



The undersigned alleges the following as a <input type="checkbox"/> full or <input type="checkbox"/> partial statement of the factual basis for the offense(s) for which a criminal complaint is sought.	COURT DIVISION
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(Use additional sheets if necessary)

PRINTED NAME	SIGNATURE X	I AM A: <input type="checkbox"/> LAW ENFORCEMENT OFFICER <input type="checkbox"/> CIVILIAN COMPLAINANT OR WITNESS	DATE SIGNED
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ADDITIONAL FACTS FOUND BY CLERK-MAGISTRATE / ASST. CLERK / JUDGE BASED ON ORAL TESTIMONY		

REMARKS	SIGNATURE OF CLERK-MAGISTRATE / ASST. CLERK / JUDGE X	DATE SIGNED
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