

CRIMINAL DOCKET		DOCKET NUMBER	NO. OF COUNTS	Trial Court of Massachusetts District Court Department	
DEFENDANT NAME AND ADDRESS Jorge A Zambrano 25 Queen Street Worcester, MA 01609		DOB 03/14/1981	GENDER Male	COURT NAME & ADDRESS Worcester District Court 225 Main Street Worcester, MA 01608	
		DATE COMPLAINT ISSUED 01/25/2016	PRECOMPLAINT ARREST DATE 01/24/2016		INTERPRETER REQUIRED
FIRST FIVE OFFENSE COUNTS					
COUNT	CODE	OFFENSE DESCRIPTION		OFFENSE DATE	
1	265/13D/A	A&B ON POLICE OFFICER c265 §13D		01/24/2016	
2	268/32B	RESIST ARREST c268 §32B		01/24/2016	
DEFENSE ATTORNEY		OFFENSE CITY/TOWN Worcester		POLICE DEPARTMENT Worcester PD	
DATE & JUDGE	DOCKET ENTRY		DATE & JUDGE	FEES IMPOSED	
1/26/16	<input checked="" type="checkbox"/> Attorney appointed (SJC-R-318) <input type="checkbox"/> Atty denied & Deft. Advised per 211 D §2A <input type="checkbox"/> Waiver of Counsel found after colloquy			Counsel Fee (211D § 2A(2)) <input type="checkbox"/> WAIVED	
	Terms of release set: <input checked="" type="checkbox"/> PR <input type="checkbox"/> Bail 1-26-16 <input type="checkbox"/> See Docket for special condition <input type="checkbox"/> Held (276 §58A)			Counsel Contribution (211D § 2) <input type="checkbox"/> WAIVED	
McGill J				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 MADDAUS	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 MADDAUS	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	01/25/2016	Arraignment	<input checked="" type="checkbox"/> Held <input type="checkbox"/> Not Held but Event Resolved <input type="checkbox"/> Cont'd	McGill J	9:56 9:58
2	2-5-16	PTC/PTCH	<input type="checkbox"/> Held <input type="checkbox"/> Not Held but Event Resolved <input type="checkbox"/> Cont'd	Ward	
3	3-14-16	PTCH	<input type="checkbox"/> Held <input type="checkbox"/> Not Held but Event Resolved <input type="checkbox"/> Cont'd	Allard-Madaus	
4	3-31-16	P. LEADO	<input type="checkbox"/> Held <input type="checkbox"/> Not Held but Event Resolved <input type="checkbox"/> Cont'd	19 March 12/15	
5	5-11-16	UP 2PM	<input type="checkbox"/> Held <input type="checkbox"/> Not Held but Event Resolved <input type="checkbox"/> Cont'd		
6	6-7-16	UP 9am	<input checked="" 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			TOTAL NO. OF PAGES	ON (DATE)
	X				



CRIMINAL DOCKET - OFFENSES		DEFENDANT NAME		DOCKET NUMBER		
		Jorge A Zambrano		1662CR000537		
COUNT / OFFENSE			DISPOSITION DATE AND JUDGE			
1 A&B ON POLICE OFFICER c265 §13D			3/31/16 <i>Mansory</i>			
DISPOSITION METHOD		FINE/ASSESSMENT	SURFINE	COSTS	OUI §24D FEE	OUI VICTIMS ASMT
<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)				50		
FINDING		SENTENCE OR OTHER DISPOSITION		JUDGE		DATE
<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		<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: CONC W/ 156219 5954				
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			
2 RESIST ARREST c268 §32B			3/31/16 <i>Mansory</i>			
DISPOSITION METHOD		FINE/ASSESSMENT	SURFINE	COSTS	OUI §24D FEE	OUI VICTIMS ASMT
<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)						
FINDING		SENTENCE OR OTHER DISPOSITION		JUDGE		DATE
<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		<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: CONC W/ 1				
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		FINE/ASSESSMENT	SURFINE	COSTS	OUI §24D FEE	OUI VICTIMS ASMT
<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)						
FINDING		SENTENCE OR OTHER DISPOSITION		JUDGE		DATE
<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		<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:				
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)						



