



6710
#1607

FLORIDA UNIFORM TRAFFIC CITATION

0070-GQY

CHECK DIGIT 6

| | |
|-----------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| COUNTY OF HILLSBOROUGH 03 | <input type="checkbox"/> (1)-F.H.P. <input checked="" type="checkbox"/> (2)-P.D. <input type="checkbox"/> (3)-S.O. <input type="checkbox"/> (4)-OTHER |
| CITY (IF APPLICABLE) TAMPA SD | AGENCY NAME TAMPA |
| | AGENCY # 1F-271391 |

IN THE COURT DESIGNATED BELOW THE UNDERSIGNED CERTIFIES THAT HE/SHE HAS JUST AND REASONABLE GROUNDS TO BELIEVE AND DOES BELIEVE THAT ON **COMPLAINT (RETAINED BY COURT)**

| | | | | | |
|---------------------------|--------------------|------------------|---------------------|----------------------|------------------------------------------------------------------------|
| DAY OF WEEK FRI | MONTH 05 | DAY 13 | YEAR 2011 | TIME 11:31 | <input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M. |
|---------------------------|--------------------|------------------|---------------------|----------------------|------------------------------------------------------------------------|

| | | |
|-----------------------------------------|----------------------------|---------------------|
| NAME (PRINT) FIRST JACQUELINE | MIDDLE ELIZABETH | LAST TOFT |
|-----------------------------------------|----------------------------|---------------------|

| | |
|----------------------------------------------|--------------------------------------------------|
| STREET 4333 BAYSIDE VILLAGE DR 125 | IF DIFFERENT THAN ONE ON DRIVER LICENSE "X" HERE |
|----------------------------------------------|--------------------------------------------------|

| | | |
|----------------------|--------------------|--------------------------|
| CITY TAMPA | STATE FL | ZIP CODE 33615 |
|----------------------|--------------------|--------------------------|

| | | | | | | |
|------------------------------|-------------------------------|------------------|-----------------|------------------|-----------------|-------------------|
| TELEPHONE NUMBER - | DATE OF BIRTH MO 09 | DAY 04 | YR 85 | RACE W | SEX F | HGT 5'6 |
|------------------------------|-------------------------------|------------------|-----------------|------------------|-----------------|-------------------|

| | | | | | |
|-----------------------------------------------|--------------------|-------------------|------------------------------------------------------------------------------------|-------------------------------|-------------------------------------------------------------------------------------------|
| DRIVER LICENSE NUMBER T130425858240 | STATE FL | CLASS E | CDL LICENSE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | YR LICENSE EXP 2012 | COMMERCIAL VEHICLE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO |
|-----------------------------------------------|--------------------|-------------------|------------------------------------------------------------------------------------|-------------------------------|-------------------------------------------------------------------------------------------|

| | | | | |
|---------------------------|------------------------|---------------------|--------------------|-----------------------------------------------------------------------------------------------------|
| YR VEHICLE 2003 | MAKE CITROEN | STYLE 4DR | COLOR SL | PLACARDED HAZARDOUS MATERIAL <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO |
|---------------------------|------------------------|---------------------|--------------------|-----------------------------------------------------------------------------------------------------|

| | | | | |
|--------------------------------------|-----------------------------|--------------------|---------------------------------|----------------------------------------------------------------------------------------|
| VEHICLE LICENSE NO 0988 CL | TRAILER TAG NO. - | STATE FL | YEAR TAG EXPIRES 2011 | > 16 PASSENGERS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO |
|--------------------------------------|-----------------------------|--------------------|---------------------------------|----------------------------------------------------------------------------------------|

| | |
|-----------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|
| UPON A PUBLIC STREET OR HIGHWAY, OR OTHER LOCATION, NAMEDLY S. ARNOLD AVE / W. AZEELE ST. | MOTORCYCLE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO |
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|------------------------------|
| COMPANION CITATION NUMBER(S) |
|------------------------------|

| | | |
|-----------------------|-------------------------------------------------------------------------------------------------------------|---------------|
| FT. _____ MILES _____ | <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W | OF NODE _____ |
|-----------------------|-------------------------------------------------------------------------------------------------------------|---------------|

DID UNLAWFULLY COMMIT THE FOLLOWING OFFENSE. CHECK ONLY ONE OFFENSE EACH CITATION.

