

7745843

ILLINOIS STATE POLICE CITATION AND COMPLAINT

COMPLAINT	CASE NO. <u>12 DT 578</u>		ISP DIST. <u>10</u>	ISP DIST. <u>10</u>	COMPLAINT
	COUNTY OF <u>MACON</u>	TOWNSHIP OF <u>DECATUR</u>	☐ TWP. RD.		
DEFENDANT	☒ PEOPLE STATE OF ILLINOIS VS.		☐ CITY/VILLAGE OF MUNICIPAL CORPORATION PLAINTIFF		VS.
	NAME (Last) <u>BLACK</u> (First) <u>BRITTANY</u> (M.I.) <u>N.</u>				SID #
	ADDRESS <u>4639 E. GLENWOOD DR.</u>				EYES <u>BLUE</u> ☒ Female ☐ Male
	CITY STATE ZIP <u>DECATUR, IL 62521</u>				HAIR <u>BRN</u> HEIGHT <u>5'7"</u> WEIGHT <u>130</u>
	DOB <u>07/24/87</u>		CDL <u>IL</u> ☐ EXPIR. DATE <u>07/24/16</u>	DATE OF BIRTH <u>07/24/87</u>	

The Undersigned states that on 12/30/12 at 1:51 A.M./P.M. Defendant did unlawfully operate:

VEHICLE	REGISTR. NO. <u>924 1685</u>	STATE <u>IL</u>	YEAR <u>13</u>	US DOT #
	MAKE <u>CADILLAC</u>	YEAR <u>10</u>	COLOR <u>RED</u>	
☐ PEDESTRIAN ☒ PASSENGER CAR ☐ REC. VEH. OR TRUCK ☐ BUS ☐ TRUCK TRACTOR ☐ TRAIL OR SEMI-TRAIL ☐ MOTORCYCLE OR BICYCLE ☐ OTHER ☐ COM. MOTOR VEH. ☐ PLACARDED HAZ. MAT. ☐ 16 OR MORE PAS. VEH.				

Upon a Public Highway, or other Location, Specifically PERSHING ROAD E/B TO MAIN STREET 9/8 TO

Located in the County and State Aforesaid and Did Then and There Commit the Following Offense

VIOLATION	I.V.C. 625 ILCS 5/ :	
	☐ 3-707 OPERATING UNINSURED VEHICLE	☐ 11-502 () ILLEGAL TRANSPORTATION ALCOHOL
	☐ 6-101 NO VALID DRIVER'S LICENSE	☐ 11-601(a) FAILURE TO REDUCE SPEED/ACCIDENT
	☐ 6-303 () DRIVING WHILE LICENSE SUSPENDED/REVOKED	☐ 11-601(b) SPEEDING _____ MPH IN A _____ MPH ZONE
☐ 11-305 DISOBEYING TRAFFIC CONTROL DEVICE	☐ 11-709 () IMPROPER LANE USAGE	
☒ 11-501(a) (<u>2</u>) DRIVING UNDER INFLUENCE	☐ 12-603.1 FAILURE TO WEAR SEAT BELT () D () P	
☐ ILCS ☐ LOCAL ORDINANCE CH. _____ ACT _____ /SEC. _____		
NATURE OF OFFENSE _____		

INCIDENT	ACCIDENT TYPE: ☐ DRIVER INJURY ONLY ☒ PROPERTY DAMAGE ☐ PERSONAL INJURY ☐ FATAL	REF. <u>11042-1110</u>
	ROAD CONDITIONS: ☐ WET ☒ DRY ☐ SNOW ☐ ICE	
	VISIBILITY: ☐ DAY ☒ NIGHT ☐ RAIN ☐ SNOW ☐ FOG ☐ CLEAR	
	METHOD: 0. ☐ H.H. RADAR 1. ☒ PLAIN CAR 2. ☐ RADAR 3. ☐ A.CRAFT 4. ☐ MARKED 5. ☐ VASCAR 6. ☐ C. SIGNED 7. ☐ ASSIST 8. ☐ ACCIDENT 9. ☐ OTHER	
NOTATIONS:		

BOND	BOND INFORMATION (See middle portion, back side of Gold copy)		☐ FULL AMT.
	1. CASH ☐ CURRENCY \$ _____	☐ E-BOND \$ _____ AUTH. # _____	☐ 10%
	2. IL DRIVER'S LICENSE 3. BOND CARD NO. _____ ISSUED BY: _____		
	4. BOND POSTED ON TICKET NO. _____ 5. NO BOND-CONFINED AT <u>MACON CO. JAIL</u>		
6. NOTICE TO APPEAR 7. PROMISE TO COMPLY 8. INDIVIDUAL BOND (FULL) AMOUNT \$ _____			
WITHOUT ADMITTING GUILT, I promise to comply with the terms of this Ticket and Release.			
SIGNATURE <u>X</u>			

COURT PLACE/DATE	CIRCUIT COURT LOCATION AND DATE <u>MACON COUNTY COURTHOUSE</u>	
	ADDRESS / COURTHOUSE <u>253 E. WOOD ST. COURTROOM 2A</u>	
	CITY <u>DECATUR</u> ZIP <u>62523</u> IL <u>ON</u> AT <u>8:30</u> A.M./P.M.	
	☒ COURT APPEARANCE REQUIRED ☐ NO COURT APPEARANCE REQUIRED	
See instructions on top portion, back side of Gold copy.		

Under penalties as provided by law for false certification pursuant to Section 1-209 of the Code of Civil Procedure and perjury pursuant to Section 2-2 of the Criminal Code of 1961, the undersigned certifies that the statements set forth in this instrument are true and correct.

12/30/12
MONTH DAY YEAR

OFFICER'S SIGNATURE

I.D. NO.

7742843



7742843

LOIS A. DURBIN
CIRCUIT CLERK

DEC 3 1 2012

FILED

7745848

ILLINOIS STATE POLICE CITATION AND COMPLAINT

COMPLAINT	7745848		DCN			
	CASE NO.	12 0+578	ISP DIST.	10	ASSIGNMENT	10
	COUNTY OF	MACON	TOWNSHIP OF	DECATUR	COMPLAINT	
	☒ PEOPLE STATE OF ILLINOIS VS. ☐ CITY/VILLAGE OF MUNICIPAL CORPORATION PLAINTIFF		VS.			
DEFENDANT	NAME	BLACK BRITTANY N	SID #			
	ADDRESS	4654 E. GLENWOOD DR	EYES	BLU	☒ Female ☐ Male	
	CITY STATE ZIP	DECATUR, IL 62521	HAIR	BRN	HEIGHT	507
	DR. LIC.	8420-0748-7810	STATE	IL	EXPIR. DATE	7/16

The Undersigned states that on 12/30/12 at 1510 A.M. P.M. Defendant did unlawfully operate:

VEHICLE	REGISTR. NO.	924 1685	STATE	IL	YEAR	13	US DOT #
	MAKE	CADILLAC SRX	YEAR	10	COLOR	RED	
	☐ 0. PEDESTRIAN ☒ 1. PASSENGER CAR ☐ 2. REC. VEHCL OR TRUCK ☐ 3. BUS ☐ 4. TRUCK TRACTOR ☐ 5. TRAIL OR SEMI-TRAIL ☐ 6. MOTORCYCLE OR BICYCLE ☐ 7. OTHER ☐ 8. COM. MOTOR VEHCL ☐ 9. PLACARDED HAZ. MAT. ☐ 10. 16 OR MORE PASS. VEHCL						

Upon a Public Highway or other Location, Specifically

Pershing Rd. EB TO MAIN ST. SB

Located in the County and State Aforesaid and Did Then and There Commit the Following Offense

VIOLATION	I.V.C. 625 ILCS 5/ :	
	☐ 3-707 OPERATING UNINSURED VEHICLE ☐ 6-101 NO VALID DRIVER'S LICENSE ☐ 6-303 () DRIVING WHILE LICENSE SUSPENDED/REVOKED ☐ 11-305 DISOBEYING TRAFFIC CONTROL DEVICE ☒ 11-501(a) (1) DRIVING UNDER INFLUENCE	☐ 11-502 () ILLEGAL TRANSPORTATION ALCOHOL ☐ 11-601(a) FAILURE TO REDUCE SPEED/ACCIDENT ☐ 11-601(b) SPEEDING 100 MPH IN A 202 MPH ZONE ☐ 11-709 () IMPROPER LANE USAGE ☐ 12-603.1 FAILURE TO WEAR SEAT BELT () D () P
	☐ ILCS ☐ LOCAL ORDINANCE CH. _____ ACT _____ /SEC _____	
	NATURE OF OFFENSE _____	

INCIDENT	ACCIDENT TYPE:	☐ DRIVER INJURY ONLY ☒ PROPERTY DAMAGE ☐ PERSONAL INJURY ☐ FATAL	REF. NO.	P10-17-1110
	ROAD CONDITIONS:	☐ WET ☒ DRY ☐ SNOW ☐ ICE	☐ FOG ☐ CLEAR	
	VISIBILITY:	☐ DAY ☒ NIGHT	☐ RAIN ☐ SNOW	
	METHOD:	☐ H.H. RADAR ☐ C. SIGNED ☐ ASSIST	☐ MARKED ☐ VASCAR ☐ OTHER	

BOND	BOND INFORMATION (See middle portion, back side of Gold copy)		☐ FULL AMT.
	1. CASH ☐ CURRENCY \$ _____ ☐ E-BOND \$ _____ AUTH. # _____		☐ 10%
	2. IL DRIVER'S LICENSE ☐ 3. BOND CARD NO. _____ ISSUED BY: _____		
	4. BOND POSTED ON TICKET NO. _____ ☐ 5. NO BOND-CONFINED AT _____		

COURT PLACE/DATE	CIRCUIT COURT LOCATION AND DATE	
	ADDRESS / COURTHOUSE MACON COUNTY Room 2A	
	CITY	DECATUR
	ZIP	62523 IL
ON 1/30/13 AT 830 A.M.		
☒ COURT APPEARANCE REQUIRED ☐ NO COURT APPEARANCE REQUIRED		
See instructions on top portion, back side of Gold copy.		

Under penalties as provided by law for false certification pursuant to Section 1-109 of the Code of Civil Procedure and perjury pursuant to Section 32-2 of the Criminal Code of 1961, the undersigned certifies that the statements set forth in this instrument are true and correct.

12/30/12

MONTH DAY YEAR

OFFICER'S SIGNATURE

I.D. NO.

