

Date of Violation 4-10-19		Time 3:00		<input type="checkbox"/> AM <input checked="" type="checkbox"/> PM		Day of the Week S M T <u>W</u> T F S		<input type="checkbox"/> CHP 215 <input type="checkbox"/> Accident	
Name (First, Middle, Last) SAMIR NADER SHOMAN						<input type="checkbox"/> Owner's Responsibility (\$40001 VC)			
Address 4330 REVEL LANE									
City SACRAMENTO		State CA		ZIP Code 95827					
Driver Lic. No. F4489729		State/Country CA/USA		Commercial <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Age 21		Birth Date 9-3-96	
Sex M	Hair BLK	Eyes BRN	Height 6-01	Weight 180	Race / Ethnicity O				
Veh. Lic. No. or VIN No. 80WM472				State CA		Reg. Exp. 3/20		<input type="checkbox"/> COMMERCIAL VEHICLE (\$15210(b) VC)	
Yr. of Veh. 13	Make BMW	Model 850	Body Style CAR	Color WHI	Veh. Type 01		<input type="checkbox"/> HAZARDOUS MATERIAL (\$353 VC)		
Evidence of Financial Responsibility or CHP / DOT / PUC / ICC CALICO									
Registered Owner or Lessee <input checked="" type="checkbox"/> Same as Driver									
Address <input checked="" type="checkbox"/> Same as Driver									
City		State		ZIP Code					

Correctable Violation (\$40610 VC)		<input type="checkbox"/> Booking Required (See Reverse)		Misdemeanor or Infraction (Circle)	
Yes	No	Code and Section	Description		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	26708(a) VC - TINTED	WINDSHIELD		
<input type="checkbox"/>	<input type="checkbox"/>		M I		
<input type="checkbox"/>	<input type="checkbox"/>		M I		
<input type="checkbox"/>	<input type="checkbox"/>		M I		

Speed Approx.	P. F. / Max Spd.	Veh. Lmt.	Safe	Special
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Location of Violation(s)  
at: 4550 E/B @ HOWE AVE

Beat 151	Area 301	Perm. Area 252	<input type="checkbox"/> Radar / Lidar Unit / Patrol Vehicle No.	<input type="checkbox"/> MVARs
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☐ Violations not committed in my presence, declared on information and belief.

I declare under penalty of perjury under the laws of the State of California the foregoing is true and correct.

Executed at (place): SAC Co., California

Dec. Date 4-10-19	Arresting or Citing Officer W. NGUYEN	I. D. No. 15718	Vacation Dates
Dec. Date	Name of Arresting Officer, if different from Citing Officer	I. D. No.	Vacation Dates

WITHOUT ADMITTING GUILT, I PROMISE TO APPEAR AT THE TIME AND PLACE INDICATED BELOW.

X SIGNATURE

WHEN: DATE: 4-10-19 TIME: ☐ AM ☐ PM

WHAT TO DO: FOLLOW THE INSTRUCTIONS ON THE REVERSE

WHERE: ☒ SUPERIOR COURT ☐ JUVENILE

ADDRESS: 301 BICENTENNIAL CIRCLE, SAC

PHONE NO.: (916) 875-7800

☐ To be notified

☐ You may arrange with the clerk to appear at a night session of the court.

Judicial Council of California Form TR-130  
Rev. 06-26-15 (§§ 40500(b), 40513(b), 40522, 40600 VC; § 853.9 PC.)

\* JD 04559 \*

100-443884-100

(Circle One)

RIGHT OR  
LEFT  
THUMBPRINT

