

INFRACTION **TRAFFIC** **NON-TRAFFIC I**

IN THE DISTRICT MUNICIPAL COURT OF **KANGAROO COURT**, WASHINGTON
 STATE OF WASHINGTON, PLAINTIFF VS. NAMED DEFENDANT
 COUNTY OF KING
 CITY/TOWN OF CJTC BASIC ACADEMY

L.E.A. ORI #: WA0400400

COURT ORI #: WA040050J

THE UNDERSIGNED CERTIFIES AND SAYS THAT IN THE STATE OF WASHINGTON

DRIVER'S LICENSE NO. HEUSSRB521PQ		STATE WA	EXPIRES 2016	PHOTO I.D. MATCHED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
NAME: LAST HEUSSER		FIRST RONALD	MIDDLE B	CDL <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
ADDRESS 26429 189th SE				<input type="checkbox"/> IF NEW ADDRESS <input type="checkbox"/> PASSENGER
CITY KENT	STATE WA	ZIP CODE 98033	EMPLOYER EAZ CONSULTING	LOCATION
DATE OF BIRTH 06/21/48	RACE W	SEX M	HEIGHT 60	WEIGHT 170
RESIDENTIAL PHONE NO. (253) 631-6611		CELL/PAGER NO. ()	WORK PHONE NO. (206) 633-2033	
VIOLATION DATE ON OR ABOUT CURRENT DATE		MONTH 24	DAY 15	YEAR 43
AT LOCATION GREENWOOD AVEN / 85 ST		M.P.	CITY/COUNTY OF KING	

DID OPERATE THE FOLLOWING VEHICLE/MOTOR VEHICLE ON A PUBLIC HIGHWAY AND

VEHICLE LICENSE NO. 5S1AQE	STATE WA	EXPIRES 01/15	VEH. YR. 96	MAKE MER	MODEL WOODSL	STYLE 2DR	COLOR BLUE
TRAILER #1 LICENSE NO.	STATE	EXPIRES	TR. YR.	TRAILER #2 LICENSE NO.	STATE	EXPIRES	TR. YR.
OWNER/COMPANY IF OTHER THAN DRIVER SAME AS ABOVE							
ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____							
ACCIDENT NO <input type="checkbox"/> NR <input checked="" type="checkbox"/> I <input type="checkbox"/> F <input type="checkbox"/>	CMV <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	16+ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	HAZMAT <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	EXEMPT <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	FIRE <input type="checkbox"/> LEA <input checked="" type="checkbox"/>		

DID THEN AND THERE COMMIT EACH OF THE FOLLOWING OFFENSES

#1 VIOLATION/STATUTE CODE RCW 46.61.180	VEHICLE SPEED	IN A	ZONE	<input type="checkbox"/> SMD <input type="checkbox"/> PACE <input type="checkbox"/> AIRCRAFT
FAILURE TO YIELD RIGHT OF WAY			\$124	
COLLISION INVOLVED			\$51	
#2 VIOLATION/STATUTE CODE				
#3 VIOLATION/STATUTE CODE				
PENALTY U.S. \$ 175 -			DATE ISSUED CURRENT DATE	
<input checked="" type="checkbox"/> Served on Violator			I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT I HAVE ISSUED THIS ON THE DATE AND AT THE LOCATION ABOVE, THAT I HAVE PROBABLE CAUSE TO BELIEVE THE ABOVE NAMED PERSON COMMITTED THE ABOVE OFFENSE(S).	
<input type="checkbox"/> Sent to Court for Mailing			OFFICER S SMITH # 1568	
<input type="checkbox"/> Referred to Prosecutor			OFFICER #	

INFRACTION

INF	RESPONSE			DISPOSITION				PENALTY	SUSPENDED	SUB-TOTAL	FNDG/JDGT DATE	
	C	NC		C	NC	D	P	DF	\$	\$	\$	ABSTRACT MLD TO OLYMPIA
1	C	NC		C	NC	D	P	DF	\$	\$	\$	
2	C	NC		C	NC	D	P	DF	\$	\$	\$	
3	C	NC		C	NC	D	P	DF	\$	\$	\$	
TOTAL COSTS \$												

OFFICER REPORT

On (current date) at approximately 1545 hours the Δ (Ronald Heusser DOB 06-21-1948) was traveling S/B on Greenwood Ave N in lane 2 of 2. The Δ made a left turn onto E/B N. 85th Street, as he turned the Δ stated he spilled his coffee. When Δ spilled his coffee he looked down and failed to see a maroon 1999 Chev Caprice traveling N/B on Greenwood Ave N. in lane 2 of 2. The Δ failed to yield the right of way to the Caprice. The Caprice was unable to stop and struck the Δ. The driver of the caprice stated he was traveling at the posted speed limit 30mph when the collision occurred.

TRAFFIC <input checked="" type="radio"/> LT <input type="radio"/> MED <input type="radio"/> HV		WEATHER <input checked="" type="radio"/> CL <input type="radio"/> RN <input type="radio"/> FG <input type="radio"/> SN		STREET <input checked="" type="radio"/> D <input type="radio"/> W <input type="radio"/> I <input type="radio"/> S		LIGHT <input checked="" type="radio"/> D <input type="radio"/> OWN <input type="radio"/> DSK <input type="radio"/> DK	
Officer's Report for Citation # <u>I00123</u> The information contained on this citation is incorporated by reference into this report. I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT ALL STATEMENTS MADE HEREIN ARE TRUE AND ACCURATE							
Signature <u>D. Mosley</u> # <u>627</u>							
Date and Place <u>(Current Date)</u> <u>King County, WA</u>							
WITNESS NAME (LAST, FIRST, M.I.)						PHONE	
ADDRESS		CITY		STATE		ZIP	
WITNESS NAME (LAST, FIRST, M.I.)						PHONE	
ADDRESS		CITY		STATE		ZIP	
INCIDENT NUMBER		RELATED CITATION/INFRACTION NUMBERS			APPROVING OFFICER/NO.		