FILED

DEC 31 2012

**LOIS A. DURBIN
CIRCUIT CLERK**

8482477



8482477

7745844

ILLINOIS STATE POLICE CITATION AND COMPLAINT

COMPLAINT	CASE NO. <u>12 TB 16002</u>		SP DIST. <u>10</u>	ISP DIST. <u>10</u>	COMPLAINT
	COUNTY OF <u>MACON</u>	TOWNSHIP OF <u>DECATUR</u>	☐ TWP. RD.		
	☒ PEOPLE STATE OF ILLINOIS VS. ☐ CITY/VILLAGE OF MUNICIPAL CORPORATION PLAINTIFF				
	NAME <u>BLACK BRITTANY</u> (Last) (First) (M.I.) SID # <u>N</u>				
DEFENDANT	ADDRESS <u>4654 E. GLENWOOD DR</u> (Street) (Apt.)			EYES <u>BLU</u>	☒ Female ☐ Male
	CITY <u>DECATUR</u> STATE <u>IL</u> ZIP <u>62521</u>	HAIR <u>BRN</u>	HEIGHT <u>507</u>	WEIGHT <u>130</u>	
	DRIVER'S LIC. <u>B420-0748-7810</u> STATE <u>IL</u> ☐ CDL	EXPIR. DATE <u>7/16</u>	DATE OF BIRTH <u>07/24/87</u>		

The Undersigned states that on 12/30/12 at 151 0 P.M. Defendant did unlawfully operate:

VEHICLE	REGISTR. NO. <u>9241685</u>	STATE <u>IL</u>	YEAR <u>13</u>	US DOT #
	MAKE <u>CADILLAC</u>	YEAR <u>10</u>	COLOR <u>RED</u>	
	☐ PEDESTRIAN ☒ PASSENGER CAR ☐ REC. VEHCL OR TRUCK ☐ BUS ☐ TRUCK TRACTOR ☐ TRAIL OR SEMI-TRAIL ☐ MOTORCYCLE OR BICYCLE ☐ OTHER ☐ COM. MOTOR VEHCL ☐ PLACARDED HAZ. MAT. ☐ 16 OR MORE PASS. VEHCL			

Upon a Public Highway, or other Location, Specifically

DECATUR RD EB TO MAISON ST JB

Located in the County and State Aforesaid and Did Then and There Commit the Following Offense

VIOLATION	I.V.C. 625 ILCS 5/:	
	☐ 3-707 OPERATING UNINSURED VEHICLE	☒ 11-502 (A) ILLEGAL TRANSPORTATION ALCOHOL
	☐ 6-101 NO VALID DRIVER'S LICENSE	☐ 11-601(a) FAILURE TO REDUCE SPEED/ACCIDENT
	☐ 6-303 () DRIVING WHILE LICENSE SUSPENDED/REVOKED	☐ 11-601(b) SPEEDING _____ MPH IN A _____ MPH ZONE
☐ 11-306 DISOBEYING TRAFFIC CONTROL DEVICE	☐ 11-709 () IMPROPER LANE USAGE	
☐ 11-501(a) () DRIVING UNDER INFLUENCE	☐ 12-603.1 FAILURE TO WEAR SEAT BELT () D () P	
☐ ILCS ☐ LOCAL ORDINANCE CH. _____ ACT _____ /SEC _____		
NATURE OF OFFENSE <u>1300 FULL SEGRAMS 7 OF 750 ML</u>		

INCIDENT	ACCIDENT TYPE: ☐ DRIVER INJURY ONLY ☐ PROPERTY DAMAGE ☐ PERSONAL INJURY ☐ FATAL	REP. NO. <u>110-17-1110</u>
	ROAD CONDITIONS: ☐ WET ☒ DRY ☐ SNOW ☐ ICE	☐ FOG ☐ CLEAR
	VISIBILITY: ☐ DAY ☒ NIGHT ☐ RAIN ☐ SNOW	☐ MARKED ☐ VASCAR
	METHOD: 0. ☐ H.H. RADAR 1. ☒ PLAIN CAR 2. ☐ RADAR 3. ☐ A.CRAFT 4. ☐ MARKED 6. ☐ VASCAR 6. ☐ C. SIGNED 7. ☐ ASSIST 8. ☐ ACCIDENT 9. ☐ OTHER	
NOTATIONS:		

BOND	BOND INFORMATION (See middle portion, back side of Gold copy)		☐ FULL AMT.
	1. CASH ☐ CURRENCY \$ _____	☐ E-BOND \$ _____ AUTH. # _____	☐ 10%
	2. IL DRIVER'S LICENSE 3. BOND CARD NO. _____ ISSUED BY: _____		
	4. BOND POSTED ON TICKET NO. _____ 5. NO BOND-CONFINED AT _____		
6. NOTICE TO APPEAR 7. PROMISE TO COMPLY 8. INDIVIDUAL BOND (FULL) AMOUNT \$ _____			
WITHOUT ADMITTING GUILT, I promise to comply with the terms of this Ticket and Release.			
SIGNATURE <u>X</u>			

COURT/PLACE/DATE	CIRCUIT COURT LOCATION AND DATE		
	ADDRESS / COURTHOUSE <u>MACON COUNTY ROOM 2A</u>		
	CITY <u>DECATUR</u> ZIP <u>62523</u> IL	ON <u>1/30/13</u> AT <u>830</u> <u>A.M.</u>	
	☒ COURT APPEARANCE REQUIRED ☐ NO COURT APPEARANCE REQUIRED See instructions on top portion, back side of Gold copy.		

Under penalties as provided by law for false certification pursuant to Section 1-109 of the Code of Civil Procedure and perjury pursuant to Section 32-2 of the Criminal Code of 1961, the undersigned certifies that the statements set forth in this instrument are true and correct.

12/30/12
MONTH DAY YEAR

OFFICER'S SIGNATURE

I.D. NO.

7742844



7742844

LOIS A. DURGIN
CIRCUIT CLERK

DEC 3 1 2012

FILED

7745846

ILLINOIS STATE POLICE CITATION AND COMPLAINT

COMPLAINT	CASE NO. <u>12 TR 16002</u>		ISP DIST. <u>10</u>	ISP DIST. <u>10</u>	COMPLAINT
	COUNTY OF <u>MACON</u>	TOWNSHIP OF <u>DECATUR</u>	☐ TWP. RD.		
DEFENDANT	☒ PEOPLE STATE OF ILLINOIS VS.		☐ CITY/VILLAGE OF MUNICIPAL CORPORATION PLAINTIFF		VS.
	NAME <u>BLACK</u> <u>BRITANY</u> (First) <u>N</u> (M.I.)		SID #		
	ADDRESS <u>4654 E GLENNWOOD DR</u> (Street) (Apt.)		EYES <u>BLU</u>	☒ Female ☐ Male	
	CITY STATE ZIP <u>DECATUR, IL 62521</u>		HAIR <u>BRN</u>	HEIGHT <u>507</u>	WEIGHT <u>130</u>
VEHICLE	DR. LIC. <u>B420-0748-7810</u>	STATE <u>IL</u>	☐ EXPIR. DATE <u>7/2016</u>	DATE OF BIRTH <u>8/24/87</u>	
	CDL				

The Undersigned states that on 12/30/12 at 151 AM P.M. Defendant did unlawfully operate:

REGISTR. NO. <u>9241685</u>	STATE <u>IL</u>	YEAR <u>13</u>	US DOT #
MAKE <u>CADILLAC</u>	YEAR <u>10</u>	COLOR <u>RED</u>	
☐ PEDESTRIAN ☒ PASSENGER CAR ☐ REC. VEHCL OR TRUCK ☐ BUS ☐ TRUCK TRACTOR ☐ TRAIL OR SEMI-TRAIL ☐ MOTORCYCLE OR BICYCLE ☐ OTHER ☐ COM. MOTOR VEHCL. ☐ PLACARDED HAZ. MAT. ☐ 16 OR MORE PASS. VEHCL.			

Upon a Public Highway, or other Location, Specifically

PEERHINS RD EB TO MAIN ST JB

Located in the County and State Aforesaid and Did Then and There Commit the Following Offense

VIOLATION	I.V.C. 625 ILCS 5/:	
	☐ 3-707 OPERATING UNINSURED VEHICLE	☐ 11-502 () ILLEGAL TRANSPORTATION ALCOHOL
	☐ 6-101 NO VALID DRIVER'S LICENSE	☐ 11-601(a) FAILURE TO REDUCE SPEED/ACCIDENT
	☐ 8-303 () DRIVING WHILE LICENSE SUSPENDED/REVOKED	☐ 11-601(b) SPEEDING _____ MPH IN A _____ MPH ZONE
☒ 11-305 DISOBEYING TRAFFIC CONTROL DEVICE	☐ 11-709 () IMPROPER LANE USAGE	
☐ 11-501(a) () DRIVING UNDER INFLUENCE	☐ 12-603.1 FAILURE TO WEAR SEAT BELT () D () P	
☐ ILCS ☐ LOCAL ORDINANCE CH. _____ ACT _____ /SEC _____		
NATURE OF OFFENSE _____		

INCIDENT	ACCIDENT TYPE: ☐ DRIVER INJURY ONLY ☐ PROPERTY DAMAGE ☐ PERSONAL INJURY ☐ FATAL	REF. NO. <u>12-1110</u>
	ROAD CONDITIONS: ☐ WET ☒ DRY ☐ SNOW ☐ ICE	☐ FOG ☐ CLEAR
	VISIBILITY: ☐ DAY ☒ NIGHT	☐ RAIN ☐ SNOW
	METHOD: ☐ H.H. RADAR ☒ PLAIN CAR ☐ RADAR ☐ A.CRAFT ☐ MARKED ☐ VASCAR	☐ C. SIGNED ☐ ASSIST ☐ ACCIDENT ☐ OTHER
NOTATIONS:		

BOND	BOND INFORMATION (See middle portion, back side of Gold copy)		☐ FULL AMT.
	1. CASH ☐ CURRENCY \$ _____	☐ E-BOND \$ _____ AUTH. # _____	☐ 10%
	2. IL DRIVER'S LICENSE 3. BOND CARD NO. _____ ISSUED BY: _____		
	4. BOND POSTED ON TICKET NO. _____ 5. NO BOND-CONFINED AT _____		
6. NOTICE TO APPEAR 7. PROMISE TO COMPLY 8. INDIVIDUAL BOND (FULL) AMOUNT \$ _____			
WITHOUT ADMITTING GUILT, I promise to comply with the terms of this Ticket and Release.			
SIGNATURE <u>X</u>			

COURT/PLACE/DATE	CIRCUIT COURT LOCATION AND DATE	
	ADDRESS / COURTHOUSE <u>MACON COUNTY ROOM 2A</u>	
	CITY <u>DECATUR</u> ZIP <u>62523</u> IL	ON <u>1/30/13</u> AT <u>830</u> <u>AM</u> P.M.
	☒ COURT APPEARANCE REQUIRED ☐ NO COURT APPEARANCE REQUIRED See instructions on top portion, back side of Gold copy.	

Under penalties as provided by law for false certification pursuant to Section 1-109 of the Code of Civil Procedure and perjury pursuant to Section 32-2 of the Criminal Code of 1961, the undersigned certifies that the statements set forth in this instrument are true and correct.

12/30/12
MONTH DAY YEAR

OFFICER'S SIGNATURE

I.D. NO.

