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|------------------------|--------------------------------------|---------------------------|-------------------------------------------------------------------|
| CRIMINAL DOCKET | DOCKET NUMBER 1662CR001297 | NO. OF COUNTS 1 | Trial Court of Massachusetts District Court Department |
|------------------------|--------------------------------------|---------------------------|-------------------------------------------------------------------|

| | | | |
|-----------------------------------------------------------------------------------------------|--------------------------------------------|-----------------------|-----------------------------------------------------------------------------------------------------|
| DEFENDANT NAME AND ADDRESS Jorge Zambrano 22 Saxon Road Worcester, MA 01602 | DOB 03/14/1981 | GENDER Male | COURT NAME & ADDRESS Worcester District Court 225 Main Street Worcester, MA 01608 |
| | DATE COMPLAINT ISSUED 02/24/2016 | | |
| | PRECOMPLAINT ARREST DATE | | INTERPRETER REQUIRED |

| FIRST FIVE OFFENSE COUNTS | | | |
|---------------------------|---------|---------------------------------------|--------------|
| COUNT | CODE | OFFENSE DESCRIPTION | OFFENSE DATE |
| 1 | 90/23/D | LICENSE SUSPENDED, OP MV WITH c90 §23 | 01/19/2016 |

ADD WILCOX 3/31/16

| | | |
|--------------------------------------|---------------------------------------|------------------------------------------|
| DEFENSE ATTORNEY Aly Seola | OFFENSE CITY/TOWN Worcester | POLICE DEPARTMENT Worcester PD |
|--------------------------------------|---------------------------------------|------------------------------------------|

| DATE & JUDGE | DOCKET ENTRY | DATE & JUDGE | FEES IMPOSED |
|---------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| 3.30.16 | <input checked="" type="checkbox"/> Attorney appointed (S.J.C.R. 3:10) <input type="checkbox"/> Atty denied & Delt. Advised per 211 D §2A <input type="checkbox"/> Waiver of Counsel found after colloquy | | Counsel Fee (211D § 2A(2)) <input type="checkbox"/> WAIVED |
| | | | Counsel Contribution (211D § 2) <input type="checkbox"/> WAIVED |
| P. LoConto J | Terms of release set: <input checked="" type="checkbox"/> PR <input type="checkbox"/> Bail <input type="checkbox"/> See Docket for special condition <input type="checkbox"/> Held (276 § 58A) | | Default Warrant Fee (276 § 30(1)) <input type="checkbox"/> WAIVED |
| | | | Default Warrant Arrest Fee (276 § 30(2)) <input type="checkbox"/> WAIVED |
| | Arraigned and advised: <input checked="" type="checkbox"/> Potential of bail revocation (276 § 58B) <input type="checkbox"/> Right to bail to review (276 § 58) <input type="checkbox"/> Right to drug exam (111E § 10) <input type="checkbox"/> Inquiry made by Court under 276 § 56A | 3/31/16 <i>Mansley</i> | Probation Supervision Fee (276 § 87A) <input checked="" type="checkbox"/> WAIVED |
| | | | Bail Order Forfeited |
| | Abuse Allegation: <input type="checkbox"/> C276 § 56A form filed by Commonwealth <input type="checkbox"/> Allegation of abuse under C276 § 56A found <input type="checkbox"/> No allegation of abuse under C276 § 56A found | 3/31/16 <i>Mansley</i> | Advised of right to jury trial: <input checked="" type="checkbox"/> Waiver of jury found after colloquy <input type="checkbox"/> Does not waive |
| | | | Advised of trial rights as pro se (Dist. Ct. Supp R.4) |
| | | | Advised of right of appeal to Appeals Ct. (M.R. Crim P.R. 28) |

| SCHEDULING HISTORY | | | | | |
|--------------------|----------------|-------------|-------------------------------------------------------------------------------------------------------------------------------|--------------|------------------|
| NO. | SCHEDULED DATE | EVENT | RESULT | JUDGE | TAPE START/ STOP |
| 1 | 03/30/2016 | Arraignment | <input checked="" type="checkbox"/> Held <input type="checkbox"/> Not Held but Event Resolved <input type="checkbox"/> Cont'd | P. LoConto J | 9:17 9:17 |
| 2 | 3.31.16 | PTC/PTCH | <input type="checkbox"/> Held <input type="checkbox"/> Not Held but Event Resolved <input type="checkbox"/> Cont'd | 19 Mansley | 12/15 |
| 3 | 3.11.16 | VP 2pm | <input type="checkbox"/> Held <input type="checkbox"/> Not Held but Event Resolved <input type="checkbox"/> Cont'd | | |
| 4 | 6.9.16 | VP 9am | <input checked="" type="checkbox"/> Held <input type="checkbox"/> Not Held but Event Resolved <input type="checkbox"/> Cont'd | | |
| 5 | | | <input type="checkbox"/> Held <input type="checkbox"/> Not Held but Event Resolved <input type="checkbox"/> Cont'd | | |
| 6 | | | <input type="checkbox"/> Held <input type="checkbox"/> Not Held but Event Resolved <input type="checkbox"/> Cont'd | | |
| 7 | | | <input type="checkbox"/> Held <input type="checkbox"/> Not Held but Event Resolved <input type="checkbox"/> Cont'd | | |
| 8 | | | <input type="checkbox"/> Held <input type="checkbox"/> Not Held but Event Resolved <input type="checkbox"/> Cont'd | | |
| 9 | | | <input type="checkbox"/> Held <input type="checkbox"/> Not Held but Event Resolved <input type="checkbox"/> Cont'd | | |
| 10 | | | <input type="checkbox"/> Held <input type="checkbox"/> Not Held but Event Resolved <input type="checkbox"/> Cont'd | | |

APPROVED ABBREVIATIONS
 ARR = Arraignment PTH = Pretrial hearing DCE = Discovery compliance & jury selection BTR = Bench trial JTR = Jury trial PCH = Probable cause hearing MOT = Motion hearing SRE = Status review
 SRP = Status review of payments FAT = First appearance in jury session SEN = Sentencing CWF = Continuance-without-finding scheduled to terminate PRO = Probation scheduled to terminate
 DFTA = Defendant failed to appear & was defaulted WAR = Warrant issued WARD = Default warrant issued WR = Warrant or default warrant recalled PVH = probation revocation hearing.