CRIMINAL COMPLAINT ORIGINAL		DOCKET NUMBER 1662CR000537	NO. OF COUNTS 2	Trial Court of Massachusetts District Court Department
DEFENDANT NAME & ADDRESS Jorge A Zambrano 25 Queen Street Worcester, MA 01609			COURT NAME & ADDRESS Worcester District Court 225 Main Street Worcester, MA 01608 (508)831-2010	
DEFENDANT DOB 03/14/1981	COMPLAINT ISSUED 01/25/2016	DATE OF OFFENSE 01/24/2016	ARREST DATE 01/24/2016	
OFFENSE CITY / TOWN Worcester	OFFENSE ADDRESS		NEXT EVENT DATE & TIME 01/25/2016 08:55 AM	
POLICE DEPARTMENT Worcester PD	POLICE INCIDENT NUMBER 16-7521		NEXT SCHEDULED EVENT Arraignment	
OBTN TWOR160000340	PCF NUMBER 2449471	DEFENDANT XREF ID 7512729		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	265/13D/A	A&B ON POLICE OFFICER c265 §13D

On 01/24/2016 did assault and beat Michael LaHair, a police officer who was then engaged in the performance of his or her duties, in violation of G.L. c.265, §13D.

PENALTY: house of correction not less than 90 days, not more than 2½ years; or not less than \$500, not more than \$5000.

2	268/32B	RESIST ARREST c268 §32B
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On 01/24/2016 did knowingly prevent or attempt to prevent a police officer, as defined in G.L. c. 268, §32B(c), who was acting under color of his or her official authority, from effecting an arrest, by: (1) using or threatening to use physical force or violence against the police officer or another; or (2) using some other means which created a substantial risk of causing bodily injury to such police officer or another, in violation of G.L. c. 268, §32B.

PENALTY: jail or house of correction for not more than 2½ years; or not more than \$500; or both.

SIGNATURE OF COMPLAINANT <i>X [Signature]</i>	SWORN TO BEFORE <input checked="" type="checkbox"/> CLERK-MAGISTRATE/ASST. CLERK/DEP. ASST. CLERK <i>[Signature]</i>	DATE 1-25-16
NAME OF COMPLAINANT <i>[Signature]</i>	A TRUE COPY ATTEST <input checked="" type="checkbox"/>	CLERK-MAGISTRATE/ASST. CLERK <i>[Signature]</i>
		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.

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>5/16/16</u>	<u>WORC. MA</u>
	<u>License susp. of MV</u>	<u>5/16/16</u>	<u>WORC. MA</u>
	<u>Unregistered MV</u>	<u>5/16/16</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 4/8/16, positive for
suboxone use on 4/11/16, self report of cocaine use on 4/11/16, self report of cocaine use on 4/22/16, positive

You failed to make a required payment, specifically: for cocaine on 4/25/16.

You failed to report as required by your probation officer, specifically: missed office visits
on 4/14/16, 4/8/16, 4/11/16, 4/22/16

Other: Self report of Alcohol use on various dates

missed office appointment 5/3/16, missed drug/alcohol
screen 4/22/16

YOU ARE HEREBY ORDERED AS FOLLOWS:

YOU MUST APPEAR in THIS COURT on 5/11/16 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
4-25-16 5/16/16

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

APPLICATION FOR CRIMINAL COMPLAINT

APPLICATION NO. (COURT USE ONLY)

340

PAGE

1 of 1

Trial Court of Massachusetts District Court Department



I, the 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 01608

15-26-14

ARREST STATUS OF ACCUSED

- HAS HAS NOT been arrested

INFORMATION ABOUT ACCUSED

NAME (FIRST MI LAST) AND ADDRESS JORGE A ZAMBRANO 25 QUEEN ST, Worcester MA, 01609				BIRTH DATE 03/14/1981		SOCIAL SECURITY NUMBER 593-70-5052	
				PCF NO. 2449471		MARITAL STATUS Single	
				DRIVERS LICENSE NO. S42250828 SUS			
HAIR Brown		RACE Hispanic		COMPLEXION Fair		SCARS/MARKS/TATTOOS Converted IMAG/Converted STAT/Converted STAT/Tattoo, back	
				BIRTH STATE OR COUNTRY FL		DAY PHONE 508-799-5987	
EMPLOYER/SCHOOL Employer: SELF EMPLOYED		MOTHER'S MAIDEN NAME (FIRST MI LAST) MC: YOLANDA FIELD NOK:				FATHER'S NAME (FIRST MI LAST) MC: JORGE SR. NOK:	

