



COMPLAINT

WHEN PRESENTED TO VIOLATOR, THE FOLLOWING AMOUNT WAS ENTERED. PAY A CIVIL PENALTY IN THE AMOUNT OF \$ 189.00

CASE NO _____ DOCKET NO. _____ PAGE NO _____

G1

8494-REY 4

FLORIDA UNIFORM TRAFFIC CITATION

COUNTY OF **02 DUVAL** (1) F.H.P. (2) P.D. (3) S.O. (4) OTHER
 JACKSONVILLE Sheriffs Office
 CITY MAP LOCATION **38 JACKSONVILLE** AGENCY
 IN THE COURT DESIGNATED BELOW THE UNDERSIGNED CERTIFIES THAT HE/SHE HAS JUST **COMPLAINT** (RETAINED BY COURT)
 AND REASONABLE GROUNDS TO BELIEVE AND DOES BELIEVE THAT ON
 DAY OF WEEK **SUN** MONTH **6** DAY **21** YEAR **2009** 05:08 A.V. P.V.
 NAME PRINT **JAMIE** FIRST **MICHELE** LAST **PHIFER**
 STREET **3020 SW ARCHER RD #51**
 CITY **GAINESVILLE** STATE **FL** ZIP CODE **32608**
 TELEPHONE NUMBER DATE OF BIRTH **8 25** YEAR **1985** RACE **W** SEX **F** HT **5' 08"**
 DRIVER LICENSE NUMBER [REDACTED] STATE **FL** CLASS **E** EXPIRES **2013**
 VEHICLE MAKE **MAZD-MIA** MODEL **2D** COLOR **RED**
 VEHICLE LICENSE NO **129HBR** STATE **FL** YEAR TAG EXP **2008**
 LOCATION **ON PINERIDGE RD 0.21 MILES SOUTH OF MARCO PL 3300 HENDRICKS**
 DID UNLAWFULLY COMMIT THE FOLLOWING OFFENSE. CHECK ONLY ONE OFFENSE EACH CITATION.
 UNLAWFUL SPEED **53** MPH SPEED APPLICABLE **40** MPH
 INTERSTATE 4-LANE HWY WITH 20 FT. MEDIAN OUTSIDE BUS OR RES. DIST)
 CARELESS DRIVING SAFETY BELT VIOLATION EXPIRED DRIVER LICENSE
 VIOLATION OF TRAFFIC CONTROL DEVICE IMPROPER OR UNSAFE EQUIPMENT FOUR (4) MONTHS OR LESS
 VIOLATION OF RIGHT-OF-WAY EXPIRED TAG MORE THAN FOUR (4) MONTHS
 IMPROPER CHANGE OF LANE OR COURSE SIX (6) MONTHS OR LESS NO VALID DRIVER LICENSE
 IMPROPER PASSING MORE THAN SIX (6) MONTHS DRIVING WHILE LICENSE SUSPENDED OR REVOKED
 CHILD RESTRAINT NO PROOF OF INSURANCE FAILURE TO STOP AT TRAFFIC SIGNAL
 DRIVING UNDER THE INFLUENCE OF ALCOHOLIC BEVERAGES, CHEMICAL OR CONTROLLED SUBSTANCES, DRIVING/ACTUAL PHYSICAL CONTROL WHILE IMPAIRED, OR DRIVING/ACTUAL PHYSICAL CONTROL WITH UNLAWFUL BREATH/BLOOD/URINE ALCOHOL LEVEL BAL

OTHER VIOLATIONS OR COMMENTS PERTAINING TO OFFENSE SPEEDING STATE POSTED (REQUIRES SPEEDS)-MSF
 AGGRESSIVE DRIVING VIOLATION OF STATE STATUTE SECTION **316.187(1)**
 CRASH PROPERTY DAMAGE INJURY TO ANOTHER SERIOUS BODILY INJURY TO ANOTHER FATAL
 YES NO YES NO YES NO YES NO YES NO
 OR VIOLATION OF COURT APPEARANCE REQ. FEES AS NOT DATED BELOW
 VIOLATION OF COURT APPEARANCE REQ. FEES AS NOT DATED BELOW
 VIOLATION WHICH DOES NOT REQUIRE APPEARANCE IN COURT

8494-REY 4

COURT INFORMATION DATE TIME
WITHIN 30 DAYS 8AM-430PM TRAFFIC VIOLATIONS BUREAU
 LOCATION **3470 BEACH BLVD JACKSONVILLE FL**
 PHONE **32207 904-391-6700** www.duvalclerk.com
 APREST DELIVERED TO DATE

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

[Signature]
 X'S SIGNATURE ONLY
 OFFICER'S SIGNATURE *[Signature]* 6248 6248JFB DUI14
 J F BYRNE

DATE	COURT ACTION AND OTHER ORDERS
	BAIL FIXED AT \$ _____ OR CASH DEPOSIT OF \$ _____
	SIGNATURE OF PERSON GIVING BAIL _____
	SIGNATURE OF PERSON TAKING BAIL _____
	FINE IN THE AMOUNT OF \$ _____ RECEIVED AS REQUIRED BY COURT SCHEDULE _____ SIGNATURE OF CLERK _____
	CONTINUANCE TO _____ REASON _____
	CONTINUANCE TO _____ REASON _____
	BOND ESTREATED _____
	WARRANT ISSUED _____
	VIOLATOR FAILED TO APPEAR-DRIVER LICENSE SUSPENDED
	VIOLATOR ARRAIGNED ON _____ (DATE) PLEA: _____ FINDING: _____ ADJUDICATION: _____ SENTENCE: FINE _____ COST _____ JAILED _____ DAYS DRIVER IMPROVEMENT SCHOOL _____ OTHER _____ DRIVER LICENSE SUSPENDED OR REVOKED FOR _____ DAYS RECOMMEND DRIVER LICENSE SUSPENSION FOR _____ DAYS RECOMMEND RE-TEST _____
	SIGNATURE OF JUDGE _____
	TESTIMONY - JUDGE'S NOTES (OR OTHER COURT ORDERS):
	APPEAL BOND OF \$ _____
	VIOLATOR'S FINGERPRINT WHEN APPLICABLE →