| | | | |
|---------------------|-------------------------------------------|--------------------|-----------|
| A TRUE COPY ATTEST: | CLERK-MAGISTRATE / ASST CLERK X | TOTAL NO. OF PAGES | ON (DATE) |
|---------------------|-------------------------------------------|--------------------|-----------|

| CRIMINAL DOCKET - OFFENSES | | DEFENDANT NAME Jorge Zambrano | | DOCKET NUMBER 1662CR001297 | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------------------|----------------|------------------|
| COUNT / OFFENSE 1 LICENSE SUSPENDED, OP MV WITH c90 §23 | | DISPOSITION DATE AND JUDGE 3-31-16 <i>Morcu</i> | | | | |
| DISPOSITION METHOD <input type="checkbox"/> Guilty Plea or <input checked="" type="checkbox"/> Admission to Sufficient Facts accepted after colloquy and alien warning pursuant to C278§29D and MRCrP12 <input type="checkbox"/> Bench Trial <input type="checkbox"/> Jury Trial <input type="checkbox"/> Dismissed upon: <input type="checkbox"/> Request of Commonwealth <input type="checkbox"/> Request of Victim <input type="checkbox"/> Request of Defendant <input type="checkbox"/> Failure to prosecute <input type="checkbox"/> Other: <input type="checkbox"/> Filed with Defendant's consent <input type="checkbox"/> Nolle Prosequi <input type="checkbox"/> Decriminalized (277 §70 C) | | FINE/ASSESSMENT | SURFINE | COSTS | OUI §24D FEE | OUI VICTIMS ASMT |
| | | HEAD INJURY ASMT | RESTITUTION | VW ASSESSMENT 50, | BATTERER'S FEE | OTHER |
| | | SENTENCE OR OTHER DISPOSITION <input checked="" type="checkbox"/> Sufficient facts found but continued without a finding until: 3/28/17 ✓ <input type="checkbox"/> Defendant placed on probation until: <input checked="" type="checkbox"/> Risk/Need or OUI <input type="checkbox"/> Administrative Supervision <input type="checkbox"/> Defendant placed on pretrial probation (276 §87) until: <input type="checkbox"/> To be dismissed if court costs / restitution paid by: <i>cont w/ 1562CR001297</i> | | | | |
| FINDING <input type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Responsible <input type="checkbox"/> Not Responsible <input type="checkbox"/> Probable Cause <input type="checkbox"/> No Probable Cause | | FINAL DISPOSITION | | JUDGE | DATE | |
| | | <input type="checkbox"/> Dismissed on recommendation of Probation Dept. <input type="checkbox"/> Probation terminated: defendant discharged <input type="checkbox"/> Sentence or disposition revoked (see cont'd page) | | | | |
| COUNT / OFFENSE | | DISPOSITION DATE AND JUDGE | | | | |
| DISPOSITION METHOD <input type="checkbox"/> Guilty Plea or <input type="checkbox"/> Admission to Sufficient Facts accepted after colloquy and alien warning pursuant to C278§29D and MRCrP12 <input type="checkbox"/> Bench Trial <input type="checkbox"/> Jury Trial <input type="checkbox"/> Dismissed upon: <input type="checkbox"/> Request of Commonwealth <input type="checkbox"/> Request of Victim <input type="checkbox"/> Request of Defendant <input type="checkbox"/> Failure to prosecute <input type="checkbox"/> Other: <input type="checkbox"/> Filed with Defendant's consent <input type="checkbox"/> Nolle Prosequi <input type="checkbox"/> Decriminalized (277 §70 C) | | FINE/ASSESSMENT | SURFINE | COSTS | OUI §24D FEE | OUI VICTIMS ASMT |
| | | HEAD INJURY ASMT | RESTITUTION | VW ASSESSMENT | BATTERER'S FEE | OTHER |
| | | SENTENCE OR OTHER DISPOSITION <input type="checkbox"/> Sufficient facts found but continued without a finding until: <input type="checkbox"/> Defendant placed on probation until: <input type="checkbox"/> Risk/Need or OUI <input type="checkbox"/> Administrative Supervision <input type="checkbox"/> Defendant placed on pretrial probation (276 §87) until: <input type="checkbox"/> To be dismissed if court costs / restitution paid by: | | | | |
| FINDING <input type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Responsible <input type="checkbox"/> Not Responsible <input type="checkbox"/> Probable Cause <input type="checkbox"/> No Probable Cause | | FINAL DISPOSITION | | JUDGE | DATE | |
| | | <input type="checkbox"/> Dismissed on recommendation of Probation Dept. <input type="checkbox"/> Probation terminated: defendant discharged <input type="checkbox"/> Sentence or disposition revoked (see cont'd page) | | | | |
| COUNT / OFFENSE | | DISPOSITION DATE AND JUDGE | | | | |
| DISPOSITION METHOD <input type="checkbox"/> Guilty Plea or <input type="checkbox"/> Admission to Sufficient Facts accepted after colloquy and alien warning pursuant to C278§29D and MRCrP12 <input type="checkbox"/> Bench Trial <input type="checkbox"/> Jury Trial <input type="checkbox"/> Dismissed upon: <input type="checkbox"/> Request of Commonwealth <input type="checkbox"/> Request of Victim <input type="checkbox"/> Request of Defendant <input type="checkbox"/> Failure to prosecute <input type="checkbox"/> Other: <input type="checkbox"/> Filed with Defendant's consent <input type="checkbox"/> Nolle Prosequi <input type="checkbox"/> Decriminalized (277 §70 C) | | FINE/ASSESSMENT | SURFINE | COSTS | OUI §24D FEE | OUI VICTIMS ASMT |
| | | HEAD INJURY ASMT | RESTITUTION | VW ASSESSMENT | BATTERER'S FEE | OTHER |
| | | SENTENCE OR OTHER DISPOSITION <input type="checkbox"/> Sufficient facts found but continued without a finding until: <input type="checkbox"/> Defendant placed on probation until: <input type="checkbox"/> Risk/Need or OUI <input type="checkbox"/> Administrative Supervision <input type="checkbox"/> Defendant placed on pretrial probation (276 §87) until: <input type="checkbox"/> To be dismissed if court costs / restitution paid by: | | | | |
| FINDING <input type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> Responsible <input type="checkbox"/> Not Responsible <input type="checkbox"/> Probable Cause <input type="checkbox"/> No Probable Cause | | FINAL DISPOSITION | | JUDGE | DATE | |
| | | <input type="checkbox"/> Dismissed on recommendation of Probation Dept. <input type="checkbox"/> Probation terminated: defendant discharged <input type="checkbox"/> Sentence or disposition revoked (see cont'd page) | | | | |



