

Colorado City, Mohave County
Arizona Traffic Ticket and Complaint

Complaint 6614		SSN	Military	<input type="checkbox"/> Accident <input type="checkbox"/> Fatality	<input type="checkbox"/> Commercial <input type="checkbox"/> Haz. Material	Agency Use or Report Number
Driver's License Number			State CO	Class	Endorsements M H N P T X D	Agency Use
DEFENDANT		First William	Middle Edson	Last Jessop		
Residential Address 380 Sandia Circle Westcliffe		City CO	State CO	ZIP 81252	Telephone	
Sex M	Weight 180	Height 5-10	Eyes Br	Hair Br	Origin W	Date of Birth 8-9-1969
Business Address		City	State	ZIP	Telephone	
VEHICLE		Color	Year	Make	Model	Style
Registered Owner				Address		Vehicle Identification Number

The undersigned certifies that:

ON	Month 04	Day 14	Year 11	Time 23:30	AM PM	SPEED	Approx	Posted	R&P	Speed Measurement Device	Direction of Travel	
AT	Location 160 N Oak St Colorado City AZ 86021						Colorado City Mohave County State of Arizona	Area	District			

the defendant committed the following:

A	Section	ARS CC	Violation trespass	Domestic Violence Case <input type="checkbox"/>	<input checked="" type="checkbox"/> Criminal	<input type="checkbox"/> Criminal Traffic
	Class 1 VIOLATION 1			<input type="checkbox"/> Municipal Code <input type="checkbox"/> Civil Traffic <input type="checkbox"/> Petty Offense		
B	Section	ARS CC	Violation	Domestic Violence Case <input type="checkbox"/>	<input type="checkbox"/> Criminal	<input type="checkbox"/> Criminal Traffic
	VIOLATION 2			<input type="checkbox"/> Municipal Code <input type="checkbox"/> Civil Traffic <input type="checkbox"/> Petty Offense		
C	Section	ARS CC	Violation	Domestic Violence Case <input type="checkbox"/>	<input type="checkbox"/> Criminal	<input type="checkbox"/> Criminal Traffic
	VIOLATION 3			<input type="checkbox"/> Municipal Code <input type="checkbox"/> Civil Traffic <input type="checkbox"/> Petty Offense		
D	Section	ARS CC	Violation	Domestic Violence Case <input type="checkbox"/>	<input type="checkbox"/> Criminal	<input type="checkbox"/> Criminal Traffic
	VIOLATION 4			<input type="checkbox"/> Municipal Code <input type="checkbox"/> Civil Traffic <input type="checkbox"/> Petty Offense		
E	Section	ARS CC	Violation	Domestic Violence Case <input type="checkbox"/>	<input type="checkbox"/> Criminal	<input type="checkbox"/> Criminal Traffic
	VIOLATION 5			<input type="checkbox"/> Municipal Code <input type="checkbox"/> Civil Traffic <input type="checkbox"/> Petty Offense		
F	Section	ARS CC	Violation	Domestic Violence Case <input type="checkbox"/>	<input type="checkbox"/> Criminal	<input type="checkbox"/> Criminal Traffic
	VIOLATION 6			<input type="checkbox"/> Municipal Code <input type="checkbox"/> Civil Traffic <input type="checkbox"/> Petty Offense		

You must appear at:	Colorado City Consolidated Court H.C. 65 Box 90 Moccasin, Arizona 86022 PH: (928) 643-7104				Court Number 0845
	at the date and time indicated				

Month 05	Day 08	Year 11	Time 8:00	<input checked="" type="checkbox"/> AM <input type="checkbox"/> PM
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CRIMINAL: <input checked="" type="checkbox"/> Without admitting guilt, I promise to appear as directed hereon. CIVIL: <input type="checkbox"/> Without admitting responsibility, I acknowledge receipt of this complaint.	VICTIM? <input type="checkbox"/>	VICTIM NOTIFIED? <input type="checkbox"/>
I certify upon reasonable grounds, I believe the person named above committed the acts described and I have served a copy of this complaint upon the defendant.		
Complainant		PSN 10X5

NOTICE TO DEFENDANT:
 THIS IS A TRUE COPY OF THE COMPLAINT WHICH WILL BE FILED IN COURT.
 YOU ARE ADVISED TO READ THE INSTRUCTIONS ON THE REVERSE.
 IF YOU APPEAR IN COURT, PLEASE BRING THIS COPY WITH YOU.

** Information re-traced - Original too light to read*