

COMMONWEALTH OF KENTUCKY
UNIFORM CITATION

OFFENDER/VIOLATOR	AGENCY					ORI	COURT																																
	NAME: LAST, FIRST, MI, FILIAL					ATTN		HOME PHONE UNKNOWN																															
	ALIAS NAME: LAST, FIRST, MI, FILIAL							EMERGENCY PHONE UNKNOWN																															
	ADDRESS (NUMBER, NAME, SUFFIX)							KENTUCKY RESIDENT STATUS																															
	CITY			STATE KY	ZIP CODE/EXTENSION	MARITAL STATUS		VICTIMS RELATIONSHIP TO OFFENDER																															
	ID TYPE OL	ID STATE KY	ID NUMBER	S. S. NUMBER	HEIGHT	WEIGHT		HAIR COLOR	EYE COLOR																														
	<input type="checkbox"/> COMMERCIAL VEHICLE		<input type="checkbox"/> PLACARDED HAZARDOUS VEHICLE			ETHNIC ORIGIN		ALCOHOL/DRUG INVOLVEMENT																															
	DATE OF BIRTH	SEX <input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE	RACE <input checked="" type="checkbox"/> WHITE <input type="checkbox"/> BLACK <input type="checkbox"/> AM. INDIAN OR ALASKA <input type="checkbox"/> ASIAN			<input type="checkbox"/> HISPANIC <input checked="" type="checkbox"/> NON HISPANIC		<input type="checkbox"/> ALCOHOL																															
	PLACE OF EMPLOYMENT/OCCUPATION			CITY	STATE	B. A. RESULTS																																	
	VEHICLE MAKE CHEVROLET		VEHICLE MODEL	VEH. YEAR 1996	VEHICLE COLOR GREEN			Speed Zone																															
VEH. TYPE	REGISTRATION STATE, YEAR, NUMBER	VEHICLE IDENTIFIERS			MPH 70	IN MPH ZONE 55	VIOL. KEY																																
DATE/TIME	VIO. DATE	VIO. TIME	EXACT LOCATION OF VIOLATION		MILES DIRECTION	CITY																																	
	02 16 2009	8:47AM	US431			CLEATON																																	
CHARGES AND POST-ARREST COMPLAINT	ARREST DATE	TIME OF ARREST	EXACT LOCATION OF ARREST		MILES DIRECTION	CITY																																	
	County Name																																						
<table border="1"> <thead> <tr> <th>NUMBER</th> <th>VIO. CODE</th> <th>ASCF</th> <th>STATUTE/ORD.</th> <th>CHARGE(S)</th> <th>STARTING CASE</th> <th colspan="2"></th> </tr> </thead> <tbody> <tr> <td>1 of 1</td> <td>00015</td> <td>0</td> <td>189.390</td> <td>1</td> <td></td> <td colspan="2"></td> </tr> <tr> <td>of</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td colspan="2"></td> </tr> <tr> <td>of</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td colspan="2"></td> </tr> </tbody> </table>								NUMBER	VIO. CODE	ASCF	STATUTE/ORD.	CHARGE(S)	STARTING CASE			1 of 1	00015	0	189.390	1				of								of							
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POST-ARREST COMPLAINT Charge 1: SPEEDING 15 MPH OVER LIMIT																																							
<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 5px;">Court Date</div> <div style="border: 1px solid black; padding: 5px;">Citation Number = 921234561 Year + Control Number + Type</div> </div>																																							
COURT	COURT DATE	COURT TIME	<input checked="" type="checkbox"/> PAYABLE	COURT LOCATION				YEAR																															
	03 03 2009	9:00AM	<input type="checkbox"/> COURT	MUHLENBERG					09																														
CASE	COURT CASE NUMBER	TOTAL PREPAYABLE AMOUNT			\$173.00			CONTROL NUMBER 2123456																															
	WITNESS 1 NAME: LAST, FIRST, MI, FILIAL						STATE		ZIP CODE																														
	WITNESS 1 ADDRESS (NUMBER, STREET, SUFFIX)						CITY																																
	WITNESS 2 NAME: LAST, FIRST, MI, FILIAL						STATE		ZIP CODE																														
	WITNESS 2 ADDRESS (NUMBER, STREET, SUFFIX)						CITY																																
<input type="checkbox"/> CARRIED FOR UCR BY OTHER AGENCY SPECIFY:						<input type="checkbox"/> IN-CAR VIDEO																																	
OFFICER SIGNATURE						BADGE/I.D. NUMBER	ASSIGNMENT																																
						02	EVIDENCE HELD																																
						1	TYPE																																