7742846



7742846

LOIS A. DUNN
CIRCUIT CLERK

DEC 3 1 2012

FILED

7745847

ILLINOIS STATE POLICE CITATION AND COMPLAINT

COMPLAINT	CASE NO. 12 TR 16004		ISP DIST. 10	ISP DIST. 10	COMPLAINT
	COUNTY OF MACON	TOWNSHIP OF DECATUR	TWP. RD.		
	☒ PEOPLE STATE OF ILLINOIS VS. ☐ CITY/VILLAGE OF MUNICIPAL CORPORATION PLAINTIFF				
DEFENDANT	NAME BLACK BRITTANY		SID #		
	ADDRESS 4654 E. GLENWOOD DR.		EYES BLU	☐ Female ☐ Male	
	CITY DECATUR, IL	STATE IL	ZIP 62521	HAIR BRN	HEIGHT 507 WEIGHT 130
	DR. LIC. B420-0748-7810	CDL ☐	EXPIR. DATE 7/2016	DATE OF BIRTH 7/24/87	

The Undersigned states that on 12,30,12 at 151 PM, Defendant did unlawfully operate:

VEHICLE	REGISTR. NO. 924 1685	STATE IL	YEAR 13	US DOT #
	MAKE CADILLAC	SRX	YEAR 10	COLOR RED
	☐ PEDESTRIAN ☒ PASSENGER CAR ☐ REC. VEHCL OR TRUCK ☐ BUS ☐ TRUCK TRACTOR ☐ TRAIL OR SEMI-TRAIL ☐ MOTORCYCLE OR BICYCLE ☐ OTHER ☐ COM. MOTOR VEHCL ☐ PLACARDED HAZ. MAT. ☐ 16 OR MORE PASS. VEHCL			

Upon a Public Highway or other Location, Specifically

PERSHING RD. EB TO MAIN ST. SB

Located in the County and State Aforesaid and Did Then and There Commit the Following Offense

VIOLATION	I.V.C. 625 ILCS 5/ :	
	☐ 3-707 OPERATING UNINSURED VEHICLE ☐ 8-101 NO VALID DRIVER'S LICENSE ☐ 8-303 () DRIVING WHILE LICENSE SUSPENDED/REVOKED ☐ 11-306 DISOBEYING TRAFFIC CONTROL DEVICE ☐ 11-501(a) () DRIVING UNDER INFLUENCE	☐ 11-502 () ILLEGAL TRANSPORTATION ALCOHOL ☐ 11-601(a) FAILURE TO REDUCE SPEED/ACCIDENT ☐ 11-601(b) SPEEDING _____ MPH IN A _____ MPH ZONE ☒ 11-709 () IMPROPER LANE USAGE ☐ 12-603.1 FAILURE TO WEAR SEAT BELT () D () P
	☐ ILCS ☐ LOCAL ORDINANCE CH. _____ ACT _____ /SEC _____	

NATURE OF OFFENSE

INCIDENT	ACCIDENT TYPE: ☐ DRIVER INJURY ONLY ☐ PROPERTY DAMAGE ☐ PERSONAL INJURY ☐ FATAL	REP. NO. 110-12-1110
	ROAD CONDITIONS: ☐ WET ☒ DRY ☐ SNOW ☐ ICE	
	VISIBILITY: ☐ DAY ☒ NIGHT ☐ RAIN ☐ SNOW ☐ FOG ☐ CLEAR	
METHOD: 0 ☐ H.H. RADAR 1 ☐ PLAIN CAR 2 ☐ RADAR 3 ☐ A.CRAFT 4 ☐ MARKED 5 ☐ VASCAR 6 ☐ C. SIGNED 7 ☐ ASSIST 8 ☐ ACCIDENT 9 ☐ OTHER		
NOTATIONS:		

BOND	BOND INFORMATION (See middle portion, back side of Gold copy)		☐ FULL AMT.
	1. CASH ☐ CURRENCY \$ _____ ☐ E-BOND \$ _____ AUTH. # _____	☐ 10%	
	2. IL DRIVER'S LICENSE ☐ 3. BOND CARD NO. _____ ISSUED BY: _____		
4. BOND POSTED ON TICKET NO. _____ 5. NO BOND-CONFINED AT _____			
6. NOTICE TO APPEAR ☐ 7. PROMISE TO COMPLY ☐ 8. INDIVIDUAL BOND (FULL) AMOUNT \$ _____			
WITHOUT ADMITTING GUILT, I promise to comply with the terms of this Ticket and Release.			
SIGNATURE X			

COURT PLACE/DATE	CIRCUIT COURT LOCATION AND DATE	
	ADDRESS / COURTHOUSE MACON COUNTY ROOM 2A	
	CITY DECATUR ZIP 62523 IL	ON 1/30/13 AT 830 A.M.
☒ COURT APPEARANCE REQUIRED ☐ NO COURT APPEARANCE REQUIRED		
See instructions on top portion, back side of Gold copy.		

Under penalties as provided by law for false certification pursuant to Section 1-109 of the Code of Civil Procedure and perjury pursuant to Section 32-2 of the Criminal Code of 1961, the undersigned certifies that the statements set forth in this instrument are true and correct.

12,30,12
MONTH DAY YEAR

OFFICER'S SIGNATURE

I.D. NO.

7482477



7482477

LOIS A. DURBIN
CIRCUIT CLERK

DEC 31 2012

FILED

7745845

ILLINOIS STATE POLICE CITATION AND COMPLAINT

COMPLAINT	CASE NO. 2 TR 11005		ISP DIST. OCCURRENCE 10	ISP DIST. ASSIGNMENT 10	COMPLAINT
	COUNTY OF MACON	TOWNSHIP OF DECATUR			☐ TWP. RD.
	☒ PEOPLE STATE OF ILLINOIS VS. ☐ CITY/VILLAGE OF MUNICIPAL CORPORATION PLAINTIFF VS.				
	NAME (Last) BLACK	NAME (First) BRITTANY	NAME (M.I.) N	SID #	
DEFENDANT	ADDRESS (Street) 4654 E. GLENWOOD DR			EYES BLU	☒ Female ☐ Male
	CITY DECATUR, IL	STATE IL	ZIP 62521	HAIR BEN	HEIGHT 507 WEIGHT 130
	DR. LIC. 8420-0748-7810	STATE IL	CDL ☐	EXPIR. DATE 7/16	DATE OF BIRTH 07/24/87

The Undersigned states that on 12/30/12 at 1510 A.M. Defendant did unlawfully operate:

VEHICLE	REGISTR. NO. 9241685	STATE IL	YEAR 13	US DOT #
	MAKE CADILLAC	YEAR 10	COLOR RED	
	☐ PEDESTRIAN ☒ PASSENGER CAR ☐ REC. VEHCL OR TRUCK ☐ BUS ☐ TRUCK TRACTOR ☐ TRAIL OR SEMI-TRAIL ☐ MOTORCYCLE OR BICYCLE ☐ OTHER ☐ COM. MOTOR VEHCL. ☐ PLACARDED HAZ. MAT. ☐ 16 OR MORE PASS. VEHCL.			

Upon a Public Highway, or other Location, Specifically

PERSHING RD. EB TO MAIN ST. SB

Located in the County and State Aforesaid and Did Then and There Commit the Following Offense

VIOLATION	I.V.C. 625 ILCS 5/ :	
	☐ 3-707 OPERATING UNINSURED VEHICLE ☐ 8-101 NO VALID DRIVER'S LICENSE ☐ 8-303 () DRIVING WHILE LICENSE SUSPENDED/REVOKED ☐ 11-305 DISOBEYING TRAFFIC CONTROL DEVICE ☐ 11-601(a) () DRIVING UNDER INFLUENCE ☐ ILCS ☐ LOCAL ORDINANCE CH. _____ ACT _____ /SEC. _____	☐ 11-502 () ILLEGAL TRANSPORTATION ALCOHOL ☐ 11-601(a) FAILURE TO REDUCE SPEED/ACCIDENT ☐ 11-601(b) SPEEDING _____ MPH IN A _____ MPH ZONE ☐ 11-709 () IMPROPER LANE USAGE ☒ 12-603.1 FAILURE TO WEAR SEAT BELT (☒) D () P
	NATURE OF OFFENSE _____	

INCIDENT	ACCIDENT TYPE: ☐ DRIVER INJURY ONLY ☐ PROPERTY DAMAGE ☐ PERSONAL INJURY ☐ FATAL	REF. NO. 110-12-1110
	ROAD CONDITIONS: ☐ WET ☒ DRY ☐ SNOW ☐ ICE	☐ FOG ☐ CLEAR
	VISIBILITY: ☐ DAY ☒ NIGHT ☐ RAIN ☐ SNOW	☐ MARKED ☐ VASCAR
	METHOD: 0. ☐ H.H. RADAR 1. ☒ PLAIN CAR 2. ☐ RADAR 3. ☐ A.CRAFT 4. ☐ MARKED 5. ☐ VASCAR 6. ☐ C. SIGNED 7. ☐ ASSIST 8. ☐ ACCIDENT 9. ☐ OTHER	
NOTATIONS:		

BOND	BOND INFORMATION (See middle portion, back side of Gold copy)		☐ FULL AMT.
	1. CASH ☐ CURRENCY \$ _____ ☐ E-BOND \$ _____ AUTH. # _____	☐ 10%	
	☐ 2. IL DRIVER'S LICENSE ☐ 3. BOND CARD NO. _____ ISSUED BY: _____ ☐ 4. BOND POSTED ON TICKET NO. _____ ☐ 5. NO BOND-CONFINED AT _____ ☐ 6. NOTICE TO APPEAR ☐ 7. PROMISE TO COMPLY ☐ 8. INDIVIDUAL BOND (FULL) AMOUNT \$ _____		
	WITHOUT ADMITTING GUILT, I promise to comply with the terms of this Ticket and Release.		
SIGNATURE X			

COURT PLACE/DATE	CIRCUIT COURT LOCATION AND DATE	
	ADDRESS / COURTHOUSE MACON COUNTY Room 2A	
	CITY DECATUR ZIP 62523 IL	ON 1/30/13 AT 830 A.M.
	☒ COURT APPEARANCE REQUIRED ☐ NO COURT APPEARANCE REQUIRED See instructions on top portion, back side of Gold copy.	

Under penalties as provided by law for false certification pursuant to Section 1-109 of the Code of Civil Procedure and perjury pursuant to Section 32-2 of the Criminal Code of 1961, the undersigned certifies that the statements set forth in this instrument are true and correct.

12/30/12
MONTH DAY YEAR

OFFICER'S SIGNATURE

I.D. NO.

