

ALABAMA UNIFORM TRAFFIC
TICKET AND COMPLAINT

COURT CASE NO.
TR-21-000435
YEAR NUMBER

ALABAMA, COUNTY OF HOUSTON		CITY KINSEY		TICKET NUMBER U0068978	
The undersigned, being duly sworn, deposes and says that he/she has probable cause to believe and does believe that the person herein named did, within the previous 12 months, commit the offense set forth contrary to law in that: on or about Date 8/18/2021 at approx Time 11:01 AM				TYPE VEHICLE PRIVATE	
First Name KEOSHIA		Middle/Maiden BREZAE		Last COMMINGS	
Address 220 CAPRICE CT					
City KINSEY		State AL		Zip Code 36303	
State AL		Driver's License Number			Class of License
Sex F	Race B	DOB 3/12/2000		Social Security Number XXXX-XX-1388	
Height 5' 7"		Weight 115 lbs.	Eyes BRN	Hair BRN	Vehicle Tag Number 38JK426
State AL		Year 2022		Driver's License in Possession? NO	
Vehicle Description (year, make, model, color) 2010 NISS MAXIMA S RED				Owner of Vehicle DRIVER	
Employer/Owner of Vehicle (Address) 220 CAPRICE CT					
Did unlawfully operate a motor vehicle or other vehicle at or near WALDEN RD within the city limits of KINSEY at or near COVENANT DR in violation of Municipal Ordinance Number 171-2000 duly adopted and in force at the time the offense was committed adopting 32-6-1(A).					
Statute 32-6-1(A)		UCR Code		Mile No.	Road Cd
Described NO DRIVERS LICENSE					
Details				____ MPH ____ Speed Limit ____ BAC	
FACTS RELATING TO THE OFFENSE: (Witnesses, etc.)				Crash Involved: NO Companion Case: None	
Officer Name Jim J Mock, II		Officer ID K702		Agency ORI AL0380600	
Complainant's Signature					
Sworn to and acknowledged before me this date		Signature and Title Judge/Magistrate			
COURT APPEARANCE INFORMATION					
MUNICIPAL COURT OF KINSEY TOWN OF KINSEY - SENIOR CENTER 6899 WALDEN DR KINSEY, AL 36303				334-793-5409 Court Appearance Date and Time 9/8/2021 2:00 PM	
Defendant must appear in court at said time and place or otherwise comply with the provisions of this complaint and instructions of the notice part of this ticket. NO SIGNATURE REQUIRED Pursuant to §32-1-4(a)					
Defendant's Phone					
RELEASED ON OWN RECOGNIZANCE					

U0068978 KEOSHIA COMMINGS

Case: TR-21-000435

Court O.R.I. AL 038091J		COURT RECORD		COURT CASE NUMBER TR-21-000435 YEAR NUMBER	
MUNICIPAL COURT OF KINSEY				TICKET NUMBER U0068978	
DEFENDANT'S NAME KEOSHIA BREZAE COMMINGS				CHARGE 32-6-1(A)	
CONTINUED TO M D Y		REASON			
2ND CONTINUANCE M D Y		REASON			
UTC-6A MAILED M D Y		NEW COURT DATE M D Y		UTC-6B ISSUED M D Y	
WARRANT ISSUED M D Y		BOND SET \$ CASH DEPOSITED \$		WARRANT SERVED M D Y	
CONDITIONAL BOND FORFEITURE ORDER ISSUED M D Y		BOND FORFEITURE ORDERED FINAL M D Y		WARRANT RECALLED M D Y	
ATTORNEY FOR DEFENDANT		CHECK IF APPLICABLE <input type="checkbox"/> Defendant informed of right to counsel <input type="checkbox"/> Voluntarily waived counsel <input type="checkbox"/> Defendant found indigent, counsel appointed			
PLEA OF DEFENDANT (CHECK ONE) 1 <input type="checkbox"/> Guilty as charged 2 <input type="checkbox"/> Guilty of 3 <input type="checkbox"/> Not Guilty					
ADJUDICATION (CHECK ONE) 1 <input type="checkbox"/> Guilty as charged 2 <input type="checkbox"/> Not guilty 4 <input type="checkbox"/> Not proessed 5 <input type="checkbox"/> Dismissed					
ORDERS OF THE COURT					
FINE \$		COURT COSTS \$		TOTAL FINE AND COURT COSTS \$	
ADDITIONAL PENALTIES / FEES / COSTS					
HEAD INJURY DUI \$		CRIMINAL HISTORY DUI \$		CRIME VICTIMS (DUI/RECKLESS DRIVING) MISDEMEANOR (MINIMUM \$25.00) \$	
HOUSING AND MAINTENANCE \$		MEDICAL \$		ATTORNEY RECOUPMENT \$	
RESTITUTION \$		PARTIAL PAYMENTS AUTH \$		LOCATION	
<input type="checkbox"/> JAILED M D Y		DAYS RELEASED <input type="checkbox"/>		M D Y	
<input type="checkbox"/> SENTENCE SUSPENDED DAYS MONTHS		<input type="checkbox"/> PROBATION DAYS MONTHS		<input type="checkbox"/> COMMUNITY SERVICE DAYS MONTHS	
<input type="checkbox"/> TRAFFIC SAFETY PROGRAM M D Y		<input type="checkbox"/> SUBSTANCE ABUSE EVALUATION		<input type="checkbox"/> COURT REFERRAL PROGRAM COMPLETED M D Y	
COURT ORDERED LICENSE SUSPENSION DAYS MONTHS		<input type="checkbox"/> CONSECUTIVE <input type="checkbox"/> CONCURRENT		LICENSE SURRENDERED TO COURT: M D Y	
RECEIVED BY					
CONFIDENTIAL: <input type="checkbox"/> NO <input type="checkbox"/> IF YES: <input type="checkbox"/> JUVENILE <input type="checkbox"/> YOUTHFUL OFFENDER					
DISPOSITION DATE M D Y					
CASE APPEALED M D Y		APPEAL BOND \$		CIRCUIT COURT CASE NUMBER	
ARRESTING AGENCY (TYPE OF ARREST) <input type="checkbox"/> STATE <input type="checkbox"/> COUNTY <input type="checkbox"/> MUNICIPAL					
CASH RECEIVED FROM		RECEIPT #		AMOUNT	
NAME AND TITLE		DATE M D Y			
LICENSE ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO DPS RECEIVED LICENSE <input type="checkbox"/> YES <input type="checkbox"/> NO					
COURT ACTION AND DISPOSITION					