



AMDMJOE

COMPLAINT

CASE NO _____ DOCKET NO _____ PAGE NO _____

FLORIDA UNIFORM TRAFFIC CITATION

DATE COURT ACTION AND OTHER ORDERS

COUNTY OF HILLSBOROUGH (3)		(1) FHP (2) P.D. <input checked="" type="checkbox"/> (3) S.O. (4) OTHER	
CITY OF (IF APPLICABLE) UNINCORPORATED H.C. (0)		HILLSBOROUGH COUNTY SHERIFF'S OFFICE	
IN THE COURT DESIGNATED BELOW THE UNDERSIGNED CERTIFIES THAT HE/SHE HAS JUST AND REASONABLE GROUNDS TO BELIEVE AND DOES BELIEVE THAT ON COMPLAINT (RETAINED BY COURT)			
DAY OF WEEK FRI	MONTH 11	DAY 07	YEAR 2025 11:19 <input checked="" type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M.
NAME (PRINT) FIRST CHELSE		MIDDLE LYNN	LAST JENNINGS
STREET 15426 BELLAMY RD IF DIFFERENT THAN ONE ON DRIVER LICENSE "X" HERE			
CITY TAMPA		STATE FL	ZIP CODE 33625-3233
TELEPHONE NUMBER	DATE OF BIRTH MO 04 DAY 21	YEAR 1977	RACE W SEX F HGT 504
DRIVER LICENSE NUMBER J20879000000	STATE FL	CLASS E	CDL LICENSE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
YR. VEHICLE 2015	MAKE HOND	STYLE VN	COLOR BLU
VEHICLE LICENSE NO. DN44FG	TRAILER TAG NO.	STATE FL	YEAR TAG EXPIRES 2026
UPON A PUBLIC STREET OR HIGHWAY, OR OTHER LOCATION, NAMELY COUNTRYWAY BLVD / CITRUS PARK DR		MOTORCYCLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
		COMPANION CITATION(S) YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
FT. _____ MILES. _____ N S E W OF NODE _____			
DID UNLAWFULLY COMMIT THE FOLLOWING OFFENSE. CHECK ONLY ONE OFFENSE EACH CITATION.			

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

UNLAWFUL SPEED _____ MPH SPEED APPLICABLE _____ MPH
 (INTERSTATE SCHOOL ZONE CONSTRUCTION WORKERS PRESENT)
 SPEED MEASUREMENT DEVICE:

- CARELESS DRIVING
- VIOLATION OF TRAFFIC CONTROL DEVICE
- FAILURE TO STOP AT A TRAFFIC SIGNAL
- IMPROPER LANE CHANGE OR COURSE
- NO PROOF OF INSURANCE
- VIOLATION OF RIGHT-OF-WAY
- CHILD RESTRAINT
- SAFETY BELT VIOLATION
- IMPROPER OR UNSAFE EQUIPMENT
- EXPIRED TAG SIX (6) MONTHS OR LESS
- EXPIRED TAG MORE THAN SIX (6) MONTHS
- IMPROPER PASSING
- EXPIRED DRIVER LICENSE SIX (6) MONTHS OR LESS
- EXPIRED DRIVER LICENSE MORE THAN SIX (6) MONTHS
- NO VALID DRIVER LICENSE
- DRIVING WHILE LICENSE SUSPENDED OR REVOKED
- DRIVING UNDER THE INFLUENCE
- Passenger Under 18 Yrs

OTHER VIOLATIONS OR COMMENTS PERTAINING TO OFFENSE: REFUSE TO SUBMIT TO ANY DUI TEST W/ PREVIOUS REFUSAL. PRIOR REFUSAL ON 10/17/2022		RE-EXAM YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
		DL SEIZED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
AGGRESSIVE DRIVING	IN VIOLATION OF STATE STATUTE	SECTION 316.1939(1)(e)
CRASH YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PROPERTY DAMAGE YES \$ _____ NO <input checked="" type="checkbox"/>	INJURY TO ANOTHER YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
		SERIOUS BODILY INJURY TO ANOTHER YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
		FATAL YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>

CRIMINAL VIOLATION. COURT APPEARANCE REQUIRED. AS INDICATED BELOW.
 INFRACTION. COURT APPEARANCE REQUIRED. AS INDICATED BELOW.
 INFRACTION WHICH DOES NOT REQUIRE APPEARANCE IN COURT.

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CIVIL PENALTY IS \$ _____

COURT INFORMATION DATE _____ TIME _____
HILLSBOROUGH COURT (10 DAYS)
800 E TWIGGS STREET, ROOM 101 COURT
TAMPA, FL 33602 LOCATION (813) 276-8100
 SCHEDULE A COURT DATE WITHIN 10 DAYS OF CITATION DATE.
 HILLSBOROUGH COUNTY COURT.

ARREST DELIVERED TO **HILLSBOROUGH COUNTY JAIL (ORIENT RC)** DATE **11/7/2025**

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 GUILTY OR WAIVER OF RIGHTS. IF YOU NEED REASONABLE FACILITY ACCOMMODATIONS TO COMPLY WITH THIS CITATION, CONTACT THE CLERK OF THE COURT.

X SIGNATURE OF VIOLATOR (SIGNATURE IS REQUIRED IF INFRACTION REQUIRES AN APPEARANCE IN COURT)

DEP	BURKE, B 253503	253503
RANK - NAME OF OFFICER	BADGE NO.	ID NO. TROOP / UNIT

I CERTIFY THIS CITATION WAS DELIVERED TO THE PERSON CITED ABOVE
 FSMV 75901 (REV. 07/12)