7742842



7742842

LOIS A. DURBIN
CIRCUIT CLERK

DEC 3 1 2012

FILED

7745849

ILLINOIS STATE POLICE CITATION AND COMPLAINT

COMPLAINT	7745849 (2)		DCN	
	CASE NO. 12TH 16002	ISP DIST. 10	ISP DIST. 10	COMPLAINT
	COUNTY OF MACON	OCCURRENCE	ASSIGNMENT	TOWNSHIP OF DECATUR
	☒ PEOPLE STATE OF ILLINOIS VS. ☐ CITY/VILLAGE OF MUNICIPAL CORPORATION PLAINTIFF			VS.
DEFENDANT	NAME (Last) BLACK (First) BRITTANY (M.I.) N.		SID #	
	ADDRESS 4654 E. GLENWOOD DR.		EYES BLUE	☐ Female ☒ Male
	CITY STATE ZIP	DECATUR, IL 62521	HAIR BROWN	HEIGHT 5'7" WEIGHT 130
	OR. NO. 8420-0748-7810	IL STATE CDL	EXPIR. DATE 07/24/16	DATE OF BIRTH 07/24/87

The Undersigned states that on 12.30.12 at 1:51 P.M. Defendant did unlawfully operate:

VEHICLE	REGISTR. NO. 924 1685	STATE IL	YEAR 13	US DOT #
	MAKE CADILLAC	SRX	YEAR 10	COLOR RED
	☐ PEDESTRIAN ☒ PASSENGER CAR ☐ REC. VEHCL OR TRUCK ☐ BUS ☐ TRUCK TRACTOR ☐ TRAIL OR SEM-TRAIL ☐ MOTORCYCLE OR BICYCLE ☐ OTHER ☐ COM. MOTOR VEHCL ☐ PLACARDED HAZ. MAT. ☐ 16 OR MORE PASS. VEHCL			

Upon a Public Highway, or other Location, Specifically

PERSHING ROAD E/B
MAIN STREET YB TO KENWOOD

Located in the County and State Aforesaid and Did Then and There Commit the Following Offense

VIOLATION	I.V.C. 625 ILCS 5/ :	
	☐ 3-707 OPERATING UNINSURED VEHICLE ☐ 6-101 NO VALID DRIVER'S LICENSE ☐ 6-303 () DRIVING WHILE LICENSE SUSPENDED/REVOKED ☐ 11-305 DISOBEYING TRAFFIC CONTROL DEVICE ☐ 11-501(a) () DRIVING UNDER INFLUENCE ☐ ILCS ☐ LOCAL ORDINANCE CH. _____ ACT _____ /SEC _____	☐ 11-502 () ILLEGAL TRANSPORTATION ALCOHOL ☒ 11-601(a) FAILURE TO REDUCE SPEED/ACCIDENT ☒ 11-601(b) SPEEDING 50* 35 MPH IN 35 MPH ZONE ☐ 11-709 () IMPROPER LANE USAGE ☐ 12-603.1 FAILURE TO WEAR SEAT BELT () O () P
	NATURE OF OFFENSE	

INCIDENT	ACCIDENT TYPE: ☐ DRIVER INJURY ONLY ☒ PROPERTY DAMAGE ☐ PERSONAL INJURY ☐ FATAL	REF ID: 10-12-1110
	ROAD CONDITIONS: ☐ WET ☒ DRY ☐ SNOW ☐ ICE	
	VISIBILITY: ☐ DAY ☒ NIGHT ☐ RAIN ☐ SNOW ☐ FOG ☐ CLEAR	
	METHOD: 0. ☐ H.H. RADAR ☒ PLAIN CAR 2. ☐ RADAR 3. ☐ A.CRAFT 4. ☐ MARKED 5. ☐ VASCAR 6. ☐ C. SIGNED 7. ☐ ASSIST 8. ☐ ACCIDENT 9. ☐ OTHER	
NOTATIONS:		

BOND	BOND INFORMATION (See middle portion, back side of Gold copy)		☐ FULL AMT.
	1. CASH ☐ CURRENCY \$ _____ ☐ E-BOND \$ _____ AUTH. # _____		☐ 10%
	2. IL DRIVER'S LICENSE ☐ 3. BOND CARD NO. _____ ISSUED BY: _____		
	4. BOND POSTED ON TICKET NO. 7745849 5. NO BOND-CONFINED AT _____		
6. NOTICE TO APPEAR 7. PROMISE TO COMPLY 8. INDIVIDUAL BOND (FULL) AMOUNT \$ _____			
WITHOUT ADMITTING GUILT, I promise to comply with the terms of this Ticket and Release.			
SIGNATURE X			

COURT PLACE/DATE	CIRCUIT COURT LOCATION AND DATE	
	ADDRESS / COURTHOUSE 253 E. WOOD ST. COURTROOM 2A	
	CITY DECATUR	ZIP 62523
	ON 01/30/13	AT 8:30 A.M.
☒ COURT APPEARANCE REQUIRED ☐ NO COURT APPEARANCE REQUIRED		
See instructions on top portion, back side of Gold copy.		

Under penalties as provided by law for false certification pursuant to Section 1-109 of the Code of Civil Procedure and perjury pursuant to Section 2-2.2 of the Criminal Code of 1961, the undersigned certifies that the statements set forth in this instrument are true and correct.

12.30.12

OFFICER'S SIGNATURE

I.D. NO.

0482477



0482477

7745850

ILLINOIS STATE POLICE CITATION AND COMPLAINT

COMPLAINT	7745850 (2)		DCN	
	CASE NO. 127X/16003	ISP DIST. 10	ISP DIST. 10	COMPLAINT
	COUNTY OF MACON	TOWNSHIP OF DECATUR	TWP. RD.	
	☒ PEOPLE STATE OF ILLINOIS VS. ☐ CITY/VILLAGE OF MUNICIPAL CORPORATION PLAINTIFF VS.			
DEFENDANT	NAME BLACK, BRITTANY N.		SID #	
	ADDRESS 4654 E. GLENWOOD DR.		EYES BLUE ☒ Female ☐ Male	
	CITY, STATE, ZIP DECATUR, IL 62521	DOB 07/24/87		
	DR. LIC. 13420-0748-7210	STATE IL	CDL	EXPIR. DATE 07/24/16

The Undersigned states that on 12.30.12 at 1:51 P.M. Defendant did unlawfully operate:

VEHICLE	REGISTR. NO. 924 1685	STATE IL	YEAR 13	US DOT #
	MAKE CADILLAC SRX	YEAR 10	COLOR RED	
	☐ PEDESTRIAN ☒ PASSENGER CAR ☐ REC. VEHCL OR TRUCK ☐ BUS ☐ TRUCK TRACTOR ☐ TRAIL OR SEMI-TRAIL ☐ MOTORCYCLE OR BICYCLE ☐ OTHER ☐ COM. MOTOR VEHCL ☐ PLACARDED HAZ. MAT. ☐ 15 OR MORE PASS. VEHCL			

Upon a Public Highway, or other Location, Specifically PERSHING ROAD E/B TO MAIN STREET S/B TO KENWOOD

Located in the County and State Aforesaid and Did Then and There Commit the Following Offense

VIOLATION	I.V.C. 625 ILCS 5/:	
	☐ 3-707 OPERATING UNINSURED VEHICLE ☐ 11-502 () ILLEGAL TRANSPORTATION ALCOHOL ☐ 6-101 NO VALID DRIVER'S LICENSE ☐ 11-601(a) FAILURE TO REDUCE SPEED/ACCIDENT ☐ 6-303 () DRIVING WHILE LICENSE SUSPENDED/REVOKED ☐ 11-601(b) SPEEDING _____ MPH IN A _____ MPH ZONE ☐ 11-305 DISOBEYING TRAFFIC CONTROL DEVICE ☐ 11-709 () IMPROPER LANE USAGE ☒ 11-501(a) () DRIVING UNDER INFLUENCE ☐ 12-603.1 FAILURE TO WEAR SEAT BELT () D () P	
	☒ ILCS ☐ LOCAL ORDINANCE CH. 605 S ACT 11-80A /SEC	
	NATURE OF OFFENSE FAILURE TO SIGNAL	

INCIDENT	ACCIDENT TYPE: ☐ DRIVER INJURY ONLY ☒ PROPERTY DAMAGE ☐ PERSONAL INJURY ☐ FATAL	REF. NO. 12-1110
	ROAD CONDITIONS: ☐ WET ☒ DRY ☐ SNOW ☐ ICE	
	VISIBILITY: ☐ DAY ☒ NIGHT ☐ RAIN ☐ SNOW ☐ FOG ☐ CLEAR	
	METHOD: 0. ☐ H.H. RADAR ☒ PLAIN CAR 2. ☐ RADAR 3. ☐ A.CRAFT 4. ☐ MARKED 5. ☐ VASCAR 6. ☐ C. SIGNED 7. ☐ ASSIST 8. ☐ ACCIDENT 9. ☐ OTHER	

BOND	BOND INFORMATION (See middle portion, back side of Gold copy)		☐ FULL AMT.
	1. CASH ☐ CURRENCY \$ _____ ☐ E-BOND \$ _____ AUTH. # _____		☐ 10%
	2. IL DRIVER'S LICENSE ☐ 3. BOND CARD NO. _____ ISSUED BY: _____		
	4. BOND POSTED ON TICKET NO. 7745843 ☐ 5. NO BOND-CONFINED AT _____		

COURT, PLACE/DATE	CIRCUIT COURT LOCATION AND DATE	
	ADDRESS / COURT HOUSE 253 E. WOOD ST. COURT ROOM 2A	
	CITY DECATUR	ZIP 62523
	ON 01/30/13	AT 8:30 A.M.
☒ COURT APPEARANCE REQUIRED ☐ NO COURT APPEARANCE REQUIRED		

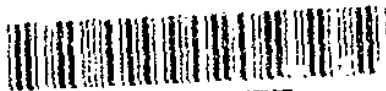
Under penalties as provided by law for false certification pursuant to Section 1-100 of the Code of Civil Procedure and perjury pursuant to Section 31-2 of the Criminal Code of 1961, the undersigned certifies that the statements set forth in this instrument are true and correct.

12.30.12

OFFICER'S SIGNATURE

NO. 7575

7742820



7742820

2
A
2
7

12DT578
FILED

In the Circuit Court of the Sixth Judicial Circuit
Macon County, Illinois

DEC 31 2012

LOIS A. DUNN
CIRCUIT CLERK

People of the State of Illinois

Vs.

Black Brittany

Case No. New Charge

Bond

The undersigned defendant, being charged with the
Offense of DUI, DUI over .08, Disobey
Traffic device, Improper lane usage
No seat belt, Illegal Transport of
alcohol

☒ Cash ☐ Recognizance

The undersigned defendant, being charged with an offense under the laws of the State of Illinois acknowledges an indebtedness to the People of the State of Illinois in the penal sum of \$ 3000 to be levied upon his/her property wherever situated, and as security thereto for the compliance with the conditions of bond, the sum \$ 300 is deposited in cash with the Clerk of the Court which is ☐ the total amount required by Article V of the rules of the Supreme Court of Illinois ☒ equal to 10% of the amount of bond. Defendant further undertakes the following as terms and conditions of this bond: If checked the following are conditions of Bond.

- (X) 1. Appear in Courtroom 2A Macon County Courthouse
Decatur, Illinois at 0830 o'clock a.m. on the 30 day
January Of December 20 13 and from time to time
thereafter as may be directed until discharged by the court;
- (X) 2. Submit to all orders and processes of the court;
- (X) 3. Not to depart this State without permission of court;
- (X) 4. Not violate any criminal statute of any jurisdiction
- (X) 5. Give written notice to the Clerk of the Court of any change
of address within 24 hours thereafter;
- ☐ 6. Refrain from possessing a firearm or other dangerous weapon;
- ☐ 7. Refrain from entering or remaining at the victim's residence
and refrain from having any contact, directly or indirectly, with
the victim until disposition of this case.
- Victim: _____
- ☐ 7.(a) Refrain from contact or communication with the victim
and refrain from entering or remaining at the victims resi-
dence for a minimum period of 72 hours following the
defendant's release.
Time of release: _____
- ☐ 8. Refrain from going on the premises located at: _____
- ☐ 9. Refrain from using intoxicating liquor or illegal drugs;
- ☐ 10. Undergo treatment for drug addiction or alcoholism;
- ☐ 11. Observe curfew and to be home at _____ p.m. until _____
a.m. Monday through _____
- (X) 12. \$15.00 Bond fee
- ☐ 13. _____

Certification

BY DEFENDANT

I understand that if at any time prior to the final disposition of this case, I fail to appear in court when so required, my failure to appear will constitute a waiver of my right to confront witnesses against me and the trial may proceed in my absence.

