

# OREGON UNIFORM CITATION AND COMPLAINT

Use for All Violations or Crimes Where Separate Complaint Will Not Be Filed/ORS 153.046 or 153.000

<input type="checkbox"/> CRIME(S) (See A on Back)	OR (If Not Certain)	<input type="checkbox"/> VIOLATION(S) (See B on Back)	<input type="checkbox"/> Traffic	<input type="checkbox"/> Other	<input type="checkbox"/> Violation
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STATE OF OREGON }  
CITY/OTHER PUBLIC BODY JUNCTION CITY }  
COUNTY OF LANE }

County:  Municipal  Circuit  Juvenile  Tribal  Community  Peer

Citation Number

THE UNDERSIGNED CERTIFIES AND SAYS THAT THE FOLLOWING PERSON:

<input type="checkbox"/> Non GOL ID Type	ID No.	State	Tel No.
<input type="checkbox"/> GOL			
Name: Last	First	MI	
Address			License Class <input type="checkbox"/> Employed to Drive
City	State	Zip Code	Off to: <input type="checkbox"/> Passenger
Sex	Race	DOB	Height
Weight	Hair	Eye	

AT THE FOLLOWING TIME AND PLACE IN THE ABOVE-MENTIONED STATE AND COUNTY:

Offense Happened on/about	Month	Day	Year	Time	<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> Highway <input type="checkbox"/> <input type="checkbox"/> Private open to public
At or near Location:						

INVOLVING THE FOLLOWING:

Type	Regs/VINID No.	State	<input type="checkbox"/> Accident <input type="checkbox"/> Injury
Vehicle year, make, model, style, color, OR Other describe			<input type="checkbox"/> Property Damage <input type="checkbox"/> Endanger others
Color			<input type="checkbox"/> Driver not Reg. Owner <input type="checkbox"/> Haz Material
			<input type="checkbox"/> Con. Vehicle <input type="checkbox"/> Con. Passenger

DID THEN AND THERE COMMIT THE FOLLOWING OFFENSE(S):

1. Violated (cite ORS/ORD/rule)	Describe	Alleged Spd	Designated Spd	<input type="checkbox"/> Posted Limit <input type="checkbox"/> Radar
				<input type="checkbox"/> VSR <input type="checkbox"/> Pico <input type="checkbox"/> Laser
				<input type="checkbox"/> Paid Bus Zn <input type="checkbox"/> Heavy Veh Zn <input type="checkbox"/> 1. Ross First
<input type="checkbox"/> Intentional <input type="checkbox"/> Knowing <input type="checkbox"/> Reckless <input type="checkbox"/> Criminal negligence <input type="checkbox"/> No culpable mental state	1. Ross First			
2. Violated (cite ORS/ORD/rule)	Describe			
<input type="checkbox"/> Intentional <input type="checkbox"/> Knowing <input type="checkbox"/> Reckless <input type="checkbox"/> Criminal negligence <input type="checkbox"/> No culpable mental state	1. Ross First			
3. Violated (cite ORS/ORD/rule)	Describe			
<input type="checkbox"/> Intentional <input type="checkbox"/> Knowing <input type="checkbox"/> Reckless <input type="checkbox"/> Criminal negligence <input type="checkbox"/> No culpable mental state	1. Ross First			
				1. Ross First

Amount

I certify under ORS 153.046 and 153.990 and under other applicable law and under penalty of false swearing, do swear affirm that I have sufficient grounds to and do believe that the above-mentioned defendant(s) committed the above offense(s) and I have served the defendant/person with this complaint.

Date issued: \_\_\_\_\_ 1st Officer Signature: \_\_\_\_\_  
Print 1st Officer Name: \_\_\_\_\_

2nd Officer of Arresting Person (If Not Officer) Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

Office/Agency ID
1st Officer ID No.
2nd Officer ID No.

YOUR COURT APPEARANCE DATE, TIME AND LOCATION ARE

AM <input type="checkbox"/> PM <input type="checkbox"/>	<input type="checkbox"/> Junction City Municipal Court 500 Greenwood St Junction City, OR 97451	<input type="checkbox"/> Lane County Circuit Court 125 E 6th Ave Prague, OR 97443	<input type="checkbox"/> BERBU JUNIOR Justice Center 201 N. Columbia St Eugene, OR 97401	<input type="checkbox"/> Central Lane Justice Court 220 N 9th St Salem, OR 97301
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