

☒ MISDEMEANOR  
☒ Traffic ☐ Nontraffic

CA 32574

Date of Violation 01/14/16	Time 8:00	<input checked="" type="checkbox"/> AM <input type="checkbox"/> PM	Day of the Week S M T W T F S	<input type="checkbox"/> CHP 215s <input type="checkbox"/> Accident
Name (First, Middle, Last) GRANT ALAN SHACKELFORD				<input type="checkbox"/> Owner's Responsibility (\$40001 VC)

Address  
5101 PINEBROOK WAY

City  
SACRAMENTO

State  
CA

ZIP Code  
95842

Driver Lic. No.  
N8441632 (SUS)

State  
CA

Commercial  
☐ Yes ☒ No

Age  
12/01/61

Sex  
M

Hair  
BRN

Eyes  
BRN

Height  
6-00

Weight  
200

Race/Ethnicity  
W

Veh. Lic. No. or VIN No.  
8352RDP

State  
CA

Reg Exp.  
06/15

☐ COMMERCIAL VEHICLE (\$15210(b) VC)

Yr. of Veh.  
05

Make  
FORD

Body Style  
FOCUS

Color  
GRN

Veh. Type  
01

☐ HAZARDOUS MATERIAL (\$353 VC)

Evidence of Financial Responsibility or CHP/DOI/PUC/ICC  
NONE

Registered Owner or Lessee  
KRISTEN D. SHACKELFORD

☐ Same as Driver

Address  
7776 S. OAK WAY

☐ Same as Driver

City  
SACRAMENTO

State  
CA

ZIP Code  
95831

Correctable Violation ( §40510 VC) ☐ Booking Required (See Reverse) ☐ Misdemeanor or Infraction (Circle)

Yes	No	Code and Section	Description	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	5204(a) VC	- REG TABS NOT CURRENT	M 1
<input type="checkbox"/>	<input checked="" type="checkbox"/>	14601.1(a) VC	- SUS. DL	M 1
<input type="checkbox"/>	<input checked="" type="checkbox"/>	16028(a) VC	- No PROOF INSURANCE	M 1
<input type="checkbox"/>	<input type="checkbox"/>			M 1

Speed Approx. ☐ P.F./Max Spd. ☐ Veh. Limit. ☐ Safe ☐ Special ☐

Location of Violation(s)  
at: STOCKTON BLVD N/B S/O F JENSEN DR.

Beat 73 Area 302 Perm. Area 252 ☐ Radar/Lidar Unit/Patrol Vehicle No. ☒ MVARs

☐ 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 01/14/16 Arresting or Citing Officer B. VICENTE I.D. No. 18598 to Vacation Dates

Dec. Date Name of Arresting Officer, if different from Citing Officer I.D. No. to Vacation Dates

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

X SIGNATURE

WHEN: DATE: 01/18/16 TIME: ☒ AM ☐ PM

WHAT TO DO: FOLLOW THE INSTRUCTIONS ON THE REVERSE

WHERE: 301 BICENTENNIAL CIR ☒ SUPERIOR COURT ☐ JUVENILE

ADDRESS: SAC, CA 95826

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.) SEE REVERSE



CA32574

CA 32574