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|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|------------------------------------|----------------------------------------|-------------------------------------------------------------------------------------------------------------|--|
| CRIMINAL COMPLAINT ORIGINAL | | DOCKET NUMBER 1662CR001297 | NO. OF COUNTS 1 | Trial Court of Massachusetts District Court Department | |
| DEFENDANT NAME & ADDRESS Jorge Zambrano 22 Saxon Road Worcester, MA 01602 | | | | COURT NAME & ADDRESS Worcester District Court 225 Main Street Worcester, MA 01608 (508)831-2010 | |
| DEFENDANT DOB 03/14/1981 | COMPLAINT ISSUED 02/24/2016 | DATE OF OFFENSE 01/19/2016 | ARREST DATE | | |
| OFFENSE CITY / TOWN Worcester | | OFFENSE ADDRESS | | NEXT EVENT DATE & TIME 03/30/2016 09:00 AM | |
| POLICE DEPARTMENT Worcester PD | | POLICE INCIDENT NUMBER 20166150 | | NEXT SCHEDULED EVENT Arraignment | |
| OBTN | PCF NUMBER 2449471 | DEFENDANT XREF ID 6494604 | ROOM / SESSION 1st Session, Ctrm 14 | | |
| <p>The undersigned complainant, on behalf of the Commonwealth, on oath complains that on the date(s) indicated below the defendant committed the offense(s) listed below and on any attached pages.</p> | | | | | |

| COUNT | CODE | DESCRIPTION |
|-------|---------|---------------------------------------|
| 1 | 90/23/D | LICENSE SUSPENDED, OP MV WITH c90 §23 |

On 01/19/2016 did operate a motor vehicle after his or her license or right to operate a motor vehicle without a license had been suspended or revoked, or after notice of such suspension or revocation had been issued by the Registrar of Motor Vehicles and received by the defendant or by his or her agent or employer, and prior to the restoration of such license or right to operate or the issuance to him or her of a new license to operate, in violation of G.L. c.90, §23. PENALTY: imprisonment not more than 10 days; or not less than \$500, not more than \$1000 fine; or both; and RMV shall suspend or revoke license for an additional 60 days. PENALTY if defendant has no prior conviction or finding of responsible, delinquency or sufficient facts to support a conviction for operating after suspension: not more than \$500 fine.

| | | |
|-----------------------------------------------------|---------------------------------------------------------------------------------------|---------------------------------------|
| SIGNATURE OF COMPLAINANT <i>X AJ [Signature]</i> | SWORN TO BEFORE CLERK-MAGISTRATE/ASST. CLERK/DEP. ASST. CLERK <i>X [Signature]</i> | DATE 2-29-16 |
| NAME OF COMPLAINANT <i>[Signature]</i> | A TRUE COPY ATTEST <i>X</i> | CLERK-MAGISTRATE/ ASST. CLERK DATE |

Notice to Defendant: 42 U.S.C. § 3796gg-4(e) requires this notice: If you are convicted of a misdemeanor crime of domestic violence you may be prohibited permanently from purchasing and/or possessing a firearm and/or ammunition pursuant to 18 U.S.C. § 922 (g) (9) and other applicable related Federal, State, or local laws.

STATEMENT OF FACTS

APPLICATION NO. (COURT USE ONLY)

PAGE

Trial Court of Massachusetts
District Court Department



IN SUPPORT OF

APPLICATION FOR CRIMINAL COMPLAINT

OF

The undersigned alleges the following as a full or partial statement of the factual basis for the offense(s) for which a criminal complaint is sought.

COURT DIVISION

Summons: Jorge Zambrano (D.O.B 03/14/1981)
170 James St Worc. Ma

On 01/19/2016 at 2144 hours I, Police Officer Alexander Maracallo was dispatched to Plantation St for a reported accident report. Upon arrival the accident scene was located at the intersection of Belmont St and Shrewsbury St. Belmont St and Shrewsbury St are both public ways own and maintain by the City of Worcester. I then spoke with all parties involved. A records check of Jorge Zambrano (D.O.B 03/14/1981) through CJIS revealed Jorge to have a revoked license to operate a motor vehicle. Jorge identified himself as the operator of MA Reg 2YX936 a 2002 Chevy Avalan color black.

Jorge will be charged and summons with operating a motor vehicle with a revoked license.

PRINTED NAME

SIGNATURE

I AM A:

DATE SIGNED

Alexander Maracallo

LAW ENFORCEMENT OFFICER
 CIVILIAN COMPLAINANT OR WITNESS

1/28/16

ADDITIONAL FACTS FOUND BY CLERK-MAGISTRATE / ASST. CLERK / JUDGE BASED ON ORAL TESTIMONY

REMARKS

SIGNATURE OF CLERK-MAGISTRATE / ASST. CLERK / JUDGE

DATE SIGNED

2-24-16

| | | |
|-----------------------------------------------------------|-----------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| TENDER OF PLEA OR ADMISSION & WAIVER OF RIGHTS | DOCKET NO. <i>1662-CR-1297</i> | Trial Court of Massachusetts District Court Department  |
|-----------------------------------------------------------|-----------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|

| | |
|--------------------------------------------|--------------------------------------------------------------------------------------|
| NAME OF DEFENDANT <i>Jorge Zambrano</i> | COURT DIVISION Worcester District Court 225 Main Street Worcester, MA 01605 |
|--------------------------------------------|--------------------------------------------------------------------------------------|

SECTION I CONDITIONAL TENDER OF PLEA OR ADMISSION

GUILTY PLEA ADMISSION TO FACTS SUFFICIENT FOR A FINDING OF GUILTY BINDING PLEA WITH CHARGE CONCESSION UNDER RULE 12(b)(5)(A)

| COUNT NO. | DEFENDANT'S RECOMMENDATION(S) <i>(Include all fees, costs, and conditions of probation)</i> | PROSECUTOR'S RECOMMENDATION(S) <i>(Required when Prosecutor disagrees with Defendant's recommendations)</i> | JUDGE'S DISPOSITION UPON REJECTING A BINDING PLEA OR NON-BINDING RECOMMENDATION |
|-----------|------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|
| | <i>Cust 14r VWF</i> | <i>50</i> | |
| | | | |
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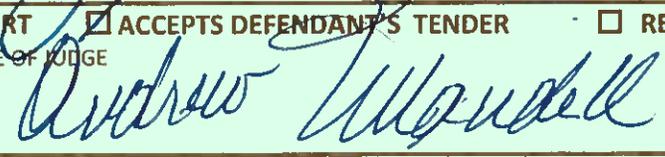
SUSPENDED SENTENCES MAY BE IMPOSED FROM AND AFTER UPON A PROBATION VIOLATION UNLESS OTHERWISE NOTED.

ANY COUNT PLACED ON FILE may be removed from the file at any time and have a sentence imposed (or be scheduled for trial if no guilty finding has been made): (1) at the defendant's request, or (2) if a related conviction or sentence is reversed or vacated, or (3) if it is shown by a preponderance of evidence that the defendant committed a new criminal offense, or (4) if it is shown by a preponderance of evidence that :

The prosecutor may not request that the charge be removed from the file after: _____ (date).

