

GIRARD MUNICIPAL COURT, PROSECUTOR'S OFFICE

AFFIDAVIT OF CITIZEN/COMPLAINANT

NAME RICK KRlich ADDRESS 713 E LIBERTY ST.
CITY HUBBARD STATE OH ZIP 44425 PH # HOME 534-2949 (33)

I reside in Trumbull County and wish to file and Affidavit against the following person's
NAME NICK BRUCE ADDRESS 3141 Park House WHEELER RD
CITY HUBBARD STATE OH ZIP 44225 PH # HOME _____

Additional description of known (DOB, SSN, etc) _____

NAME _____ ADDRESS _____
CITY _____ STATE _____ ZIP _____ PH # HOME _____

Additional description of known (DOB, SSN, etc) _____

THE FACTS ON WHICH I BASE MY COMPLAINT ARE AS FOLLOWS (Include dates, times, places)

EXPLAINT OFFENDER

Witness 1 Audie VIDIO Address _____

City _____ State _____ Zip _____ Phone _____ (H, W)

Witness 1 _____ Address _____

City _____ State _____ Zip _____ Phone _____ (H, W)

If I discover more witnesses I must immediately notify the Girard City Prosecutor. I understand that I cannot withdraw or dismiss a Complaint without appearing in Court before the Judge. Finally, if I failed to appear in Court to testify, I can be arrested and the case can be dismissed.

Date _____ Complainant _____

Sworn to and subscribed in my presence on _____ 20 _____

Deputy Clerk _____

GIRARD MUNICIPAL COURT, PROSECUTOR'S OFFICE

AFFIDAVIT OF CITIZEN/COMPLAINANT

NAME RICK KRlich ADDRESS 713 E LIBERTY ST.
CITY HUBBARD STAT OH ZIP 44425 PH # HOME 534-2949 (B30)

I reside in Trumbull County and wish to file and Affidavit against the following persons
NAME LP# DLV-4049 ADDRESS 3141 Pothole Way
CITY Hubbard STATE OH ZIP 44425 PH # HOME _____

Additional description if known (DOB, SSN, etc) _____
NAME _____ ADDRESS _____
CITY _____ STATE _____ ZIP _____ PH # HOME _____

Additional description if known (DOB, SSN, etc) _____

THE FACTS ON WHICH I BASE MY COMPLAINT ARE AS FOLLOWS (Include dates, times, places)

FROM RE-SWIMING SIX DIFFERENT PLACES
(LED OFFICE)

Witness 1 Rick Krlich Address _____
City _____ State _____ Zip _____ Phone _____ (H. W)

Witness 1 _____ Address _____
City _____ State _____ Zip _____ Phone _____ (H. W)

If I discover more witnesses I must immediately notify the Girard City Prosecutor. I understand that I cannot withdraw or dismiss a Complaint without appearing in Court before the Judge. Finally, if I failed to appear in Court to testify I can be arrested and the case can be dismissed.

Date _____ Complainant _____

Sworn to and subscribed in my presence on _____ 17 _____

Deputy Clerk _____