16-537

CASE INFORMATION

COMPLAINANT NAME (FIRST MI LAST) Police Officer Michael H LaHair		COMPLAINANT TYPE <input checked="" type="checkbox"/> POLICE <input type="checkbox"/> CITIZEN <input type="checkbox"/> OTHER		PD. Worcester Police Department
ADDRESS 911 LINCOLN SQ, Worcester MA, 01605		PLACE OF OFFENSE 152 LINCOLN ST Worcester MA 01605		
		INCIDENT REPORT NO. 2016000007521	OBTN TWOR160000340	
CITATION NO(S).				

	OFFENSE CODE	DESCRIPTION	OFFENSE DATE
1	265/13D/A	A&B on Police Officer	01/24/2016
	VARIABLES (e.g. victim name, controlled substance, type and value of property, other variable information, see Complaint Language Manual) <i>PO, Michael LaHair</i>		<i>Hands</i>
2	268/32B	Resisting Arrest	01/24/2016
	VARIABLES		
3			
	VARIABLES		

REMARKS	COMPLAINANT'S SIGNATURE <i>[Signature]</i>	DATE FILED <i>1-24-16</i>
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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
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DATE	PROCESSING OF NON-ARREST APPLICATION (COURT USE ONLY)	CLERK/JUDGES
	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:	
<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/JUDGES
<i>1-25-16</i>	<input checked="" type="checkbox"/> PROBABLE CAUSE FOUND FOR ABOVE OFFENSES NO(S) <input checked="" type="checkbox"/> 1. <input type="checkbox"/> 2. <input type="checkbox"/> 3. BASED ON <input checked="" type="checkbox"/> FACTS SET FOURTH 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 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	<i>[Signature]</i>

STATEMENT OF FACTS
IN SUPPORT OF
APPLICATION FOR CRIMINAL COMPLAINT

APPLICATION NO. (court use only)

PAGE
1 OF 1

Trial Court of Massachusetts
District Court Department



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

62

WPD Incident # 16-7521

On 1-24-16 at approx.: 0239hrs. Mr. Jorge Zambrano dob: 3-14-81, did grab my uniform shirt and pull me into his vehicle, with a large Pitt Bull inside. He was removed from the vehicle and refused to put his hands behind his back; he pulled away from officers several times to avoid being placed in handcuffs. Mr. Zambrano is charged with A+B on PO and resisting arrest.

(Use additional sheets if necessary)

PRINTED NAME

SIGNATURE

I AM A:

DATE SIGNED

PO. Michael LaHair

X

LAW ENFORCEMENT OFFICER

CIVILIAN COMPLAINANT OR WITNESS

1-24-16

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

REMARKS

SIGNATURE OF CLERK-MAGISTRATE / ASST. CLERK / JUDGE

DATE SIGNED

1-25-16

NOTICE OF PROBATION VIOLATION AND HEARING

DOCKET NO(s), IN WHICH PROBATION WAS ORDERED 1602CR001297
1602CR00537, 1502CR005754,

PROBATIONER'S NAME & ADDRESS

Jorge Zambrano
65 Uxbridge 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

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)

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

You failed to comply with a testing requirement, specifically: missed screen on 4/8/16, positive for suboxone use on 4/11/16, self report of cocaine use on 4/22/16, positive for cocaine on 4/25/16

You failed to report as required by your probation officer, specifically: missed office visits on 4/25/16

Other: Self report of alcohol use on various dates

YOU ARE HEREBY ORDERED AS FOLLOWS:

YOU MUST APPEAR in THIS COURT on 5/11/16 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 _____, 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

4.25.16

SIGNATURE OF ISSUING PROBATION OFFICER

X Michelle Ye

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

TENDER OF PLEA OR ADMISSION & WAIVER OF RIGHTS	DOCKET NO. <i>1662-CR-537</i>	Trial Court of Massachusetts District Court Department
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NAME OF DEFENDANT <i>Jorge Zambreno</i>	COURT DIVISION Worcester District Court 225 Main Street Worcester, MA 01605
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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) <small>(Include all fees, costs, and conditions of probation)</small>	PROSECUTOR'S RECOMMENDATION(S) <small>(Required when Prosecutor disagrees with Defendant's recommendations)</small>	JUDGE'S DISPOSITION UPON REJECTING A BINDING PLEA OR NON-BINDING RECOMMENDATION
	<i>Cws of 1 yr Subject to mental health exam & any counselling as agreed</i>	<i>determined by probation</i>	
	<i>Cws of 1 yr</i>	<i>50</i>	

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. PRIM. P. 4(c) REQUIRES COUNSEL TO CONSULT WITH THE PROBATION DEPARTMENT REGARDING PROBATIONARY TERMS.