DIST. / MUN. CTS. R. CRIM. P. 4(c) REQUIRES COUNSEL TO CONSULT WITH THE PROBATION DEPARTMENT REGARDING PROBATIONARY TERMS.

| | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|--------------------------------------------------------------------------------------------------------------------------|------------------------|
| SIGNATURE OF DEFENSE COUNSEL OR PRO SE DEFENDANT <i>X</i>  | DATE <i>3-31-16</i> | SIGNATURE OF PROSECUTOR <i>X</i>  | DATE <i>3-31-16</i> |
|--------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|--------------------------------------------------------------------------------------------------------------------------|------------------------|

| | |
|------------------------------------------------------------------------------------------------------------------------------|------------------------|
| THE COURT <input checked="" type="checkbox"/> ACCEPTS DEFENDANT'S TENDER <input type="checkbox"/> REJECTS DEFENDANT'S TENDER | DATE <i>3/31/16</i> |
| SIGNATURE OF JUDGE <i>X</i>  | |

DEFENDANT'S DECISION WHEN COURT REJECTS DEFENDANT'S RECOMMENDATION:

Defendant **WITHDRAWS** the tendered plea or admission Defendant **ACCEPTS** judge's disposition set forth above

| | | | |
|------------------------------|------|------------------------------------|------|
| SIGNATURE OF DEFENSE COUNSEL | DATE | SIGNATURE OF DEFENDANT <i>X</i> | DATE |
|------------------------------|------|------------------------------------|------|

NOTICE OF PROBATION VIOLATION AND HEARING

DOCKET NO.(s), IN WHICH PROBATION WAS ORDERED 11602CR001297
11602CR00537 1562CR005754

PROBATIONER'S NAME & ADDRESS

Jorge Zambrano
65 Wybridge St #3
Worcester, MA 01605

PCF NO.

2449471

PROBATION DEPT. TELEPHONE NO.

508 831-2196

Trial Court of Massachusetts
 District Court Department



Worcester District Court
 225 Main Street
 Worcester, MA 01605

COPY P 106

TO THE ABOVE-NAMED PROBATIONER: YOU ARE HEREBY NOTIFIED of the following alleged violation(s) of the Order of Probation Conditions that was issued to you in the criminal case(s) identified above:

You have violated a criminal law, namely:

| Complaint No(s) | Crime(s) | Date(s) | Place(s) |
|----------------------------------------|-----------------------------|----------------|-----------------|
| <u>11602CR003389</u> <u>Alcohol</u> | <u>Number plate viol to</u> | <u>5/10/10</u> | <u>WORC. MA</u> |
| | <u>License susp. of MV</u> | <u>5/10/10</u> | <u>WORC. MA</u> |
| | <u>Unregistered MV</u> | <u>5/10/10</u> | <u>WORC. MA</u> |

You failed to attend or successfully complete a required program, specifically:

You failed to comply with a testing requirement, specifically: missed screen on 4/8/10, positive for
suboxone use on 4/11/10, self report of cocaine use on 4/11/10, self report of cocaine use on 4/22/10, positive

You failed to make a required payment, specifically: for cocaine on 4/25/10.

You failed to report as required by your probation officer, specifically: missed office visits
on 4/4/10, 4/8/10, 4/11/10, 4/22/10

Other: Self report of Alcohol use on various dates

missed office appointment 5/3/10, missed drug/alcohol screen 4/22/10

YOU ARE HEREBY ORDERED AS FOLLOWS:

YOU MUST APPEAR in THIS COURT on 5/11/10 at 2 PM, for a hearing on the allegation(s) listed above.

You are entitled to have a lawyer represent you at the hearing, and one will be appointed if you cannot afford to hire one. Evidence will be presented against you at the hearing and you will be able to present your own evidence. Speak with your attorney before the hearing to prepare. If you fail to appear, you may be subject to arrest with or without a warrant. If the probation violation(s) alleged above is (are) proved, your probation may be modified or revoked.

YOU MUST APPEAR in the _____ COURT at _____ on _____ at _____, for the appointment of counsel, if necessary, and the scheduling of a hearing on the alleged probation violation(s) listed above. If you fail to appear, you may be subject to arrest with or without a warrant.

A copy of this Notice has been SERVED IN HAND on MAILED to the address of record of the probationer named above.

DATE NOTICE ISSUED amended
4-25-10 5/10/10

SIGNATURE OF ISSUING PROBATION OFFICER
X [Signature]

PROBATIONER'S CONSENT TO IMMEDIATE HEARING

I hereby waive my right to a minimum of seven days notice and I consent to an immediate probation violation hearing.

DATE

SIGNATURE OF PROBATIONER
X

JUDGE'S DETERMINATION OF INDIGENCY

DOCKET NUMBER
1662CR001297

**Trial Court of Massachusetts
District Court Department**



DEFENDANT NAME

Jorge Zambrano

After considering the report and recommendation of the probation officer or other appropriate court employee, and after interrogating the defendant named above, if appropriate, based upon the standards in Supreme Judicial Court Rule 3:10, I FIND THAT THE DEFENDANT IS:

- INDIGENT** because the defendant:
 - receives Transitional Aid to Families with Dependent Children (TAFDC).
 - receives Emergency Aid to Elderly, Disabled or Children (EAEDC).
 - receives poverty-related veterans' benefits.
 - receives refugee resettlement benefits.
 - receives food stamps.
 - receives Medicaid (MassHealth).
 - receives Supplemental Security Income (SSI).
 - is a patient in a mental health facility or treatment center (or is the subject of a proceeding for admission to such a facility) and lacks available funds.
 - is serving a sentence in a correctional institution and has no available funds.
 - is held in custody in a jail and has no available funds.
 - has an annual income, after taxes, 125% or less of the current poverty threshold referred to in G.L. c. 261, § 27A(b).
 - is determined to be indigent pursuant to S.J.C Rule 3:10, § 4(b). [Judge's § 4(b) findings on the record are appended.]
- INDIGENT BUT ABLE TO CONTRIBUTE**, and is therefore ordered to pay \$ _____ toward the cost of counsel because the defendant:
 - has an annual income, after taxes, of more than 125% and less than 250% of the current poverty threshold referred to in G.L. c. 261, § 27A(b).
 - is charged with a felony within the jurisdiction of the Superior Court and has available funds sufficient to pay a portion of the anticipated cost of counsel.
 - is determined to be indigent but able to contribute pursuant to S.J.C Rule 3:10, § 4(b). [Judge's § 4(b) findings on the record are appended.]
- NOT INDIGENT** and is able to pay the anticipated cost of counsel. [Judge's findings on the record are appended if this finding is pursuant to S.J.C. Rule 3:10, § 4(b).]

| | |
|------|--------------------------------|
| DATE | SIGNATURE OF JUDGE X |
|------|--------------------------------|

**CERTIFICATE OF JUDGE
UPON DEFENDANT'S WAIVER OF COUNSEL**

I certify that I have informed the defendant of the right to counsel in accordance with Supreme Judicial Court Rule 3:10 and G.L. c. 211D, § 5, that he or she has knowingly elected to proceed without a lawyer, and that he or she has:

- executed a waiver of counsel in my presence.
- refused to sign a waiver.

| | |
|------|--------------------------------|
| DATE | SIGNATURE OF JUDGE X |
|------|--------------------------------|