I certify that I have read the foregoing provisions of this bond; fully understand the condition thereto and agree to comply with said conditions; That upon violation of any such condition, my bond may be forfeited, the amount of bond increased and/or the conditions altered, and if the commission of a felony is alleged as a violation of bond, this bond may be revoked.

PAYOR OF CASH DEPOSIT

I further understand any sum given as cash deposit may be used in the court's discretion for the payment of fine, costs, restitution or court appointed counsel Public Defender's fees. Therefore, money posted by the defendant, or by someone else on his/her behalf may, or may not, be returned at the conclusion of the case. Ten percent of such money deposit will be retained by the Clerk as statutory bond costs with the balance being returned to the defendant or his/her designee less any amount applied to the payment of fines, costs, restitution and court appointed counsel fees.

Defendant's signature

Street Address

City

State

Zip

Phone

DOB

Driver's Lic.

SSN

Taken before me this 30th day of Dec, 20 12

Payor of Cash Deposit other than Defendant

Street Address

City

State

Zip

Phone

DOB

Driver's Lic.

SSN

☐ Judge ☒ Clerk ☒ Sheriff ☐ Police
Defendant- Yellow copy

IN THE CIRCUIT COURT OF THE SIXTH JUDICIAL CIRCUIT
MACON COUNTY, ILLINOIS

FILED
JAN 08 2013

LOIS A. DUNSTON
CIRCUIT CLERK

THE PEOPLE OF THE STATE
OF ILLINOIS,

Plaintiff

vs.

BRITTANY N. BLACK,

Defendant

Case No. 12-DT-578, 12-TR-16002,
12-TR-16003, 12-TR-16004 and
12-TR-16005

MOTION FOR DISCOVERY

NOW COMES the Defendant, BRITTANY N. BLACK, by and through her attorney, Monroe D. McWard of McWard Law Office, and moves this Honorable Court as follows:

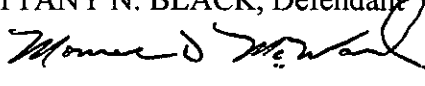
1. For production of any written confession, admission or statement of the Defendant, and with the names, addresses of any witnesses to such purported confessions, admission or statement. Also, for the production of the names of all witnesses to any such oral confession, admission or statement as may be made by the Defendant.

2. That the State furnish the Defendant with a list of names and last known addresses of all the persons whom the State intends to call as witnesses in the trial in the above cause.

3. That the State furnish the Defendant any evidence which tends to negate the Defendant's guilt, pursuant to Brady v. Maryland, 373 U.S. 83, 10 L.Ed 2d 215 (1963).

4. That the State furnish the Defendant with full information concerning any chemical test or tests that Defendant submitted to at the request of any law enforcement officer following his arrest, pursuant to 625 ILCS 5/11-501.4.

Respectfully submitted,
BRITTANY N. BLACK, Defendant

By 

Monroe D. McWard, Her Attorney

McWARD LAW OFFICE
107 South Washington Street
Taylorville, IL 62568
(217) 824-2900
Reg. No. 06190799

CERTIFICATE OF SERVICE

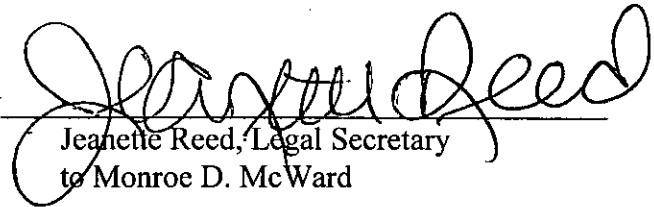
TO: **Mr. Jay Scott**
State's Attorney
253 East Wood Street
Decatur, Illinois 62523

The undersigned does hereby certify that on the 8th day of January, 2013, she served the foregoing Motion for Discovery by hand delivering or depositing a copy in the United States Mail in Taylorville, IL 62568, in an envelope with sufficient First Class Postage attached to carry same to its destination as addressed above.

Under penalties as provided by Section 1-109 of the Code of Civil Procedure, the undersigned certifies that the statements set forth in this instrument are true and correct.

McWARD LAW OFFICE

By


Jeanette Reed, Legal Secretary
to Monroe D. McWard

McWARD LAW OFFICE
107 South Washington Street
Taylorville, IL 62568
(217) 824-2900
Reg. No. 06190799

FILED

JAN 08 2013

**IN THE CIRCUIT COURT OF THE SIXTH JUDICIAL CIRCUIT
MACON COUNTY, ILLINOIS**

**LOIS A. DURBIN
CIRCUIT CLERK**

**THE PEOPLE OF THE STATE
OF ILLINOIS,**

Plaintiff

vs.

BRITTANY N. BLACK,

Defendant

**Case No. 12-DT-578, 12-TR-16002,
12-TR-16003, 12-TR-16004 and
12-TR-16005**

ENTRY OF APPEARANCE

NOW COMES Monroe D. McWard of McWard Law Office and hereby enters his
appearance as the Attorney of Record for the Defendant, BRITTANY N. BLACK.

Respectfully submitted,

BRITTANY N. BLACK, Defendant

By 
Monroe D. McWard, Her Attorney

Monroe D. McWard
McWARD LAW OFFICE
107 South Washington Street
Taylorville, IL 62568
(217) 824-2900
Reg. No. 06190799

CERTIFICATE OF SERVICE

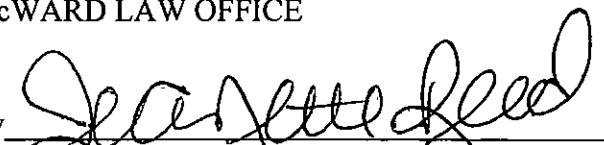
TO: **Mr. Jay Scott**
State's Attorney
253 East Wood Street
Decatur, Illinois 62523

The undersigned does hereby certify that on the 8th day of January, 2013, she served the foregoing Entry of Appearance by hand delivering or depositing a copy in the United States Mail in Taylorville, IL 62568, in an envelope with sufficient First Class Postage attached to carry same to its destination as addressed above.

Under penalties as provided by Section 1-109 of the Code of Civil Procedure, the undersigned certifies that the statements set forth in this instrument are true and correct.

McWARD LAW OFFICE

By


Jeanette Reed, Legal Secretary
to Monroe D. McWard

McWARD LAW OFFICE
107 South Washington Street
Taylorville, IL 62568
(217) 824-2900
Reg. No. 06190799

IN THE CIRCUIT COURT OF THE SIXTH JUDICIAL CIRCUIT
MACON COUNTY, ILLINOIS

FILED
JAN 08 2013

THE PEOPLE OF THE STATE
OF ILLINOIS,

Plaintiff

vs.

BRITTANY N. BLACK,

Defendant

LOIS A. DURBIN
CIRCUIT CLERK

Case No. 12-DT-578, 12-TR-16002,
12-TR-16003, 12-TR-16004 and
12-TR-16005

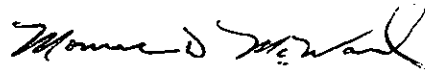
PLEA OF NOT GUILTY & JURY TRIAL DEMAND

The undersigned, as Attorney for Defendant, BRITTANY N. BLACK, hereby pleads Not
Guilty and requests a jury trial.

Respectfully submitted,

BRITTANY N. BLACK, Defendant

By



Monroe D. McWard, Her Attorney

Monroe D. McWard
McWARD LAW OFFICE
107 South Washington Street
Taylorville, IL 62568
(217) 824-2900
Reg. No. 06190799

CERTIFICATE OF SERVICE

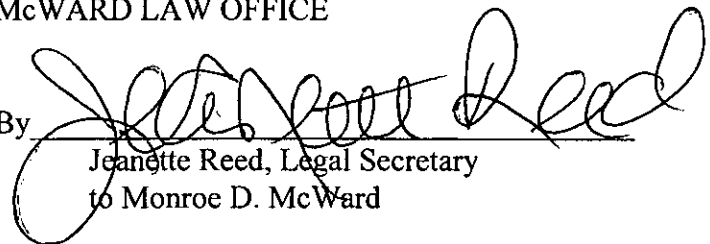
TO: **Mr. Jay Scott**
State's Attorney
253 East Wood Street
Decatur, Illinois 62523

The undersigned does hereby certify that on the 8th day of January, 2013, she served the foregoing Plea of Not Guilty & Jury Trial Demand by hand delivering or depositing a copy in the United States Mail in Taylorville, IL 62568, in an envelope with sufficient First Class Postage attached to carry same to its destination as addressed above.

Under penalties as provided by Section 1-109 of the Code of Civil Procedure, the undersigned certifies that the statements set forth in this instrument are true and correct.

McWARD LAW OFFICE

By



Jeanette Reed, Legal Secretary
to Monroe D. McWard

McWARD LAW OFFICE
107 South Washington Street
Taylorville, IL 62568
(217) 824-2900
Reg. No. 06190799

WARNING TO MOTORIST

12DT578

Case Number _____

DUI TRAFFIC CITATION NO. (11-501A1)

7745848

DUI TRAFFIC CITATION NO. (11-501A2)

7745848

DUI TRAFFIC CITATION NO. (11-501B1)

JAN 09 2013

Subsequent to an arrest for driving while under the influence of alcohol, other drug(s) or intoxicating compound(s), or any combination thereof (DUI), you are hereby notified that:

As provided in Section 11-500 of the Illinois Vehicle Code, you are a first offender unless within the last 5 years of this arrest for DUI you have:

- A previous conviction or court-assigned supervision for DUI or a similar provision of a local ordinance; or
- A conviction in any other state for DUI or a similar offense where the cause of action is the same or substantially similar to the Illinois Vehicle Code; or
- Pursuant to a DUI arrest, an Illinois driver's license suspension/revocation for refusing to submit to or failing to complete all requested chemical tests, or for submitting to a chemical test(s) disclosing an alcohol concentration of .08 or more or any amount of a drug, substance or intoxicating compound resulting from the unlawful use or consumption of cannabis as listed in the Cannabis Control Act; a controlled substance as listed in the Illinois Controlled Substances Act; an intoxicating compound as listed in the Use of Intoxicating Compounds Act; or methamphetamine as listed in the Methamphetamine Control and Community Protection Act, except in cases where you submitted to a chemical test(s) disclosing an alcohol concentration of .08 or more or any amount of a drug, substance or intoxicating compound resulting from the unlawful use or consumption of cannabis as listed in the Cannabis Control Act; a controlled substance as listed in the Illinois Controlled Substances Act; an intoxicating compound as listed in the Use of Intoxicating Compounds Act; or methamphetamine as listed in the Methamphetamine Control and Community Protection Act, and were subsequently found not guilty of the associated DUI charge.