SIGNATURE OF DEFENSE COUNSEL OR PRO SE DEFENDANT <i>[Signature]</i>	DATE <i>3-31-16</i>	SIGNATURE OF PROSECUTOR <i>[Signature]</i>	DATE <i>3.31.16</i>
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THE COURT <input checked="" type="checkbox"/> ACCEPTS DEFENDANT'S TENDER <input type="checkbox"/> REJECTS DEFENDANT'S TENDER	DATE
SIGNATURE OF JUDGE <i>Andrew T. Wendell</i>	<i>3/31/16</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	DATE
<i>[Signature]</i>		<i>[Signature]</i>	

JUDGE'S DETERMINATION OF INDIGENCY

DOCKET NUMBER
1662CR000537

**Trial Court of Massachusetts
District Court Department**



DEFENDANT NAME

Jorge A 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
1/24/16

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

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"/> Fine <input type="checkbox"/> Surfine \$ \$ \$ \$	<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 §3(c)(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 checked="" 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.208 §§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	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	<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.
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 <i>other way</i>	<input checked="" type="checkbox"/> offset of amount of restitution payments assessed against defendant.
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 §6; 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.

CRIMINAL COMPLAINT DEFENDANT COPY		DOCKET NUMBER 1662CR000537	NO. OF COUNTS 2	Trial Court of Massachusetts District Court Department	
DEFENDANT NAME & ADDRESS Jorge A Zambrano 25 Queen Street Worcester, MA 01609				COURT NAME & ADDRESS Worcester District Court 225 Main Street Worcester, MA 01608 (508)831-2010	
DEFENDANT DOB 03/14/1981	COMPLAINT ISSUED 01/25/2016	DATE OF OFFENSE 01/24/2016	ARREST DATE 01/24/2016		
OFFENSE CITY / TOWN Worcester		OFFENSE ADDRESS		NEXT EVENT DATE & TIME 01/25/2016 08:55 AM	
POLICE DEPARTMENT Worcester PD		POLICE INCIDENT NUMBER 16-7521		NEXT SCHEDULED EVENT Arraignment	
OBTN TWOR160000340	PCF NUMBER 2449471	DEFENDANT XREF ID 7512729		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	265/13D/A	A&B ON POLICE OFFICER c265 §13D

On 01/24/2016 did assault and beat Michael LaHair, a police officer who was then engaged in the performance of his or her duties, in violation of G.L. c.265, §13D.

PENALTY: house of correction not less than 90 days, not more than 2½ years; or not less than \$500, not more than \$5000.

2	268/32B	RESIST ARREST c268 §32B
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On 01/24/2016 did knowingly prevent or attempt to prevent a police officer, as defined in G.L. c. 268, §32B(c), who was acting under color of his or her official authority, from effecting an arrest, by: (1) using or threatening to use physical force or violence against the police officer or another; or (2) using some other means which created a substantial risk of causing bodily injury to such police officer or another, in violation of G.L. c. 268, §32B.

PENALTY: jail or house of correction for not more than 2½ years; or not more than \$500; or both.

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.

RECOGNIZANCE

(Promise to Appear)