**JUDGE'S DETERMINATION
PURSUANT TO G.L. c. 211D, § 2A**

Pursuant to G.L. c. 211D, § 2A, at arraignment I have informed the defendant, who is charged only with misdemeanor(s) or violation(s) of municipal ordinances or bylaws, that I am declining to appoint counsel and therefore if he or she is convicted of such offense(s), the sentence(s) to be imposed will not include any period of incarceration. This determination may subsequently be revoked in accordance with § 2A.

| | |
|------|--------------------------------|
| DATE | SIGNATURE OF JUDGE X |
|------|--------------------------------|

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|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| ASSESSMENT OR WAIVER OF MONEYS IN CRIMINAL CASE | DOCKET NO. | Massachusetts Trial Court District Court Department |
| DEFENDANT NAME | | DIVISION |
| GENERAL CASE-RELATED ASSESSMENTS | | |
| <i>Fine/Surfine/Assessment/Fee/Costs</i> | <i>Assessment</i> | <i>Waiver & Findings</i> |
| FINE & SURFINE (c.280 §6A) 25% surfine is required on any criminal fine except for motor vehicle offenses not punishable by incarceration. Count _____ Count _____ | <input type="checkbox"/> <i>Fine</i> <input type="checkbox"/> <i>Surfine</i> \$ \$ \$ \$ | <input type="checkbox"/> Waived: defendant is indigent. <input type="checkbox"/> Surfine waived; defendant imprisoned for non-payment of fine, would work a hardship on him/her or immediate family. |
| CIVIL ASSESSMENT (c.90C §31C(3)) or CIVIL FINE (c.277 §70C) Required if defendant is responsible for CMVI except where accompanying criminal charge is filed without assessment, or misdemeanor is disposed as a civil infraction. | <input type="checkbox"/> \$ | |
| RESTITUTION Statutorily required for specific offenses. | <input type="checkbox"/> \$ <i>500</i> | <input type="checkbox"/> Waived <input type="checkbox"/> Reduced to \$ Financially unable to pay; other punishment can satisfy the Commonwealth's interest. |
| VICTIM/WITNESS ASSESSMENT (c.258B §8) Upon conviction or finding of sufficient facts: • not less than \$90 is required for any felony • \$50 is required for any misdemeanor • \$45 is required for any delinquency. | <input type="checkbox"/> \$ 90 <input type="checkbox"/> \$ for felony <input type="checkbox"/> \$ 50 for misdemeanor <input type="checkbox"/> \$ 45 for delinquency | Payment would cause severe financial hardship: <input type="checkbox"/> Waived <input type="checkbox"/> Reduced to \$ <input type="checkbox"/> Payment plan: _____ |
| DOMESTIC VIOLENCE PREVENTION ASSESSMENT (c.258B §8) Upon conviction for: • c.265 §13M Domestic Assault or A&B • c.265 §15D Strangulation • Violation of Restraining Order pursuant to c.209 §§18,34B; c.209 §32; c.209A §§3,4,5; • c.209C §§15,20 • an act which would constitute abuse, as defined in c.209A §1. | <input type="checkbox"/> \$ 50 <i>Approved</i> | Payment would cause severe financial hardship: <input type="checkbox"/> Waived <input type="checkbox"/> Reduced to \$ <input type="checkbox"/> Payment plan: _____; <input type="checkbox"/> (at least 8) hours community service as structured payment plan would impose a severe financial hardship |
| PROBATION FEE & SURCHARGE (c.276 §87A ¶¶2,4-8) Required from defendant who is placed on supervised probation or OUI probation (except for nonsupport convictions where support payments are a condition of probation). Indigent defendant must perform one day of community work service monthly. | <input type="checkbox"/> \$ 65 per month of probation <i>3/31</i> | <input type="checkbox"/> Waived <input type="checkbox"/> Reduced to \$ after hearing because: <input type="checkbox"/> payment would constitute an undue hardship on defendant or his/her family due to limited income, employment status, or some other factor. Defendant must instead perform community work service of _____ monthly. <input checked="" type="checkbox"/> offset of amount of restitution payments assessed against defendant. |
| ADMINISTRATIVE PROBATION FEE & SURCHARGE (c.276 §87A ¶¶3-8) Required from defendant who is placed on administrative supervised probation (except for nonsupport convictions where support payments are a condition of probation). Indigent defendant must perform 4 hours of community work service monthly. | <input type="checkbox"/> \$ 50 per month of probation | |
| COUNSEL FEE (c.211D §2A) Required when counsel appointed for defendant who is indigent or indigent but able to contribute. | <input type="checkbox"/> \$ 150 | <input type="checkbox"/> Waived: unable to pay within 180 days. <input type="checkbox"/> Fee may be "worked off" with 15 hours of community service. |
| COUNSEL CONTRIBUTION (c.211D §2; SJC Rule 3:10[10](c)) "Reasonable amount" required toward cost of counsel (in addition to Counsel Fee) when counsel appointed for defendant who is indigent but able to contribute. | <input type="checkbox"/> \$ | |
| COURT COSTS • Optional as condition of dismissal, filing, or probation (c.280 §6). • Optional as condition of continuance (Mass.R.Crim.P. 10[b]). • Optional upon intentional/negligent default (c.280 §8; Mass.R.Crim.P. 6[d](1)). | <input type="checkbox"/> \$ | |
| DEFAULT WARRANT FEE (c.276 §30 ¶1 & §31) • Required when a default warrant is recalled, or • when a default warrant is issued solely for defendant's failure to pay required moneys. | <input type="checkbox"/> \$ 50 | <input type="checkbox"/> Waived upon good cause: |
| DEFAULT WARRANT ARREST FEE (c.276 §30 ¶2) Required when defendant arrested on default/probation warrant, payable to municipality where arrest made. Statutory alternative of one day of community service is required of indigent defendant who is physically/mentally able. | <input type="checkbox"/> \$ 75 | <input type="checkbox"/> Waived: defendant is indigent & must perform 1 day community service. <input type="checkbox"/> Community service waived: physically or mentally unable to perform it. |

| | | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|---------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|
| SUMMONS TO DEFENDANT COURT FILE COPY | | DOCKET NUMBER 1662CR001297 | | Trial Court of Massachusetts District Court Department  | |
| DOB 03/14/1981 | GENDER Male | PHONE (508)713-7800 | NO. COUNTS 1 | COURT NAME & ADDRESS Worcester District Court 225 Main Street Worcester, MA 01608 (508)831-2010 | |
| NAME & ADDRESS OF DEFENDANT Jorge Zambrano 22 Saxon Road Worcester, MA 01602 | | | | DATE & TIME 03/30/2016 09:00 AM | YOU MUST APPEAR AT ABOVE COURT ON THIS DATE & TIME |
| | | | | ROOM/SESSION 1st Session, Ctrm 14 | |
| POLICE DEPARTMENT OF OFFENSE Worcester PD | | | | SCHEDULED EVENT Arraignment | |
| FIRST FIVE OFFENSE COUNTS | | | | | |
| COUNT | CODE | OFFENSE DESCRIPTION | DATE OF OFFENSE | | |
| 1 | 90/23/D | LICENSE SUSPENDED, OP MV WITH c90 §23 | 01/19/2016 | | |
| TO THE ABOVE-NAMED DEFENDANT: | | | | | |
| You are hereby ordered to appear in this court on the date and time indicated above to answer to a criminal complaint that has been issued against you. Please report to the probation office upon your arrival at the court. | | | | | |
| TESTE OF FIRST JUSTICE WITNESS: Hon. Paul F LoConto | | DATE ISSUED 2/24/16 | SIGNATURE (OR FACSIMILE) OF CLERK-MAGISTRATE / ASST. CLERK X | | |