Considering the above, you are warned:

1. If you refuse or fail to complete all chemical tests requested and:

- If you are a first offender, **your driving privileges will be suspended for a minimum of 12 months; or**
- If you are not a first offender, **your driving privileges will be suspended for a minimum of 3 years; or**
- If you were involved in a motor vehicle accident that caused personal injury or death to another, **your driving privileges will be revoked for a minimum of 12 months.** Personal injury means a Type A injury that requires immediate professional attention in a doctor's office or medical facility, including severely bleeding wounds, distorted extremities, and injuries that require the injured party to be carried from the scene.

2. If you submit to a chemical test(s) disclosing an alcohol concentration of .08 or more or any amount of a drug, substance or intoxicating compound resulting from the unlawful use or consumption of cannabis as listed in the Cannabis Control Act; a controlled substance as listed in the Illinois Controlled Substances Act; an intoxicating compound as listed in the Use of Intoxicating Compounds Act; or methamphetamine as listed in the Methamphetamine Control and Community Protection Act, and:

- If you are a first offender, **your driving privileges will be suspended for a minimum of 6 months; or**
- If you are not a first offender, **your driving privileges will be suspended for a minimum of 1 year.**

You are further warned that if you are a Commercial Driver's License (CDL) holder, your CDL privileges will be disqualified for the following time period if you refuse to submit to or fail to complete all chemical tests requested, or submit to a chemical test(s) disclosing an alcohol concentration of .08 or more or any amount of a drug, substance or intoxicating compound resulting from the unlawful use or consumption of cannabis as listed in the Cannabis Control Act; a controlled substance as listed in the Illinois Controlled Substances Act; an intoxicating compound as listed in the Use of Intoxicating Compounds Act; or methamphetamine as listed in the Methamphetamine Control and Community Protection Act:

- If you have not had a prior 12-month disqualification of your CDL privileges, **your CDL privileges will be disqualified for 12 months.**
- If you have had a prior 12-month disqualification of your CDL privileges, **your CDL privileges will be disqualified for life.**

MOTORIST UNDER AGE 21

You are further warned that as a motorist under age 21, if you submit to a chemical test(s) disclosing an alcohol concentration of more than .00 and less than .08, your driving privileges will be suspended as provided in Sections 6-208.2 and 11-501.8 of the Illinois Vehicle Code.

As provided in Section 6-208.2, you are a first offender unless you have had a previous suspension under Section 11-501.8 for refusing or failing to complete a chemical test(s) or for submitting to a chemical test(s) disclosing an alcohol concentration of more than .00.

- If you are a first offender, **your driving privileges will be suspended for a minimum of 3 months; or**
- If you are not a first offender, **your driving privileges will be suspended for a minimum of 1 year.**

SCHOOL BUS DRIVER

You are further warned that as a school bus driver operating a school bus in accordance with Section 6-106.1a of the Illinois Vehicle Code, if you submit to a chemical test(s) disclosing an alcohol concentration of more than .00, your privilege to possess a school bus driver permit will be cancelled for 3 years as provided under Sections 6-106.1a and 6-106.1b of the Illinois Vehicle Code.

Warning Issued To

Name of Motorist

BRITTANY N. BLACK

Driver's License Number

B420-0748-7810

Under penalties as provided by law pursuant to Section 1-109 of the Illinois Code of Civil Procedure, the undersigned certifies that the statements set forth in this instrument are true and correct.

Signature of Arresting Officer

ID Number

ILLINOIS STATE POLICE - DISTRICT 10

12/30/12

Date of Warning

Time of Warning

4575

2:21

a.m.
p.m.

POLICE OFFICER - SEND TO COURT OF VENUE

July 2011 - DSD DC 35.24

Circuit Court, MACON County, _____ Municipal District _____

7745846

7745843

DUI TRAFFIC CITATION NO. (OTHER)

Name BLACK BRITANNY N.
Last First Middle

State

Driver's License Number													State		
B	-	4	2	0	-	0	7	4	8	-	7	8	1	0	IL

☐ Accident involving personal injury or death to another

4654 E. GLENWOOD DR.

Street Address

DECATUR, IL

City & State

F, 07-24-87

Sex	Date of Birth
-----	---------------

Notice of Summary Suspension/
Revocation Given On 12 / 30 / 12
Month Day Year

DECATUR/MACON COUNTY

City and/or County of Arrest

Arrest Date 12 / 30 / 12 , 2:04 a.m.
p.m.
Month Day Year Time

MACON COUNTY JAIL

Place of Refusal or Location of Test(s)

Refusal or Test Date 12 / 30 / 12 , 3:00 a.m.
Month Day Year Time

Signature of Arresting Officer _____

ID Number

ILLINOIS STATE POLICE - DISTRICT 10
Law Enforcement Agency

Date 12 / 30 / 12
Month Day Year

375153

POLICE OFFICER - SEND TO COURT OF VENUE

July 2011 – DSD DC 35.24

NOTICE TO THE SECRETARY OF STATE OF HEARING DISPOSITION

Circuit Court, MILKON County, _____ Municipal District

Case Number _____

DUI TRAFFIC CITATION NO. (11-501A1)

774-546

DUI TRAFFIC CITATION NO. (11-501A2)

774-4

DUI TRAFFIC CITATION NO. (OTHER)

Name SLICK SCITTINI N.

Last

First

Middle

☐ CDL holder

Driver's License Number

State

5	-	4	2	0	-	0	7	4	0	-	7	0	1	0	IL
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	----

☐ Accident involving personal injury or death to another

41-4 C.C. LINKED DL.

Street Address

DEPTIC, IL

City & State

IL 7-24-07

Sex

Date of Birth

Notice of Summary Suspension/Revocation Given On 12, 30, 12

Month

Day

Year

DEPTIC/MILKON COUNTY

City and/or County of Arrest

Arrest Date 12, 30, 12, 2004

Month

Day

Year

Time

MILKON COUNTY IL

Place of Refusal or Location of Test(s)

Refusal or Test Date 12, 30, 12, 3:00

Month

Day

Year

Time

TO THE SECRETARY OF STATE, I the undersigned,
do hereby certify that pursuant to statute on

Month

Day

Year

a hearing was held before the Honorable _____

in the Circuit Court of _____ County.

Upon conclusion of the judicial hearing, the Circuit Court found in favor of the:

☐ State — SUMMARY SUSPENSION/REVOCAION OF DRIVING PRIVILEGES SUSTAINED

☐ Defendant — SUMMARY SUSPENSION/REVOCAION OF DRIVING PRIVILEGES RESCINDED due to:

1. ☐ No DUI Arrest
2. ☐ No Warning Given
3. ☐ No Reasonable Grounds
4. ☐ No Refusal
5. ☐ BAC less than .08
6. ☐ No motor vehicle accident that caused Type A injury or death to another
7. ☐ Other _____

This is reported to you in accordance with the provisions of Section 2-118.1 of the Illinois Vehicle Code.

Circuit Clerk

NOTICE TO THE SECRETARY OF STATE OF HEARING DISPOSITION

Circuit Court, _____ County, _____ Municipal District

Case Number _____

DUI TRAFFIC CITATION NO. (11-501A1)

DUI TRAFFIC CITATION NO. (11-501A2)

DUI TRAFFIC CITATION NO. (OTHER)

Name _____
Last
First
Middle

☐ **CDL holder**

Driver's License Number												State

☐ Accident involving personal injury or death to another

 Street Address

 City & State

 Sex _____ Date of Birth _____
 Notice of Summary Suspension/
 Revocation Given On _____
Month
Day
Year

 City and/or County of Arrest
 Arrest Date _____ a.m.
Month
Day
Year
Time p.m.

 Place of Refusal or Location of Test(s)
 Refusal or Test Date _____ a.m.
Month
Day
Year
Time p.m.

TO THE SECRETARY OF STATE, I the undersigned,
 do hereby certify that pursuant to statute on

 Month Day Year

a hearing was held before the Honorable _____

in the Circuit Court of _____ County.

Upon conclusion of the judicial hearing, the Circuit Court found in favor of the:

☐ **State — SUMMARY SUSPENSION/REVOCAION OF DRIVING PRIVILEGES SUSTAINED**

☐ **Defendant — SUMMARY SUSPENSION/REVOCAION OF DRIVING PRIVILEGES RESCINDED due to:**

- | | |
|---|---|
| 1. ☐ No DUI Arrest | 5. ☐ BAC less than .08 |
| 2. ☐ No Warning Given | 6. ☐ No motor vehicle accident that caused Type A injury or death to another |
| 3. ☐ No Reasonable Grounds | 7. ☐ Other _____ |
| 4. ☐ No Refusal | _____ |

This is reported to you in accordance with the provisions of Section 2-118.1 of the Illinois Vehicle Code.

 Circuit Clerk

OFFICE OF THE SECRETARY OF STATE
STATE OF ILLINOIS SPRINGFIELD
CONFIRMATION OF STATUTORY SUMMARY SUSPENSION

013170100933
1207578

FILED

JAN 18 2013

**LOIS A. DURBIN
CIRCUIT CLERK**

BRITTANY N BLACK
2364 N LINCOLN AVE APT 3
CHICAGO IL 60614

Summary Suspension Effective at 12:01 a.m. on 02-14-13
Minimum Length of Summary Suspension: 6 MO
Driver's License Number: B420-0748-7810
Ticket/Complaint Number: 7745848
First Offender: YES
Provisional Reinstatement Date: 08-14-13

Pursuant to the provisions of Section 11-501.1 of the Illinois Vehicle Code, this is a confirmation that your Illinois driver's license or driving permit and your privilege to operate a motor vehicle or to obtain a driver's license in Illinois are suspended effective on the date shown above.

This action is being taken as a result of this office receiving notification that you were arrested for driving a motor vehicle in this state while under the influence of alcohol, other drug or combination thereof, and that you subsequently refused to or failed to complete the chemical test(s) as required or you voluntarily submitted to chemical test(s) that indicated an alcohol concentration of 0.08 or greater, or any amount of drug, substance or compound resulting from the unlawful use or consumption of cannabis listed in the Cannabis Control Act or a controlled substance listed in the Illinois Controlled Substances Act, an intoxicating compound or compounds listed in the use of Intoxicating Compounds Act, or Methamphetamine as listed in the Methamphetamine Control and Community Protection Act.

Please review the information listed on the reverse of this notice. It outlines procedures for reinstating your driving privileges and pertaining to judicial review and/or driving relief permits.



This suspension is authorized by the Director of the Driver Services Department, Office of the Secretary of State.

Confirmation of Statutory Summary Suspension entered on date indicated above and filed in the Driver Services Department of the Office of the Secretary of State and the Confirmation of Statutory Summary Suspension mailed to the person named herein.

