



WINTER PARK POLICE

Witness Information

- Speed Measuring Devices
- RADAR LASER
- Stop Watch Pace
- Accident Investigation
- With Injury
- No Injury

Driver / Pedestrian Cited Jessica Joyce Recksiedler
 Citation Number A258SMP

Witness #1 Natasha Ganqway
 Address 111 E. Washington St.#2017
 City, State, Zip Orlando, FL. 32801
 Phone 407-271-6924

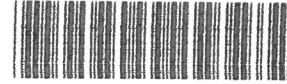
Witness #2 _____
 Address _____
 City, State, Zip _____
 Phone _____

Witness #3 _____
 Address _____
 City, State, Zip _____
 Phone _____

Arresting Officer _____
Winter Park Police Department
500 N. Virginia Ave.
Winter Park, FL 32789-3136

Investigating Officer Ofc. Muller

Jolita
015699



FLORIDA UNIFORM TRAFFIC CITATION

A258SMP

COUNTY ORANGE COUNTY 07	<input type="checkbox"/> (1) F.H.P. <input checked="" type="checkbox"/> (2) P.D. <input type="checkbox"/> (3) S.O. <input type="checkbox"/> (4) OTHER
CITY (IF NOT IN COUNTY) WINTER PARK 54	AGENCY NAME Winter Park 54
	AGENCY # 54
IN THE COURT DESIGNATED BELOW THE UNDERSIGNED CERTIFIES THAT HE/SHE HAS JUST AND REASONABLE GROUNDS TO BELIEVE AND DOES BELIEVE THAT	
COMPLAINT (RETAINED BY COURT)	
DAY OF WEEK Tue	MONTH 12
DAY 21	YEAR 2016
NAME (PRINT) FIRST Jessica	MIDDLE Joyce
LAST Recksiedler	A.M. 725
STREET PO BOX 47699	
IF DIFFERENT THAN ONE ON DRIVER LICENSE "X" HERE	
CITY Lakemont	STATE FL
ZIP CODE 32747	
TELEPHONE NUMBER R234430728461	
DATE OF BIRTH MO DAY YR	RACE SEX HGT
DRIVER LICENSE NUMBER	CLASS
CDL LICENSE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	YR LICENSE EXP
COMMERCIAL VEHICLE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	PLACARDED HAZARDOUS MATERIAL <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
VEHICLE YEAR MAKE MODEL COLOR	YEAR TAG EXPIRES
2015 Audi suv white	FL 18
VEHICLE LICENSE NO. TRAILER TAG NO.	> 16 PASSENGERS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
6Y5H79 - FL 18	MOTORCYCLE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
UPON A PUBLIC STREET OR HIGHWAY OR OTHER LOCATION, NAMELY 5 SPANCAVE 30ft south of morse Blvd	COMPANION CITATION NUMBER(S) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
FT. _____ MILES _____	OF NODE _____

DID UNLAWFULLY COMMIT THE FOLLOWING OFFENSE. CHECK ONLY ONE OFFENSE EACH CITATION.

UNLAWFUL SPEED _____ MPH SPEED APPLICABLE _____ MPH

INTERSTATE SCHOOL ZONE CONSTRUCTION WORKERS PRESENT

SPEED MEASUREMENT DEVICE:

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

RELATIONSHIP OF VIOLATIONS PERTAINING TO OFFENSE

Struck parked vehicle

AGGRESSIVE DRIVING IN VIOLATION OF STATE STATUTE **316.1925(1)**

YES NO YES NO YES NO YES NO

CRIMINAL VIOLATION COURT APPEARANCE REQUIRED AS INDICATED BELOW.

INFRACTION COURT APPEARANCE REQUIRED AS INDICATED BELOW.

INFRACTION WHICH DOES NOT REQUIRE APPEARANCE IN COURT.

CIVIL PENALTY IS \$ 100

COURT INFORMATION

DATE www.myorangeclerk.com TIME 407-836-2007

PAY WITHIN 30 DAYS A258SMP

450 N. LAKEMONT AVE, WINTER PARK, FL 32792

Mail Payment: PO Box 628292, Orlando, FL 32862-8292

ARREST DELIVERED TO _____ DATE _____

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 HEREBY CERTIFY MY SIGNATURE IS NOT AN ADMISSION OF GUILT OR WAIVER OF RIGHTS. IF YOU NEED REASONABLE FACILITY FOR SIGNATURE, YOU MAY CONTACT THE CLERK OF THE COURT.

TO BE MAILED

V. Muller 80 **136 Red**

RANK - NAME OF OFFICER **Ofc. Muller** BADGE NO **136** TROOP UNIT **Red**

OFFICER'S SIGNATURE **Ofc. Muller** ID NO **136/80** TROOP UNIT **REP Watch**

I CERTIFY THIS CITATION WAS DELIVERED TO THE PERSON CITED ABOVE AND CERTIFY THE CHARGE ABOVE.

HSMV 7599 (REV. 02/12)