

# Uniform Citation and Complaint

Citation Number: \_\_\_\_\_

Date of Offense:	Time of Offense:	IR/Case#:	Troop/District/Sector:
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<b>Plaintiff: State of Nebraska</b>	<b>In the County Court</b>	Court Case #:
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**Defendant Information:**

Last Name:		First Name:		M.I.:	Suffix:		Telephone Number: <input type="checkbox"/> Cell		
Street Address:				City:		State:	Zip Code:	Country:	
DOB.:	Gender:	Height:	Weight:	Eyes:	Hair:	Race/Eth:	Language if interpreter needed:		
DL State:	DL Country:	DL Number:		Exp. Date:		DL Class:	Restrictions:	DL Endorsements:	
Vehicle Year:	Vehicle Type:	Vehicle Style:	Vehicle Make:		Vehicle Model:		Vehicle Color:		
Vehicle VIN:			Vehicle License:	State:	Country:	Reg. Year:	Plate Type:	CMV: Y / N / E	HazMat: Y / N
Carrier Name:					US DOT Number:		ICC Number:		
Business/ Address:				City:		State:	Zip Code:	Country:	

The undersigned being duly sworn, says the defendant, at the time and date shown, did unlawfully commit the following offense(s):

<b>Violation Location</b>	In the County of:	In the City of:	Hwy Type:	Hwy No.:	Hwy Sfx:	Mile Marker:
	Location at or near:					
	Latitude:			Longitude:		

**In violation of:**

<b>O F F E N S E  0 0 1</b>	Statute/Ordinance section:		Offense Description:			Violation Type:	
	Speed: _____ mph in _____ mph Zone		Tracked:	NCIC Code:	BAC Pct:	Actual Wt.:	Legal Wt.:
	Offense Comments:				Fine:	Lbs OverWt.:	Pct. OverWt.:
					Liquidated Damages Amount:	A check means "Yes" Road Construction Zone <input type="checkbox"/> School Zone <input type="checkbox"/>	

PRS:	Custodial Arrest <input type="checkbox"/> Yes <input type="checkbox"/> No	Attached Ticket # :
<input type="checkbox"/> Search Incident to Arrest	<input type="checkbox"/> Search Conducted	<input type="checkbox"/> K-9 Utilized
<input type="checkbox"/> Probable Cause	<input type="checkbox"/> Verbal Consent	<input type="checkbox"/> Contraband Located
<input type="checkbox"/> Consent	<input type="checkbox"/> Written Consent	<input type="checkbox"/> Arrest Made
	<input type="checkbox"/> Consent Refused	<input type="checkbox"/> No Contraband Located

<b>Bond Payment:</b> If posted, the type of Bond is: _____ For the amount of: _____					
Reporting Officer 1/Agency:	Date:	Badge No.:	Reporting Officer 2/Agency:	Date:	Badge No.:

This is an appearance only, not a trial date. <b>You MUST Appear in Court as directed below.</b>		Prosecutor	
Your <b>Court Appearance</b> : <input type="checkbox"/> To be determined		Court Address:	
Date: mm / dd / yy	Time: am pm	Room No.	

I promise that I will appear in court at the above time and place.

**Officer Comments:**

**Narrative to the Prosecutor:** ( Additional Reports Anticipated)

Optional Contact Information: Cell Phone Number: \_\_\_\_\_ Carrier: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_

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### Defendant Information:

Last Name:	First Name:	M.I.:	Suffix:	Telephone Number:	<input type="checkbox"/> Cell
Street Address:	City:	State:	Zip Code:	Country:	