- UNLAWFUL SPEED _____ MPH SPEED APPLICABLE _____ MPH
- (INTERSTATE 4-LANE HWY WITH 20 FT. MEDIAN OUTSIDE BUS. OR RES. DIST.)
- CARELESS DRIVING
- VIOLATION OF TRAFFIC CONTROL DEVICE
- FAILURE TO STOP AT A TRAFFIC SIGNAL
- IMPROPER LANE CHANGE OR COURSE
- NO PROOF OF INSURANCE
- VIOLATION OF RIGHT-OF-WAY
- IMPROPER PASSING
- CHILD RESTRAINT
- SAFETY BELT VIOLATION
- IMPROPER OR UNSAFE EQUIPMENT
- EXPIRED TAG ≤ SIX (6) MONTHS
- EXPIRED TAG > SIX (6) MONTHS
- DRIVING UNDER THE INFLUENCE BAL _____
- EXPIRED DRIVER LICENSE
- > SIX (6) MONTHS
- NO VALID DRIVER LICENSE
- DRIVING WHILE LICENSE SUSPENDED OR REVOKED

OTHER VIOLATIONS OR COMMENTS PERTAINING TO OFFENSE:

| | | | |
|---------------------------------------------|---------------------------------------------------|---------|-------------|
| <input type="checkbox"/> AGGRESSIVE DRIVING | IN VIOLATION OF STATE STATUTE 36.674(1) | SECTION | SUB-SECTION |
|---------------------------------------------|---------------------------------------------------|---------|-------------|

| | | | | |
|------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|-------------------------------------------------------------------|
| CRASH <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | PROPERTY DAMAGE <input type="checkbox"/> YES \$ _____ <input type="checkbox"/> NO | INJURY TO ANOTHER <input type="checkbox"/> YES <input type="checkbox"/> NO | SERIOUS BODILY INJURY TO ANOTHER <input type="checkbox"/> YES <input type="checkbox"/> NO | FATAL <input type="checkbox"/> YES <input type="checkbox"/> NO |
|------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|-------------------------------------------------------------------|

CRIMINAL VIOLATION. COURT APPEARANCE REQUIRED, AS INDICATED BELOW.

INFRACTION. COURT APPEARANCE REQUIRED, AS INDICATED BELOW.

INFRACTION WHICH DOES NOT REQUIRE APPEARANCE IN COURT.

CIVIL PENALTY IS \$ **101.00**

COURT INFORMATION DATE **STE ENVELOPE** COURT _____

LOCATION _____

ARREST DELIVERED TO _____ DATE _____

I AGREE AND PROMISE TO COMPLY AND ANSWER TO THE CHARGES AND INSTRUCTIONS SPECIFIED IN THIS CITATION. WILLFUL REFUSAL TO ACCEPT AND SIGN THE CITATION MAY RESULT IN ARREST. I UNDERSTAND MY SIGNATURES NOT AN ADMISSION OR GUILT OR WAIVER OF RIGHTS. IF YOU NEED REASONABLE FACILITY ACCOMMODATIONS TO COMPLY WITH THIS CITATION, CONTACT THE CLERK OF THE COURT.

OFFICER'S SIGNATURE
MP. J. ALEXANDER

RANK - SIGNATURE OF OFFICER _____ BADGE NO. _____ ID. NO. _____ TROOP UNIT _____

I CERTIFY THIS CITATION WAS DELIVERED TO THE PERSON CITED ABOVE
HSMV 75901 (Rev. 9/10)

0070-GQY

CHECK DIGIT 6

WITHIN 30 DAYS

STE ENVELOPE

MP. J. ALEXANDER, 003, 30253, 1/108

