUNT OF \$ _____ RECEIVED AS REQUIRED BY COURT SCHEDULE

SIGNATURE OF CLERK _____

CONTINUANCE TO _____ REASON _____

CONTINUANCE TO _____ REASON _____

BOND ESTREATED _____

WARRANT ISSUED _____

VIOLATOR FAILED TO APPEAR-DRIVER LICENSE SUSPENDED

VIOLATOR ARRAIGNED ON _____ (DATE)

PLEA: _____

FINDING: _____

ADJUDICATION: _____

SENTENCE: FINE _____ COST _____
JAILED _____ DAYS

DRIVER IMPROVEMENT SCHOOL _____

OTHER _____

DRIVER LICENSE SUSPENDED OR REVOKED FOR _____ DAYS

RECOMMEND DRIVER LICENSE SUSPENSION FOR _____ DAYS

RECOMMEND RE-TEST _____

SIGNATURE OF JUDGE _____

TESTIMONY - JUDGE'S NOTES (OR OTHER COURT ORDERS):

APPEAL BOND OF \$ _____

VIOLATOR'S FINGERPRINT WHEN APPLICABLE