COMMONWEALTH OF MASSACHUSETTS

DOCKET NUMBER



DEFENDANT'S NAME AND ADDRESS (INCLUDE ANY ALIAS) <i>Jorge Zambrano</i> <i>25 Queen St</i> <i>Worcester MA</i>		TERMS OF RELEASE <input checked="" type="checkbox"/> PERSONAL RECOGNIZANCE <input type="checkbox"/> CASH BAIL \$ _____ <input type="checkbox"/> WARRANT FOR MONEY OWED TO COURT \$ _____ <small>(Please Specify)</small> <i>NO CONTACT w/ victim</i>		NAME AND ADDRESS OF COURT <i>Worcester District</i> <i>225 MAIN ST</i> <i>Worcester MA</i>		← THE DEFENDANT MUST APPEAR AT THIS COURT ADDRESS ON THE DATE AND TIME SPECIFIED HEREIN →
SOCIAL SECURITY NUMBER <i>893-70-5052</i>		DATE OF BIRTH <i>3-14-81</i>		DATE AND TIME OF APPEARANCE <i>1-26-16</i> AT <i>8:30</i> DATE TIME <input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M.		
SURETY/SURETIES NAME AND ADDRESS		ARREST ON WARRANT <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO POLICE DEPT. EXECUTING WARRANT		REPORT TO: <input checked="" type="checkbox"/> Probation <input type="checkbox"/> Clerk's Office		
		OFFENSE(S) <i>A & B P.O.</i> <i>Resisting Arrest</i>				

I, as defendant, charged by complaint with the crime(s) listed above, understand that I am being released from custody according to the terms of release specified. I will personally appear before the above named court at the date and time indicated, and I will appear for any continuance until the final decree, sentence or order, and I will abide by it and not depart without leave. Further, I will appear before any court to which the charges may be transferred or appealed, or to any sitting of the Superior Court to which I may be bound over or indicted to answer to any indictment, and I will appear for any continuance until the final decree, sentence or order, and I will abide by it and not depart without leave.

I understand and acknowledge that if I fail without sufficient excuse to appear in accordance with the foregoing promise, I will be liable, jointly and severally if a surety has been required, to the Commonwealth of Massachusetts for the dollar amount specified in the terms of release.

SIGNED (DEFENDANT)

DATE

1-24-16

I, as surety, understand and acknowledge that if the above named defendant fails to appear and abide by all orders of the court according to the foregoing promise, I will be liable, jointly and severally, with the defendant to the Commonwealth of Massachusetts for the dollar amount specified in the terms of the release.

SIGNED (SURETY)

SIGNED (SURETY)

SIGNED (PERSON AUTHORIZED TO TAKE BAIL)

- Clerk-Magistrate
- Assistant Clerk
- Bail Commissioner

PRINT FULL NAME

A. RELEASE AUTHORIZED FROM (PRINT)

B. JURISDICTION OF MAGISTRATE (PRINT)

(Complete when appearance is being required outside of your jurisdiction)

BAIL FEE RECEIVED

\$

40⁰⁰

DATE AND TIME SIGNED

1-24-16

- A.M.
- P.M.

Subscribed and sworn to before me, the defendant having been furnished a copy of this recognizance.

NOTICE TO DEFENDANT & SURETY

Bail shall not be released until the Legal Counsel Fee is satisfied in accordance with G.L. c. 211D, § 2½.

Penalty for failure to appear in court after release on bail or recognizance

A defendant who fails without sufficient excuse to appear in court after release on bail or recognizance may be punished by a fine of \$10,000 or by imprisonment for a year, or both, in the case of a misdemeanor, and by a fine of \$50,000 or imprisonment for five years, or both, in the case of a felony.

Penalty for committing a crime while on release on bail or recognizance

A defendant who is charged with another crime while on release on bail or recognizance may have the terms of this release revoked, and the defendant may be held without bail for a period not to exceed 90 days.

RECEIPT-RECORD OF PAYMENT OF CASH BAIL

NOT APPLICABLE

DATE	RECEIVED FROM SURETY (NAME AND ADDRESS)	DEFENDANT	AMOUNT
		CASE NUMBER	DISTRICT COURT

RECEIVED BY

**ORDER OF PROBATION CONDITIONS
UPON FINDING OF GUILTY OR SUFFICIENT FACTS**

RISK/NEED OR OUI SUPERVISION
 ADMINISTRATIVE SUPERVISION

DOCKET NO(s). IN WHICH PROBATION WAS ORDERED

15/5754/16-0537/16-1297

PROBATIONER'S NAME & ADDRESS

DCF: 244947
65 UXBRIDGE ST, APT 3
WORCESTER MA 01605
MAIL: 22 SAXON RD, WORC 01602

DISPOSITION

cwof 1 yr

Trial Court of Massachusetts
District Court Department
Worcester District Court
225 Main Street
Worcester, MA 01605



TO THE ABOVE-NAMED PROBATIONER: You are hereby placed on probation by this Court. Unless you are excused by your probation officer, you must appear in court on the probation end date indicated, at which time a report on your probation progress will be made. If you fail to appear on that date or any other date required, a warrant may be issued for your arrest.