IMPORTANT - READ CAREFULLY

1. **PETITION FOR JUDICIAL REVIEW:** You have the right to petition for judicial review within 90 days after the Notice of the Statutory Summary Suspension served under 11-501.1. Petitions must be filed in writing and submitted to the Clerk of the Circuit Court of the County shown on the front of the Confirmation of Statutory Summary Suspension. The petition must state which issue(s) listed below you are using as grounds upon which to have the Summary Suspension rescinded. The hearing will be limited to the issue(s) specified in the petition.
 - a. Whether you were lawfully placed under arrest for violation of Section 11-501, or a similar provision of a local ordinance relating to driving while under the influence of alcohol, other drug or drugs, intoxicating compound or compounds or any combination thereof;
 - b. Whether the arresting officer had reasonable grounds to believe that you were driving or in actual physical control of a motor vehicle while under the influence of alcohol, other drug or drugs, intoxicating compound or compounds or any combination thereof;
 - c. Whether you were advised of your rights under Section 11-501.1 of the Illinois Vehicle Code;
 - d. Whether you refused the test or tests, or whether you submitted to a test that indicated an alcohol concentration of 0.08 or more.

2. **REINSTATEMENT INFORMATION:** Full driving privileges will not be restored until:
 - a. The expiration of the period designated on the front side of this Confirmation of Statutory Summary Suspension or expiration of additional period of time as directed by the court or by statute;
 - b. Illinois Law requires a fee for driver's license reinstatement for a Statutory Summary Suspension. To assure the timely restoration of your driving privileges, please submit the reinstatement fee at least 45 days prior to the provisional termination date of suspension. Please follow the instructions below.

A \$250.00 REINSTATEMENT FEE IS REQUIRED FOR THE FIRST STATUTORY SUMMARY SUSPENSION IF YOU HAVE NO PRIOR CONVICTIONS FOR DUI OR RECKLESS HOMICIDE.

A \$500.00 REINSTATEMENT FEE IS REQUIRED FOR THE SECOND OR SUBSEQUENT STATUTORY SUMMARY SUSPENSION OR A PRIOR CONVICTION FOR DUI OR RECKLESS HOMICIDE.

Please do not send cash.

Write your driver's license number on the check or money order.

Make the check or money order payable to: SECRETARY OF STATE and send to:

DRIVER SERVICES DEPARTMENT
2701 South Dirksen Parkway
Springfield, Illinois 62723

If you wish to pay your reinstatement fee by charging it to a credit card, please follow the information on the enclosed sheet.

3. **MONITORING DEVICE DRIVING PERMIT (MDDP):**

If you are 18 years of age or older, and a "first offender" as defined in Section 11-500 of the Illinois Vehicle Code, you may be eligible for a Monitoring Device Driving Permit (MDDP) to drive during your Statutory Summary Suspension. A MDDP shall not become effective prior to the 31st day of the Statutory Summary Suspension. If you are eligible for this permit, you will receive notice from this office in a separate mailing. For more information, please visit our website www.cyberdriveillinois.com.



OFFICE OF THE SECRETARY OF STATE

01/16/13

JESSE WHITE • Secretary of State

BRITTANY N BLACK
2364 N LINCOLN AVE APT 3
CHICAGO IL 60614

B420-0748-7810

DEAR MS. BLACK:

As a first time DUI offender in Illinois, you have automatically been enrolled in the Secretary of State's Monitoring Device Driving Permit (MDDP) program, which under certain circumstances will allow you to drive during your statutory summary suspension (except the first 30 days of the suspension). An MDDP allows you to drive 24 hours per day, seven days a week, as long as you have a Breath Alcohol Ignition Interlock Device (BAIID) installed on the vehicle you are driving.

While a preliminary check of your driving record indicates that you are eligible for an MDDP, a more detailed inquiry will be made upon receipt of your application. You will be deemed ineligible if you fall into any of the following categories:

1. Under age 18;
2. Previously convicted of reckless homicide or aggravated DUI involving death;
3. Driving privileges are otherwise invalid; or
4. Death or great bodily harm resulted from your DUI arrest.

A commercial driver's license (CDL) holder may be eligible for an MDDP to drive a **non-commercial motor vehicle** but **may not** operate a commercial motor vehicle with an MDDP.

Application/MDDP Issuance

In order to process your MDDP, please return in the envelope provided the application on page 2 of this letter by 03/03/13.

Upon receipt of your application, the Secretary of State's office will send you a detailed requirements letter and a form with the terms and conditions of the program.

Upon satisfaction of the requirements, your MDDP will be issued. At that time, you will have 14 days in which to have a BAIID installed on every vehicle you will be driving during your suspension.

Employment Exemption

If you need to drive an employer-owned vehicle during work hours and the vehicle is not specifically assigned to you, you may be eligible for an employer exemption. While you would still be required to operate your personal vehicles only if equipped with a BAIID, the MDDP would allow you to drive employer-owned vehicles without a BAIID during work hours. Employment information must be verified with your employer before an employment exemption is granted. **You will not be eligible for this exemption if you are self-employed, work for an immediate family member or are allowed to use work vehicles for personal use.**

Indigency

You may be eligible for a partial waiver of fees for the MDDP program based on your income level. A partial waiver of fees will be granted to those who submit proof that their income level is 150 percent of poverty level. Please mark the appropriate box on the application if you wish to be considered for indigency.

Cost of Program

By law, you are required to pay a \$30 per month monitoring fee, plus an \$8 permit fee to the Secretary of State. This fee must be paid in full before your MDDP is issued. Total fees owed will be included in the requirements letter. These fees must be paid even if you are declared indigent.

BAIID Vendors

There are seven vendors in Illinois that provide BAIIDs. These vendors charge a fee for the installation and monitoring of the BAIID. Each vendor sets its own fees. You are encouraged to make contact with all the vendors before choosing one. Vendor names and contact information is available at www.cyberdriveillinois.com (click Departments, BAIID).

Opting Out of the Program

You may choose to not participate in the MDDP program. However, you must complete an opt-out form in front of a judge during one of your court appearances for the DUI ticket. **If you opt out of the MDDP program, you may not legally drive a motor vehicle.** If you choose to not participate and you are subsequently caught driving a vehicle during your suspension, you will be charged with a Class 4 felony. Penalties include possible imprisonment of 1-3 years, a minimum 30 days in jail or 300 hours of community service, and fines of up to \$25,000.

For more information, please call the Secretary of State's BAIID Division at 217-524-0660 or visit www.cyberdriveillinois.com.

MDDP Program Application PLEASE PRINT LEGIBLY

DLN#: _____

Name: _____

Street Address: _____

City/State/ZIP: _____

☐ Yes, please continue processing my MDDP so that I may drive during my suspension.

☐ Yes, I would like to be considered for the indigency program.

☐ Yes, I would like to be considered for an employment exemption. I understand this means you will contact my employer about my suspension and possible permit:

Employer: _____

Contact Person: _____

Street Address: _____

City/State/ZIP: _____

Telephone Number: _____

Mail to: BAIID Division, IL Secretary of State, 211 Howlett Bldg., Springfield, IL 62756

IN THE CIRCUIT COURT FOR THE SIXTH JUDICIAL CIRCUIT
MACON COUNTY, ILLINOIS

THE PEOPLE OF THE STATE OF ILLINOIS,
vs.

Brittany N. Black

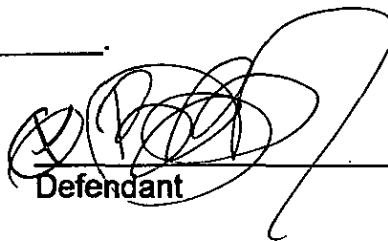
FILED
No. 12DT578
MAR 14 2013

LOIS A. DURBIN
CIRCUIT CLERK

NOTICE REGARDING COMMUNITY SERVICE WORK

- You must report to the probation office after leaving court. It is located on the 7th Floor of the Macon County Office Building at 141 S. Main Street in Decatur (the building across from the KFC restaurant as you walk out of the courthouse).
- The Probation Office will provide you with a list of approved places where you may perform community service.
- When you come back to court for review of your community service hours, you **must** bring proof of your hours **from the probation office**. Proof from anyone else will not be accepted – it must come from Probation.
- Failure to perform your community service at a place approved by the Probation Office may result in your hours not being recognized by the Court.

I acknowledge that I have received a copy of this Notice Regarding Community Service Work in open court on 3-14-13.


Defendant

White Copy – Court File

Yellow Copy - Defendant

12DT578

TRAFFIC COURT PROCEDURE

FILED

MAR 14 2013

**LOIS A. DURBIN
CIRCUIT CLERK**

- 1) Answer to your name when it is called.
- 2) Come to the front in the order that your names were called.
- 3) Today is a plea date. Be ready to plead guilty, not guilty, or for a continuance to hire an attorney.
- 4) Once you appear in court on any traffic ticket, you will have a minimum of \$74 court costs and fines from \$1 to \$1000. If you are found guilty at a trial, court costs will increase at least \$40.
- 5) If you need time to pay, you must ask the Court for a continuance to a specific date.
- 6) If you have not paid before that date, a warrant will issue for your arrest or the Secretary of State will be informed that you have not paid and you will not be able to renew your driver's license until it is paid. You may make partial payments any time before your payment date.
- 7) If you refuse to pay any fines and costs, you could be held in contempt of court and receive up to a 30-day jail sentence.
- 8) All traffic fines and court costs to be paid at the bookkeeping counter in the Circuit Clerk's Office.

CONSTITUTIONAL RIGHTS ALL DEFENDANTS HAVE IN TRAFFIC COURT

- I. The right to an attorney at all stages of the trial and sentence hearing.
- II. The right to a public defender if you are found too poor to hire an attorney and you are facing a possible jail sentence.
- III. The right to a jury trial where a jury of 6 or 12 determine whether you are guilty or not guilty, or the right to a bench trial where the Judge decides your case without a jury being present.
- IV. The right to demand the State of Illinois prove you guilty beyond a reasonable doubt.
- V. The right to be presumed not guilty at all stages of the trial.
- VI. The right to cross-examine or question the State's witnesses.
- VI. The right to present any defenses you might have through your testimony or your witnesses' testimony.
- VIII. The right to force your witnesses to Court by a subpoena (to be issued at the traffic counter at your request.)
- IX. The right to remain silent at a trial which means no one can force you to take the witness stand.
- X. The right to appeal any finding or guilty or fine or jail sentence imposed.
- XI. The right to be tried and sentenced in your absence should you fail to appear at your trial.

I HAVE READ THE ABOVE INSTRUCTIONS AND STATEMENT OF RIGHTS AND I DO UNDERSTAND THEM AND:

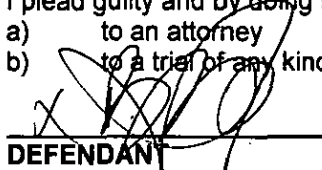
- 1) I plead not guilty and request a jury trial

DEFENDANT

- 2) I plead not guilty and knowingly and voluntarily waive my right to a jury trial.

DEFENDANT

- 3) I plead guilty and by doing so freely, voluntarily and knowingly waive my right
 - a) to an attorney
 - b) to a trial of any kind



DEFENDANT

CIRCUIT COURT OF ILLINOIS
SIXTH JUDICIAL CIRCUIT
MACON COUNTY

FILED

MAR 14 2013

THE PEOPLE OF THE
STATE OF ILLINOIS

OFFENSE(S)

D. V. T.
LOIS A. DURBIN
CIRCUIT CLERK

VS.