INSTRUCTIONS TO DEFENDANT

- 1. YOU ARE REQUIRED TO APPEAR IN COURT** on the date and time shown above. Please bring this summons with you to the court.
- 2. IF YOU FAIL TO APPEAR** in court on the date and time shown above or on any future scheduled dates, you will be found in default, a warrant for your immediate arrest will be issued, the Registry of Motor Vehicles will suspend your driver's license or right to operate, and you may be required to pay substantial court costs and warrant removal fees. The court may also issue a new criminal complaint against you for failing to appear (G.L. c.276, §82A), which is separately punishable by up to \$50,000 in fines and up to 5 years imprisonment (if you are charged with a felony) or up to \$10,000 in fines and up to 1 year imprisonment (if you are charged with a misdemeanor).
- 3. THE CHARGES AGAINST YOU.** The number of offense counts (charges) in this criminal complaint are shown in the "no. counts" box above, and the first five offense counts are listed above. If there are more than five offense counts, you may obtain the details of them from the clerk-magistrate's office prior to arraignment. At your arraignment, you or your lawyer will be given a copy of the complaint.
- 4. LAWYER.** You have a right to be represented by an attorney at every state of proceedings against you. If you are charged with an offense punishable by imprisonment and you are unable to afford an attorney, you may be entitled to the services of a court-appointed attorney at no or reduced cost to you. You may apply for a court-appointed attorney when you report to the probation office on the date and time shown above.
- 5. TRIAL BY JURY OR TRIAL BY A JUDGE.** If your case is not disposed of at arraignment or as a result of a pretrial hearing by a guilty plea or other disposition, it will be scheduled for trial before a jury of six persons. If you waive the right to a jury, your case will be scheduled for trial by a judge without a jury. At any trial, you may remain silent and will be presumed innocent, the prosecution will have to prove each charge beyond a reasonable doubt, and you may question any witnesses against you and present witnesses on your own behalf.

| | | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|------------------------------------------------|------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| SUMMONS TO DEFENDANT RETURN OF SERVICE | | DOCKET NUMBER 1662CR001297 | | Trial Court of Massachusetts District Court Department  | |
| DOB 03/14/1981 | GENDER Male | PHONE (508)713-7800 | NO. COUNTS 1 | COURT NAME & ADDRESS Worcester District Court 225 Main Street Worcester, MA 01608 (508)831-2010 | |
| NAME & ADDRESS OF DEFENDANT Jorge Zambrano 22 Saxon Road Worcester, MA 01602 | | | | DATE & TIME 03/30/2016 09:00 AM | YOU MUST APPEAR AT ABOVE COURT ON THIS DATE & TIME |
| | | | | ROOM/SESSION 1st Session, Ctrm 14 | |
| POLICE DEPARTMENT OF OFFENSE Worcester PD | | | | SCHEDULED EVENT Arraignment | |
| FIRST FIVE OFFENSE COUNTS | | | | | |
| <u>COUNT</u> | <u>CODE</u> | <u>OFFENSE DESCRIPTION</u> | <u>DATE OF OFFENSE</u> | | |
| 1 | 90/23/D | LICENSE SUSPENDED, OP MV WITH c90 §23 | 01/19/2016 | | |
| TO THE ABOVE-NAMED DEFENDANT: | | | | | |
| You are hereby ordered to appear in this court on the date and time indicated above to answer to a criminal complaint that has been issued against you. Please report to the probation office upon your arrival at the court. | | | | | |
| TESTE OF FIRST JUSTICE WITNESS: Hon. Paul F LoConto | | DATE ISSUED 2/24/16 | SIGNATURE (OR FACSIMILE) OF CLERK-MAGISTRATE / ASST. CLERK X | | |
| TO ANY PERSON AUTHORIZED TO SERVE CRIMINAL PROCESS: | | | | | |
| You are hereby commanded to serve the defendant's copy of this summons upon the defendant named above, and make your return of service below. | | | | | |
| RETURN OF SERVICE | | | | | |
| I hereby certify that I served a copy of this summons not less than 24 hours before the scheduled date and time of appearance by ("x" one) | | | | | |
| <input type="checkbox"/> Delivering a copy of it personally to the defendant. | | | | | |
| <input type="checkbox"/> Leaving a copy of it at the dwelling house or usual place of abode of the defendant with the following person of suitable age and discretion residing therein: | | | | | |
| <input type="checkbox"/> Mailing a copy of it to the defendant at the defendant's last known address, shown above. | | | | | |
| <input type="checkbox"/> I was unable to make service because: DATE OF SERVICE | | | | | |
| DATE OF SERVICE | | SIGNATURE OF PERSON MAKING SERVICE X | | TITLE OF PERSON MAKING SERVICE | |

| | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|-------------------------------|-------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| CRIMINAL COMPLAINT POLICE COPY | | DOCKET NUMBER 1662CR001297 | NO. OF COUNTS 1 | Trial Court of Massachusetts District Court Department  |
| DEFENDANT NAME & ADDRESS Jorge Zambrano 22 Saxon Road Worcester, MA 01602 | | | COURT NAME & ADDRESS Worcester District Court 225 Main Street Worcester, MA 01608 (508)831-2010 | |
| DEFENDANT DOB 03/14/1981 | COMPLAINT ISSUED 02/24/2016 | DATE OF OFFENSE 01/19/2016 | ARREST DATE | |
| OFFENSE CITY / TOWN Worcester | OFFENSE ADDRESS | | NEXT EVENT DATE & TIME 03/30/2016 09:00 AM | |
| POLICE DEPARTMENT Worcester PD | POLICE INCIDENT NUMBER 20166150 | | NEXT SCHEDULED EVENT Arraignment | |
| OBTN | PCF NUMBER 2449471 | DEFENDANT XREF ID 6494604 | ROOM / SESSION 1st Session, Ctrm 14 | |
| The undersigned complainant, on behalf of the Commonwealth, on oath complains that on the date(s) indicated below the defendant committed the offense(s) listed below and on any attached pages. | | | | |

| COUNT | CODE | DESCRIPTION |
|-------|---------|---------------------------------------|
| 1 | 90/23/D | LICENSE SUSPENDED, OP MV WITH c90 §23 |

On 01/19/2016 did operate a motor vehicle after his or her license or right to operate a motor vehicle without a license had been suspended or revoked, or after notice of such suspension or revocation had been issued by the Registrar of Motor Vehicles and received by the defendant or by his or her agent or employer, and prior to the restoration of such license or right to operate or the issuance to him or her of a new license to operate, in violation of G.L. c.90, §23.