PROBATION START DATE

3/31/16

PROBATION END DATE

3/28/17

GENERAL CONDITIONS OF PROBATION (You must comply with Items 1-6 unless struck out by judge.)

- Obey all court orders and all local, state and federal laws, including any support order, as defined in G.L. c. 119A, § 1A.
- Report to your probation officer at such times and places as he or she requires, and make no false statements to your probation officer.
- Notify your probation officer within 48 hours if you change residence or employment.
- Pay any ordered Probation Supervision Fees monthly or, if permitted by the court, perform community service monthly.
- Submit a DNA sample to the State Police, if required to do so by law. Register with the Sex Offender Registry, if required to do so by law.
- Sign all releases necessary for supervision and verification of compliance.

(You must also comply with Items 7-9 if "RISK/NEED OR OUI SUPERVISION" is checked above.)

- Allow the probation officer to visit you in your home with or without notice.
- Report to your probation officer within 48 hours after you are released from any incarceration.
- Do not leave Massachusetts unless you get the express permission of your probation officer and sign a waiver of rendition.

SPECIAL CONDITIONS OF PROBATION (You must also comply with all items checked below and all payments ordered.)

- EMPLOYMENT/SCHOOL:** Remain employed or make reasonable efforts to obtain employment or attend school, and provide verification as required.
- WORK/SCHOOL VISITS:** Allow the probation officer to visit your place of employment or school with or without notice.
- SUBSTANCE ABUSE EVALUATION/TREATMENT:** As directed by the probation officer, and subject to review by a judge on request, submit to and successfully complete any substance abuse evaluation, treatment and aftercare at a non-residential program. and/or a residential program.
- DRUG/ALCOHOL TESTING:** Remain drug free alcohol free. Submit to random testing as required.
- MENTAL HEALTH EVALUATION/TREATMENT:** Submit to evaluation Complete treatment and take medications as prescribed
- SPECIFIC PROGRAMS:** Complete the following program(s), including any aftercare: Driver Alcohol Education (G. L. c. 90, § 24D)
 14-Day Residential Driver Alcohol Education Certified Batterer's Intervention Anger Management Treatment Other:
- HAVE NO CONTACT WITH** and **STAY** (distance) _____ **AWAY FROM:** (name[s]) _____
- COMMUNITY SERVICE:** Perform _____ hours of community service as directed by probation.
- HOME CONFINEMENT:** Submit to home confinement and electronic monitoring until _____ pursuant to the schedule approved by the Court.
- OTHER CONDITIONS:**

20. Make all **FINANCIAL PAYMENTS** listed below, as directed by probation.

TYPE	AMOUNT	DUE DATE AND/OR TERMS
Counsel Fee/Contribution	\$	
Default Warrant Fee	\$	
Default Warrant Arrest Fee	\$	
Court Costs	\$	
Fine/Surfine/Civil Assessment	\$	
Restitution	\$ 500 ⁰⁰	
Victim/Witness Assessment	\$ 50 + 15	
Probation Fee & Surcharge	\$ W	
OUI § 24D State Fee	\$	
OUI Victims Assessment	\$	
Head Injury Assessment/Surfine	\$	
Drug Analysis Fee	\$	
Batterer's Program Assessment	\$	

JUDGE'S SIGNATURE

SIGNATURE OF JUDGE

X [Signature] DATE: 3/31/16

INTERPRETER'S SIGNATURE

SIGNATURE OF INTERPRETER, if any: I have translated the terms of this Order and the acknowledgment set forth above to the probationer prior to his/her signature.

X

DATE:

PROBATIONER'S ACKNOWLEDGMENT OF ORDER

SIGNATURE OF PROBATIONER: I have read and understand the above conditions of probation and I agree to observe them. I understand that if I violate any such condition it may result in my arrest, revocation of probation, the entry of a guilty finding (if not already entered), and the imposition or execution of sentence. I have received a copy of this Order.

X

DATE: 3/31/16

PROBATION OFFICER'S SIGNATURE

SIGNATURE OF WITNESSING PROBATION OFFICER

X [Signature] DATE: 3/31/16