BLACK, BRITTANY

CASE NO.

12 DT

578

CERTIFICATE OF CONDITIONS

Now on the 14th day of March, 2013, it is hereby ordered that the Defendant be sentenced to:

- ☐ Probation ☐ Conditional Discharge ☒ Court Supervision
☐ First Offender Cannabis Probation (720 ILCS 550/10)
☐ First Offender Controlled Substance Probation (720 ILCS 570/410)

for a period of 18 months, commencing this date, subject to the following conditions:

Appear on _____ at _____ in Courtroom _____ for the purpose of reviewing compliance with this certificate of conditions.

Pay monies as follows to Macon County Circuit Clerk's Office:

- ☒ probation services fee \$25.00 per month; however, after having determined the inability of the person sentenced to pay the fee, the Court assesses \$ _____ per month.
☐ restitution \$ _____ ☒ fine \$ 500
☒ court costs as per statute Plus self-defense fees ☐ work release fee \$ _____
☐ street-value fine \$ _____ + costs ☒ mandatory assessment \$ 750 + \$100
☐ laboratory fee \$ _____ ☐ incarceration credit \$ _____ + \$500
☐ DNA fee \$250.00 ☐ Public Defender Reimbursement \$ _____

TO BE PAID IN EQUAL MONTHLY INSTALLMENTS. PAYMENT IN FULL DUE ON OR BEFORE _____

1. Not violate any criminal statute of any jurisdiction.
2. Report to attend and participate in any assessment, counseling, treatment, or educational programs as directed by the Court and/or the Probation Office.
3. Not Possess a firearm or other dangerous weapon.
4. Refrain from leaving the State without the consent of the Probation Office unless in circumstances of an emergency nature where prior consent by the Probation Office is not possible.
5. Permit the Probation Officer to visit your home or elsewhere, submit to searches of your person, residence, automobile, and/or effects at any time such requests are made by the Probation Officer and consent to the use of anything seized as evidence in a court proceeding.
6. Notify the Probation Office within 72 hours of any change in address or employment status.

BAB
INITIAL

7. Refrain from using cannabis and controlled substances; submit to random bodily fluid and/or breath testing as directed by the Probation Office; reimburse the Macon County Probation and Court Services Department for the cost of said testing payable to the Circuit Clerk of Macon County.

Compliance is further ordered for the following additional conditions:

- ☐ 8. Work or pursue a course of study or vocational training as directed by the Probation Office.
- ☒ 9. Perform 100 hours of Public Service Work as directed by the Probation Office.
- ☐ 10. Serve a period of incarceration of _____ days in the Macon County Jail, ☐ with credit for _____ days heretofore served. ☐ Work Release ordered.
- ☐ 11. Serve a period of home confinement with approved monitoring device for _____ days or until _____ Pay reimbursement to Macon County Circuit Clerk's Office for cost of said monitoring at a rate of \$ _____ per day.
- ☐ 12. Have no contact directly or indirectly with _____ and/or not go upon or around a property located at _____.
- ☐ 13. Undergo an evaluation for:
- | | | |
|--|---|---|
| ☐ Substance Abuse Treatment | ☒ D.U.I. Education <u>10/1/13</u> | ☐ DNA Indexing |
| ☐ Sex Offender Treatment | ☒ D.U.I. Treatment <u>2/6/13</u> | ☐ T.A.S.C., Inc. program |
| ☐ Mental Health Treatment | ☒ Victim Impact Panel | ☐ Other _____ |

as directed by the Probation Office, court-ordered program, and/or treatment program; comply with all rules and recommendations and sign any release of information form necessary to monitor compliance. File written proof of completion of any ordered evaluation and/or proof of successful completion of any recommended treatment at the Macon County Circuit Clerk's Office on or before _____.

- ☐ 14. Undergo medical testing for sexually transmittable disease pursuant to 730 ILCS 5/5-5-3(g).
- ☒ 15. Refrain from using alcohol.
- ☐ 16. Cooperate with the Department of Children and Family Services.
- ☐ 17. Register as a convicted sex offender pursuant to the Illinois Sex Offender Registration Act
- ☐ 18. Probation is to be served on Sex Offender Probation under the additional conditions as provided by Court Services.
- ☒ 19. Other: All Conditions completed w/i 9 MONTHS

Conditions of transfer of Probation or Conditional Discharge to another state: a) make provisions for the payment of restitution, b) Pay \$125 administrative fee to the Macon County Circuit Clerk, c) acceptance of transfer by receiving state pursuant to Interstate Commission of Adult Offender Supervision.

A violation of any of the above rules or conditions will subject you to further Court action which could result in: (a) extension of your sentence; (b) modification of the rules and conditions; (c) the imposing of additional conditions; (d) being held in contempt of Court with imposition of sanction; or (e) revocation and sentencing on the charge(s) of which you were found guilty.

Date 3-19-13 ENTER [Signature], Judge

I hereby certify that I have read and received a copy of the above Order, understand same and agree to fully follow and comply with each and every condition thereof.

Date 3-14-13 SIGNED [Signature], Defendant

REPORT IMMEDIATELY OR UPON RELEASE FROM CUSTODY TO THE MACON COUNTY PROBATION AND COURT SERVICES DEPARTMENT AT 141 S. MAIN ST DECATUR, ILLINOIS.

IN THE CIRCUIT COURT FOR THE SIXTH JUDICIAL CIRCUIT
MACON COUNTY, ILLINOIS

FILED

JAN 10 2014

PEOPLE OF THE STATE OF ILLINOIS,
Plaintiff,

vs.

BRITTANY N. BLACK,
Defendant.

No. 2012-DT-578

Hon. R.C. Bollinger,
Sentencing Judge

**LOIS A. DURBIN
CIRCUIT CLERK**

FIRST PETITION CHARGING VIOLATION OF SUPERVISION

The undersigned assistant state's attorney of Macon County, Illinois, reports to the Court that the Defendant pleaded guilty to the crime of Driving Under the Influence of Alcohol and was admitted to court supervision on March 14, 2013 for a period of 18 months, and that the Defendant has violated the conditions of court supervision, in that:

1. Defendant failed to provide verification of having completed 20 hours Substance Abuse Treatment within the first 9 months as directed; and
2. Defendant failed to provide verification of having completed 100 hours of community service within the first 9 months as directed.

I therefore request that the Court conduct a hearing and if the Court finds that the Defendant has violated the conditions of court supervision, that the Court enter an order either continuing the Defendant on the existing sentence with or without modified or enlarged conditions, or revoking the court supervision sentence and entering a judgment of conviction, or imposing any other appropriate sentence that was available at the time of the original sentencing.

Dated: JANUARY 10, 2014

THE PEOPLE OF THE STATE OF ILLINOIS

By: 

Assistant State's Attorney

FILED

JAN 14 2014

LOIS A. DURBIN
CIRCUIT CLERK

State of Illinois
In the Circuit Court of Judicial Circuit #6
Macon County

PEOPLE
VS.
BLACK, BRITTANY N

P 001 }
D 001 }

Case number: 2012-DT-000578

Notice to:

COPY

BLACK, BRITTANY N
2311 GALEN DR

APT #13

CHAMPAIGN, IL 61831-0000

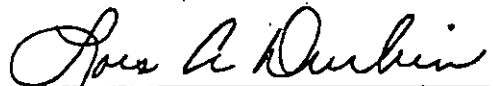
Take notice that the following entry was made on Friday, January 10, 2014

Judicial Clerk receives email communication from the State's
Attorney's Office.

Cause allotted for arraignment on the First Petition Charging
Violation of Supervision.

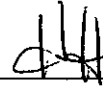
Arraignment set for 2/26/2014 at 08:30 in courtroom 2A.

CLERK DIRECTED to send notice to the Defendant.



Circuit Clerk, Lois A Durbin

This notice issued on Tuesday, January 14, 2014.



Deputy

FILE COPY

HMH

**MACON COUNTY
PROBATION AND COURT SERVICES**



FILED
APR 09 2014
LOIS A. DURBIN
CIRCUIT CLERK

"EFFECTIVE INTERVENTION & COMMUNITY PROTECTION"

MEMORANDUM

TO: CIRCUIT CLERK'S FILE

_____, **ADULT/JUVENILE P.O.**

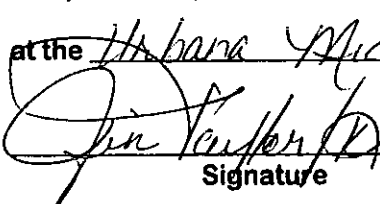
FROM: COMMUNITY SERVICE COORDINATOR

RE: COMMUNITY SERVICE

CASE #: 12DT578

COURT DATE: _____

Please be advised that Brittany N. Black has successfully
completed 100 of 100 Hours of Public/Community Service. Hours performed
at the Habana Middle School.


Signature

2/26/14
Date

White - Court

Yellow - Defendant

STATE OF ILLINOIS)
COUNTY OF MACON)

SIXTH JUDICIAL CIRCUIT COURT

FILED

NOV 06 2014

**LOIS A. DURBIN
CIRCUIT CLERK**

THE PEOPLE OF THE STATE

OF ILLINOIS

vs.

Brittany N. Black

CRIMINAL NO. 12-DT-00578

REPORT OF DISCHARGE FROM SUPERVISION

The undersigned Supervision Officer of this Court respectfully reports:



Completion of Supervision

That the period of supervision has expired and no petition charging a violation of the conditions of supervision is pending before the court.

— **Completion of Supervision (Unpaid Balance)**

That the period of supervision has expired, and no petition charging a violation of a condition of supervision is pending before the court.

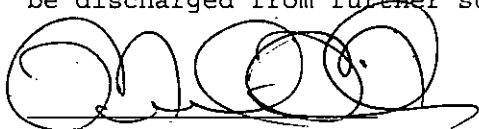
— **Early Discharge of Supervision**

That the defendant has complied with the terms of the supervision sentence and early termination of supervision is appropriate in this case.

— **Other Termination**

Reason:

Therefore the undersigned respectfully recommends that said defendant be discharged from further supervision.



Marlane L. Miles
Adult Probation Officer

FILED

NOV 07 2014

LOIS A. DURBIN
CIRCUIT CLERK

STATE OF ILLINOIS)
COUNTY OF MACON)

SIXTH JUDICIAL CIRCUIT COURT

THE PEOPLE OF THE STATE

OF ILLINOIS

vs.

Brittany N. Black

CRIMINAL NO. 12-DT-00578

ORDER OF DISCHARGE FROM SUPERVISION

This cause comes on for hearing on the Report of Discharge from Supervision, and the Court being fully advised in the premises

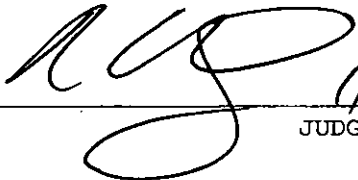
ORDERS:

☒ That the defendant is discharged from supervision, and the judgment for payment of fines, fees, and costs is satisfied. Cause dismissed.

— That supervision is dismissed, but the defendant may be subject to civil contempt for default in payment of fines, fees, or costs.

ENTER

JUDGE

 11-7-14