

COMMONWEALTH OF KENTUCKY
UNIFORM CITATION

COURT

OFFENDER/VIOLATOR	AGENCY NEWPORT POLICE DEPARTMENT					ORI: 0190600	ATTN: _____ HOME PHONE _____					
	NAME: LAST, FIRST, MI, FILIAL SCHMITZ, MATTHEW W.					EMERGENCY PHONE UNKNOWN						
	ALIAS NAME: LAST, FIRST, MI, FILIAL _____					KENTUCKY RESIDENT STATUS <input checked="" type="checkbox"/> F: FULL-TIME <input type="checkbox"/> P: PART-TIME <input type="checkbox"/> N: NON-RESIDENT						
	ADDRESS (NUMBER, NAME, SUFFIX) _____					MARITAL STATUS MARRIED						
	CITY NEWPORT			STATE KY	ZIP CODE/EXTENSION 41071		VICTIM'S RELATIONSHIP TO OFFENDER					
	ID TYPE OL	ID STATE KY	ID NUMBER	S. S. NUMBER		HEIGHT 6'02"	WEIGHT 220	HAIR COLOR BROWN	EYE COLOR BLUE			
	<input type="checkbox"/> COMMERCIAL VEHICLE			<input type="checkbox"/> PLACARDED HAZARDOUS VEHICLE			ETHNIC ORIGIN <input type="checkbox"/> HISPANIC <input checked="" type="checkbox"/> NON HISPANIC		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			B.A. RESULTS <input type="checkbox"/> BREATH <input type="checkbox"/> BLOOD <input type="checkbox"/> URINE		<input checked="" type="checkbox"/> ALCOHOL <input type="checkbox"/> DRUGS <input type="checkbox"/> UNKNOWN			
	PLACE OF EMPLOYMENT/OCCUPATION TEACHER NEWPORT HIGH SCHD			CITY NEWPORT		STATE KY						
	VEHICLE MAKE HONDA		VEHICLE MODEL CIVIC		VEH. YEAR 2006	VEHICLE COLOR BLUE						
VEH. TYPE 4D		REGISTRATION: STATE, YEAR, NUMBER KY 2016 723RPG			VEHICLE IDENTIFIERS 1HGCM56846A172130			MPH		VIOL. KEY		
DATE/TIME	VIOLATION DATE 05 15 2015		VIOLATION TIME 1:48AM		EXACT LOCATION OF VIOLATION 70 CAROTHERS RD - RADIO SHACK LOT			MILES DIRECTION		CITY NEWPORT		
	ARREST DATE 05 15 2015		TIME OF ARREST 1:55AM		EXACT LOCATION OF ARREST 70 CAROTHERS RD - RADIO SHACK LOT			MILES DIRECTION		CITY NEWPORT		
CHARGES AND POST-ARREST COMPLAINT	NUMBER		VIOLATION CODE	ASCF	STATUTE/ORD.	CHARGE(S)	STARTING CASE	ENDING CASE	DRUG TYPE			
	1	of 3	02304	0	222.202(1)	1	15012562					
	2	of 3	42330	0	218A.1422	1	15012562		Marijuana			
	3	of 3	02404	0	520.090	1	15012562					
<p>POST-ARREST COMPLAINT Charge 1: ALCOHOL INTOX IN A PUBLIC PLACE (1ST & 2ND OFFENSE) Charge 2: POSS OF MARIJUANA Charge 3: RESISTING ARREST</p> <p>P.O. Waldorf - While on patrol, I observed a vehicle with the lights on parked alone in the parking lot of Radio Shack. I approached the vehicle and observed above passed out in the driver's seat of the car with the motor running. I knocked on the window several times and above did not respond. After opening the door I immediately smelled a strong odor of an alcoholic beverage and marijuana emanating from inside the vehicle. I shook him and he eventually woke up. I ordered him several times out of the vehicle and he looked at me and said.. "no, no, wait, wait". Above then leaned over and placed his hand on the stick shift. Above still refused to exit the vehicle. Above was then removed and placed on the ground. Above then refused to place his hands behind his back and was eventually hand cuffed. I located a marijuana cigarette in the center console of the vehicle. The vehicle was registered to him.</p>												
COURT	COURT DATE		COURT TIME		<input type="checkbox"/> PAYABLE <input checked="" type="checkbox"/> COURT		COURT LOCATION CAMPBELL					
	ARRESTED						TOTAL PREPAYABLE AMOUNT		NOT PREPAYABLE			
CASE	WITNESS 1 NAME: LAST, FIRST, MI, FILIAL WALDORF, BRIAN					STATE KY	ZIP CODE 41071					
	WITNESS 1 ADDRESS (NUMBER, STREET, SUFFIX) NEWPORT POLICE DEPARTMENT					CITY NEWPORT						
	WITNESS 2 NAME: LAST, FIRST, MI, FILIAL ARMSTRONG, CHRIS					STATE KY	ZIP CODE 41071					
	WITNESS 2 ADDRESS (NUMBER, STREET, SUFFIX) NEWPORT POLICE DEPARTMENT					CITY NEWPORT						
<input type="checkbox"/> CARRIED FOR UCR BY OTHER AGENCY SPECIFY: _____					<input checked="" type="checkbox"/> IN-CAR VIDEO <input type="checkbox"/> FINGERPRINTS <input type="checkbox"/> PHOTOS <input type="checkbox"/> EVIDENCE HELD							
OFFICER SIGNATURE BOYD, C.					BADGE/I.D. NUMBER 0257	ASSIGNMENT PATROL						
		YEAR 15		CONTROL NUMBER BY42652		TYPE 1						