

STATE OF OHIO FIELD ARREST/SUMMONS FORM NO216031
COUNTY OF SUMMIT VS 05-24189

DEFENDANT'S NAME LAST FIRST MIDDLE
COLEFIDGE GREGORY D.

ADDRESS STREET CITY STATE ZIP
521 BINA AV AKRON OH 44314

OPERATOR'S LICENSE - STATE PHONE
RT731986 OH 330-253-7151

DOB (MM/DD) AGE SEX RACE HT WT HAIR EYES CITIZEN YES NO
7-2-57 46 M W 411 95 1 BKO YES [X] NO []

BIRTH PLACE MARITAL STATUS OCCUPATION EMPLOYED BY
AKRON S PROB. DIR. AFSC

W-W CHECKS - LOCAL LEADS/NCIC BY OFFICER
[X] [X] 0510RR09586

W-W HITS LOCAL YES NO LEADS/NCIC YES NO
[] [X] [] [X]

W-W HITS CONFIRMED UNABLE TO CONFIRM
[] []

CHARGES CODE CASE NUMBER
1. PROSTITUTION 133.07

THE UNDERSIGNED SWEARS THAT THE ABOVE NAMED DEFENDANT ON
THE 17 DAY OF Aug YEAR 2005 AT 1538 O'CLOCK P M
AT (LOCATION) UNDERWOOD @ TRIPLETT
DID: (NARRATIVE - BE SPECIFIC)-ACCIDENT []

ENGAGE IN SEXUAL ACTIVITY FOR
HIFE.

swear that the above statement is correct and true to the best of my knowledge and belief
Woodrow 1016 / DUBAKER 160

Officer's name / ID No. (PLEASE PRINT) Officer's Signature / ID No.
Sworn to and subscribed before me, the undersigned authority, this 17 day of August in the year 2005

[X] ARREST
[] SUMMONS COMPLETE THE FOLLOWING: Deputy Clerk of Court or Notary Public

SUMMONS TO THE DEFENDANT

YOU ARE SUMMONED AND ORDERED TO APPEAR AT: ROOM 740
THE AKRON MUNICIPAL COURT, 217 S. HIGH ST., AKRON, OH 44308
IF YOU FAIL TO APPEAR AS DIRECTED, YOU MAY BE ARRESTED
DEFENDANT COPY

COURT DATE (M/D/Y) TIME
1 PM