



COMPLAINT/ARREST AFFIDAVIT

POLICE CASE NO. 2008-0108-22

CONTINUATION

COURT CASE NO.

CS NO.	AGENCY CODE 07	MUNICIPAL PD DEF ID NO.	MOPO RECORDS AND ID NO.					
DEFENDANT'S NAME (LAST, FIRST, MIDDLE) AJUSTE RICARDO			DOB (MM/DD/YYYY)					
ADDITIONAL CO-DEFENDANT NAME (Last, First, Middle)		DOB (MM/DD/YYYY)	<input type="checkbox"/> IN CUSTODY <input type="checkbox"/> FELONY <input type="checkbox"/> JUVENILE <input type="checkbox"/> AT LARGE <input type="checkbox"/> DV <input type="checkbox"/> MISDEMEANOR					
ADDITIONAL CO-DEFENDANT NAME (Last, First, Middle)		DOB (MM/DD/YYYY)	<input type="checkbox"/> IN CUSTODY <input type="checkbox"/> FELONY <input type="checkbox"/> JUVENILE <input type="checkbox"/> AT LARGE <input type="checkbox"/> DV <input type="checkbox"/> MISDEMEANOR					
ADDITIONAL CHARGES	CHARGE AS	COUNTS	FL STATUTE NUMBER	VIOL OF SECT	CODE OF	UCR	DV	WARRANT TYPE OR TRAFFIC CITATION
5	<input type="checkbox"/> F.S. <input type="checkbox"/> ORD							<input type="checkbox"/> AC <input type="checkbox"/> CAPIAS <input type="checkbox"/> BW <input type="checkbox"/> FW <input type="checkbox"/> PW <input type="checkbox"/> JUV PU <input type="checkbox"/> AW <input type="checkbox"/> DWV <input type="checkbox"/> WRIT CASE #:
6	<input type="checkbox"/> F.S. <input type="checkbox"/> ORD							<input type="checkbox"/> AC <input type="checkbox"/> CAPIAS <input type="checkbox"/> BW <input type="checkbox"/> FW <input type="checkbox"/> PW <input type="checkbox"/> JUV PU <input type="checkbox"/> AW <input type="checkbox"/> DWV <input type="checkbox"/> WRIT CASE #:
7	<input type="checkbox"/> F.S. <input type="checkbox"/> ORD							<input type="checkbox"/> AC <input type="checkbox"/> CAPIAS <input type="checkbox"/> BW <input type="checkbox"/> FW <input type="checkbox"/> PW <input type="checkbox"/> JUV PU <input type="checkbox"/> AW <input type="checkbox"/> DWV <input type="checkbox"/> WRIT CASE #:
8	<input type="checkbox"/> F.S. <input type="checkbox"/> ORD							<input type="checkbox"/> AC <input type="checkbox"/> CAPIAS <input type="checkbox"/> BW <input type="checkbox"/> FW <input type="checkbox"/> PW <input type="checkbox"/> JUV PU <input type="checkbox"/> AW <input type="checkbox"/> DWV <input type="checkbox"/> WRIT CASE #:

Took aim, and shot at the two vict's who were still inside the vehicle. V#1 was shot in the shoulder. V#1 & V#2 exited the vehicle & began to run fearing for their lives. The def followed after V#1 & continued shooting at him. Officers in the area responded to the scene after hearing multiple gun shots. They observed the def, who matched the description of the shooter. The def was running from the scene, and ran from officers as they approached him. The def was stopped & brought back to NMBPD where he made several different statements to investigators. Photographic line ups were prepared & shown to several witnesses in the area, as well as the two vict's. The def was positively identified by V#2 & tentatively identified by V#1. The def placed himself in the area @ the time of the shooting, but denied being the shooter. The def was placed under arrest & transported to DCJ. PAGE 2 OF 2

HOLD FOR OTHER AGENCY Name:	VERIFIED BY	<input type="checkbox"/> HOLD FOR BOND HEARING DO NOT BOND OUT (Officer Must Appear at Bond Hearing)	<input type="checkbox"/> I understand that should I willfully fail to appear before the court as required by this notice to appear that I may be held in contempt of court and a warrant for my arrest shall be issued. Furthermore, I agree that notice concerning the time, date, and place of all court hearings should be sent to the above address. I agree that it is my responsibility to notify Clerk of the Court (Juvéniles notify Juvenile Division) anytime that my address changes.
I SWEAR THAT THE ABOVE STATEMENT IS TRUE AND CORRECT	195 (07)	SWORN TO AND SUBSCRIBED BEFORE ME.	<input type="checkbox"/> You need not appear in court, but must comply with the instructions on the reverse side hereof
OFFICER'S / COMPLAINANT'S SIGNATURE STEIN, M	COURT ID NUMBER/LOC. CODE NMBPD	THE UNDERSIGNED AUTHORITY THIS DAY OF _____	Signature of Defendant / Juvenile and Parent or Guardian
NAME (Printed)	AGENCY NAME	Deputy of the Court or Notary Public	

COMPLAINT/ARREST AFFIDAVIT CONTINUATION - COURT COPY