



THATCHER POLICE DEPARTMENT

Arizona Traffic Ticket and Complaint

Complaint 101301	SSN	Military	<input type="checkbox"/> Accident <input type="checkbox"/> Fatality <input type="checkbox"/> Commercial <input type="checkbox"/> Serious Physical Injury <input type="checkbox"/> Haz. Material	Agency Use or Report Number
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Driver's License Number	State	Class	Endorsements M H N P T X D	Agency Use
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DEFENDANT First Middle Last

Residential / Commercial Address City State ZIP Telephone

Mailing Address SAME AS ABOVE

Sex	Weight	Height	Eyes	Hair	Origin	Date of Birth	Restrictions
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VEHICLE Color Year Make Model Style License Plate State Expiration

Registered Owner Address Vehicle Identification Number

The undersigned certifies that:

ON	Month	Day	Year	Time	AM PM	SPEED	Approx	Posted	R&P	Speed Measurement Device	Direction of Travel
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AT	Location	County GRAHAM	State of Arizona	Beat
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the defendant committed the following:

A	Section	ARS CC	Violation	Domestic Violence Case <input type="checkbox"/>	<input type="checkbox"/> Criminal <input type="checkbox"/> Criminal Traffic
	Docket Number	Disp. Codes	Date of Disposition	Sanction	<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
	Docket Number	Disp. Codes	Date of Disposition	Sanction	<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
	Docket Number	Disp. Codes	Date of Disposition	Sanction	<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
	Docket Number	Disp. Codes	Date of Disposition	Sanction	<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
	Docket Number	Disp. Codes	Date of Disposition	Sanction	<input type="checkbox"/> Municipal Code <input type="checkbox"/> Civil Traffic <input type="checkbox"/> Petty Offense

You must appear at:

<input type="checkbox"/> Thatcher Town Magistrate 3690 W. Main St. Thatcher, AZ 85552 Phone (928) 428-2290 Court #0546	<input type="checkbox"/> Graham County JP #1 800 W. Main St. Safford, AZ 85546 Phone (928) 428-1210 Court #0501	<input type="checkbox"/> Graham County JP #2 136 W. Center St. Pima, AZ 85543 Phone (928) 485-2771 Court #0502
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at the date and time indicated Month Day Year Time AM PM

CRIMINAL: <input type="checkbox"/> Without admitting guilt, I promise to appear as directed hereon. CIVIL: <input type="checkbox"/> Without admitting responsibility, I acknowledge receipt of this complain. JUVENILE: <input type="checkbox"/> Must appear w/Parent / Legal Guardian	VICTIM? <input type="checkbox"/> VICTIM NOTIFIED? <input type="checkbox"/> TEN-PRINT FINGERPRINT <input type="checkbox"/> Yes <input type="checkbox"/> No I certify upon reasonable grounds, I believe the person named above committed the act described and I have served a copy of this complaint upon the defendant.
X	Officer _____ Number _____

Agency Use