

Prosecuting Attorney Requests:

- Summons by certified mail
- Warrant for arrest
- Special Instructions:

- Approved as to form and content
- Approved as to form only

Prosecuting Attorney

Clerk's office did:

- Mail summons _____, 20__.
- Issue warrant _____, 20__.

Deputy Clerk

WARRANT FOR ARREST ON COMPLAINT

TO: Any Law Enforcement Officer

Whereas, there has been a request for a warrant to issue upon a complaint, a copy of which is contained herein, and probable cause has been found for said warrant, you are ordered to arrest _____

and bring the accused before this court without unnecessary delay.

You (may) (may not) issue summons in lieu of arrest under Rule 4 (A)(2), or issue summons after arrest under Rule 4 (F).

Given under my hand and official seal this _____ day of _____, 20__.

Judge

RETURN OF WARRANT

On the _____ day of _____, 20__ at _____ A.M. / P.M.

- I executed the warrant by the arrest of the accused.
- I executed (the warrant by issuance of) summons and ordered the accused to appear in court on the _____ day of _____, 20__ at 10:00 A.M.
- I was unable to locate the accused.

Officer

Costs:

Mileage _____

Other _____

Total _____

NOTICES			
Date	Time	Meth.	Person Contacted

SUMMONS

To:

Name _____

Address _____

Mailed Certified Mail, Return Receipt Requested

A complaint has been filed in this court charging you with the offense (crime) set forth herein. You are hereby ordered to appear in this court on the _____ day of _____, 20__ at 10:00 A.M. to answer this complaint.

FAILURE TO APPEAR AT THIS TIME AND DATE WILL RESULT IN A WARRANT BEING ISSUED FOR YOUR ARREST.

Casey A. Linebrink, Clerk

by Deputy Clerk

RETURN OF SUMMONS

- Service completed _____, 20__
- Summons returned unclaimed _____, 20__
- Summons returned refused _____, 20__

Deputy Clerk

Case No. _____

IN THE DEFIANCE COUNTY MUNICIPAL COURT

665 Perry Street
Defiance, Ohio 43512

Defendant _____

SSN # _____ D.O.B. _____

State Defiance Village of _____

Misdemeanor Felony

COMPLAINT

State of Ohio, Defiance County, ss.

Before me personally came

who, being duly sworn, according to law, deposes and says that on or about the _____ day of _____, 20__, in the _____ of _____, Defiance County, Ohio

One _____ whose last known address was

_____ did unlawfully

contrary to Section _____ Ohio Revised Code Ordinance of _____, a _____ of the _____ degree.

This crime is commonly known as

Deponent

Address

Telephone

Sworn to before me and subscribed in my presence this _____ day of _____, 20__.

Notary/Clerk/Deputy Clerk

Case Number: _____

Defendant appeared: _____

Entered plea of: Guilty No Contest

Found: Guilty Not Guilty

Fined: \$ _____

Assessed costs of: \$ _____

Date Judge

Date Judge

Date Judge

JOURNAL ENTRY - FAILURE OF DEFENDANT TO APPEAR

This case having been called in open court and the defendant not being present to answer this complaint, the clerk is instructed to:

- Issue Notice to Appear
- Issue Warrant on Summons
- Issue Bench Warrant, Bond is set at \$ _____.
- Forfeit Bond

Prosecuting Attorney to file Complaint for Defendant's failure to appear on a recognizance bond.

Date: _____ Judge: _____

JOURNAL ENTRY

This matter came on for consideration on the date below; The Court after due consideration hereby Orders as follows:

Date: _____ Judge: _____

WAIVER OF PRELIMINARY HEARING

The Judge having explained to me my right to a preliminary hearing and the purpose of a preliminary hearing, I knowingly and voluntarily state that I do not want a preliminary hearing, and I further understand that my case will now be sent to the Defiance County Court of Common Pleas.

Date: _____ Defendant: _____

Attorney: _____

JOURNAL ENTRY - BINDOVER W/O PRELIMINARY HEARING

The Defendant having this day signed a written waiver of preliminary hearing, after having had the same explained. It IS ORDERED that the defendant's case be bound over to the Defiance Common Pleas Court.

For Bond see Journal Entry dated _____.

Date: _____ Judge: _____

IDENTIFICATION INFORMATION RE: DEFENDANT

NAME: _____

ADDRESS: _____

SSN: _____

AGE: _____ D.O.B. _____

TELEPHONE NO.: _____

O.L. NO.: _____

EMPLOYER: _____

MARITAL STATUS: Single Married

SEX: Male Female RACE: _____

HEIGHT: _____ WEIGHT: _____

EYES: _____ HAIR: _____

OTHER: _____

Bond

Date Posted: _____

Amount: \$ _____

Receipt #: _____

Type: _____

By Whom: _____

RECORD OF PAYMENT OF FINES/COSTS

SENTENCE IMPOSED: FINE \$ _____ COSTS \$ _____

DATE PAID	AMOUNT	RECEIPT NO.	BAL. DUE
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____

**DEFIANCE MUNICIPAL COURT
DEFIANCE COUNTY, OHIO**

Supreme Court of Ohio, Rules of Superintendence, Rule 45(D)

Traffic

Criminal

Name: _____

SSN: _____

Note: May include LEADS printout in lieu of completing form.