PENALTY: imprisonment not more than 10 days; or not less than \$500, not more than \$1000 fine; or both; and RMV shall suspend or revoke license for an additional 60 days. PENALTY if defendant has no prior conviction or finding of responsible, delinquency or sufficient facts to support a conviction for operating after suspension: not more than \$500 fine.

| | | | |
|-------------------------------|--------------------------------------------------------------------|-------------------------------|------|
| SIGNATURE OF COMPLAINANT X | SWORN TO BEFORE CLERK-MAGISTRATE/ASST. CLERK/DEP. ASST. CLERK X | | DATE |
| NAME OF COMPLAINANT | A TRUE COPY ATTEST X | CLERK-MAGISTRATE/ ASST. CLERK | DATE |

Notice to Defendant: 42 U.S.C. § 3796gg-4(e) requires this notice: If you are convicted of a misdemeanor crime of domestic violence you may be prohibited permanently from purchasing and/or possessing a firearm and/or ammunition pursuant to 18 U.S.C. § 922 (g) (9) and other applicable related Federal, State, or local laws.

APPEARANCE OF COUNSEL

Trial Court of Massachusetts District Court Department



DOCKET NUMBER

COURT NAME AND ADDRESS

YEAR* COURT NUMBER CASE TYPE** CASE NUMBER

Worcester District Court
225 Main Street
Worcester, MA 01605

*e.g. "93", "94" etc
**e.g. "CR", "CV" etc

To the Clerk - Magistrate:

Please enter my appearance as attorney for Jorge Zambrows

in the above numbered court action.

ATTORNEY NAME

Anthony J Scob

B.B.O. NUMBER (Required)

448950

ATTORNEY FIRM

TELEPHONE NUMBER

(508) 7556314

STREET ADDRESS

44 Riverside St

EMAIL ADDRESS

CITY/TOWN

Holden

STATE

MA

ZIP CODE

01520

X

SIGNATURE OF ATTORNEY

3-30-16
DATE



WORCESTER POLICE DEPARTMENT WITNESS LIST

1. This witness list form is to be attached to complaint. It is only necessary on one defendant (if there is a co-defendant(s) involved).
2. Every arrest must have this form attached whether a witness is needed or not.
3. This list will make the summoning of witnesses by the arresting officer no longer necessary.
4. This will make the Appeals Form no longer necessary.

| | DATE | OFFICER | UNIT |
|----------|------------|---------------------|--------------------------|
| ARREST | | | |
| WARRANT | | | |
| SUBPOENA | | | |
| HEARING | 01/20/2016 | Alexander Maracallo | 1 st Half Ops |

| | DEFENDANT | ARREST NO. | COMPLAINT NO. |
|---|----------------|------------|---------------|
| 1 | Jorge Zambrano | | 16-6150 |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| 5 | | | |

CIVILIAN WITNESSES

| | NAME | ADDRESS | TELEPHONE NO. |
|---|---------------|--------------------------------|---------------|
| 1 | Chase Ellison | 139 Leoleis DR Marlborough, Ma | |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| 5 | | | |

NOTE: If no civilian witnesses are needed print NONE across witness section.

DO NOT WRITE BELOW THIS LINE. FOR LIAISON USE ONLY.

| | | |
|-------------------------------|--|----------|
| ARRAIGNMENT DATE | | |
| CONTINUANCE DATE | | |
| HEARING DATE at 8am Room 1023 | | |
| | | |
| | | |
| | | |
| W.P.D. FORM 248 (9/00) | | |
| PROBABLE CAUSE | | APPEALED |

**APPLICATION FOR
CRIMINAL COMPLAINT**

APPLICATION NO. (COURT USE ONLY)

1162 AC 128

PAGE

of

**Trial Court of Massachusetts
District Court Department**



I, undersigned complainant, request that a criminal complaint issue against the accused charging the offense(s) listed below. If the accused **HAS NOT BEEN ARRESTED** and the charges involve:

- ONLY MISDEMEANOR(S), I request a hearing WITHOUT NOTICE because of an imminent threat of
 - BODILY INJURY COMMISSION OF A CRIME FLIGHT WITH NOTICE to accused.
- ONE OR MORE FELONIES, I request a hearing WITHOUT NOTICE WITH NOTICE to accused.
- WARRANT is requested because prosecutor represents that accused may not appear unless arrested.

Worcester District Court
225 Main Street
Worcester, MA 01605

ARREST STATUS OF ACCUSED
 HAS HAS NOT been arrested

INFORMATION ABOUT ACCUSED

| | | | | | | | | | |
|-----------------------------------------------------------------------------------------------|-----------|------------|--------------------------------------|----------------------------------|--|-------------------------------|--|-----------|--|
| NAME (FIRST MI LAST) AND ADDRESS Jorge Zambrano 170 James St Worcester, MA 01610 | | | | BIRTH DATE 3/14/81 | | SOCIAL SECURITY NUMBER | | | |
| | | | | PCF NO. | | MARITAL STATUS | | | |
| | | | | DRIVERS LICENSE NO. S42250828 | | STATE | | | |
| | | | | GENDER | | HEIGHT | | WEIGHT | |
| HAIR | RACE H | COMPLEXION | SCARS/MARKS/TATTOOS | INTERPRETER NEEDED (language) | | BIRTH STATE OR COUNTRY | | DAY PHONE | |
| EMPLOYER/SCHOOL | | | MOTHER'S MAIDEN NAME (FIRST MI LAST) | | | FATHER'S NAME (FIRST MI LAST) | | | |

CASE INFORMATION

| | | | | |
|-----------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------|------|------------|
| COMPLAINANT NAME (FIRST MI LAST) Alex Alaricello | | COMPLAINANT TYPE <input checked="" type="checkbox"/> POLICE <input type="checkbox"/> CITIZEN <input type="checkbox"/> OTHER | | PD Werc |
| ADDRESS 9/11 Lincoln Sq Worcester, MA 01606 | | PLACE OF OFFENSE 503 Shrewsbury St | | |
| | | INCIDENT REPORT NO. 16-6150 | OBTN | |
| | | CITATION NO(S) | | |

| OFFENSE CODE | DESCRIPTION | OFFENSE DATE |
|-------------------------------------------------------------------------------------------------------------------------------------------|-----------------|--------------|
| 1 90/23 | License Revoked | 1/19/16 |
| VARIABLES (e.g. victim name, controlled substance, type and value of property, other variable information; see Complaint Language Manual) | | |
| 2 | | |
| VARIABLES | | |
| 3 | | |
| VARIABLES | | |

| | | |
|---------|------------------------------------------|-----------------------|
| REMARKS | COMPLAINANT'S SIGNATURE X [Signature] | DATE FILED 1/20/16 |
|---------|------------------------------------------|-----------------------|

| | | | | | |
|-----------------------|--------------------------------------------------------------------------------------|-----------------|----|-----------------|-----------------------|
| COURT USE ONLY | A HEARING UPON THIS COMPLAINT APPLICATION WILL BE HELD AT THE ABOVE COURT ADDRESS ON | DATE OF HEARING | AT | TIME OF HEARING | COURT USE ONLY |
|-----------------------|--------------------------------------------------------------------------------------|-----------------|----|-----------------|-----------------------|

| DATE | PROCESSING OF NON-ARREST APPLICATION (COURT USE ONLY) | CLERK/JUDGE |
|------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|
| | NOTICE SENT OF CLERK'S HEARING SCHEDULED ON: | |
| | NOTICE SENT OF JUDGE'S HEARING SCHEDULED ON: | |
| | HEARING CONTINUED TO: | |
| | APPLICATION DECIDED WITHOUT NOTICE TO ACCUSED BECAUSE: <ul style="list-style-type: none"> <input type="checkbox"/> IMMINENT THREAT OF <input type="checkbox"/> BODILY INJURY <input type="checkbox"/> CRIME <input type="checkbox"/> FLIGHT BY ACCUSED <input type="checkbox"/> FELONY CHARGED AND POLICE DO NOT REQUEST NOTICE <input type="checkbox"/> FELONY CHARGED BY CIVILIAN; NO NOTICE AT CLERK'S DISCRETION | |

| DATE | COMPLAINT TO ISSUE | COMPLAINT DENIED | CLERK/JUDGE |
|---------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|
| 2-24-16 | <input checked="" type="checkbox"/> PROBABLE CAUSE FOUND FOR ABOVE OFFENSE(S) NO(S) <input checked="" type="checkbox"/> 1. <input type="checkbox"/> 2. <input type="checkbox"/> 3. BASED ON <input checked="" type="checkbox"/> FACTS SET FORTH IN ATTACHED STATEMENT(S) <input type="checkbox"/> TESTIMONY RECORDED: TAPE NO. _____ START NO. _____ END NO. _____ <input type="checkbox"/> WARRANT <input type="checkbox"/> SUMMONS TO ISSUE SCHEDULED ARRAIGNMENT DATE: _____ | <input type="checkbox"/> NO PROBABLE CAUSE FOUND <input type="checkbox"/> REQUEST OF COMPLAINANT <input type="checkbox"/> FAILURE TO PROSECUTE <input type="checkbox"/> AGREEMENT OF BOTH PARTIES <input type="checkbox"/> OTHER: _____ COMMENT 44 | 603 |

22 Saxon Rd
Worcester

01602

Hearing
2.24.16
9:00 AM

MA area codes), or 800-858-3928 (for hearing impaired customers within MA). Monday - Friday from 9am - 5pm.

X
Signature of Violator _____ Date _____

2 REQUEST A COURT HEARING. I deny that I am responsible for the civil infraction(s) charged on this citation and request a civil hearing before a court magistrate. I understand that I must pay a \$25 court filing fee before the court will notify me by mail of the date and time of the hearing and must appear in court on the scheduled date and time. Place your \$25 court filing fee in the envelope provided and mail it to the address below. Check off the hearing request box on the front of the envelope.

To pay your court filing fee: Make your check payable to MassDOT, write the citation number, your license number and state of issuance on the front of the check. DO NOT MAIL CASH. Place your \$25 court filing fee and this citation in the envelope provided and mail it to the address below. Remember to check off the Hearing Request/Filing Fee box on the front of the envelope.

Report Address Changes: All correspondence will be mailed to the address on file at the RMV. It is important to report address changes. I certify that I entered my correct mailing address on the front of the envelope and authorize the RMV to make any necessary changes.

X
Signature of Violator _____ Date _____

Mail Payment For Citation Or Court Hearing Request And Court Filing Fee To:
Citation Processing Center
Box 55890, Boston, MA 02205-5890

INSTRUCTION B (CRIMINAL APPLICATION)

If "CRIMINAL APPLICATION" is checked you will be granted a hearing as to whether a criminal complaint should issue against you if you sign below and return this citation WITHIN 4 DAYS to the Clerk-Magistrate of the court named on the front of this citation. Any accompanying civil infractions will be determined during the criminal proceedings and cannot be paid in advance.

X
Signature of Violator _____ Date 1-21-16

ADDRESS CHANGES MUST BE REPORTED TO BOTH THE REGISTRY OF MOTOR VEHICLES AND TO THE COURT.

CITATION

OFFICER I.D. NUMBER: M132 COURT CODE: 62 TYPE OF CITATION: OPERATOR OWNER PASSENGER BICYCLIST

STATE: MA CLASS: D CDL LICENSE: YES NO RACE: H SEX: M NON-INVENTORY MV SEARCH: YES NO

PLATE: R6373817

VIOLATOR: Zambano, Jorge (First) CITY/TOWN: Worcester STATE: MA ZIP: 01610

PLATE TYPE: PC VEHICLE REGISTRATION NO: 2YX936 STATE: MA YEAR: 02 MAKE AND TYPE: Chev Avalan COLOR: Blk CDL VEHICLE: YES NO PASSENGERS: YES NO PLACARDED HAZMAT: YES NO

OFFENSE DATE (MM/DD/YY): 1/19/16 LOCATION OF OFFENSE (include #, st, hwy, city or town): Belmont & E Shrewsbury St

A. CHAP/SEC/SUB: 90/23 DESCRIPTION OF OFFENSE: Revoked license

B. CRIM CIVIL

C. CRIM CIVIL

D. SPEEDING: 90/17 90/18 MPH IN A MPH ZONE POSTED NOT POSTED CLOKED RADAR ESTIMATED

ASSESSMENT: \$ JUDGMENT: \$ JUDGMENT DATE: 2/18/16

OFFICER CHECK ONE ONLY: ALL CIVIL INFRACTIONS (See instruction A on back) CRIMINAL APPLICATION (See instruction B on back) ARREST WARNING (No action required)

OFFICER CERTIFIES: IN HAND TO VIOL. MAILED TO VIOL. IN HAND TO VIOLATOR'S AGENT

VIOLATOR/AGENT ACKNOWLEDGES RECEIPT OF CITATION

AGENT NAME: _____ AGENT'S LICENSE NUMBER & STATE: _____

COURT ADDRESS: 225 Main St Worcester, MA 01608

RMV COPY (IF CIVIL) OR COURT COPY (IF CRIMINAL)