CRIMINAL COMPLAINT
Commonwealth of Virginia

Print ALL information clearly:

Middlesex
CITY OR COUNTY

X General District Court

☐ Juvenile and Domestic Relations District Court

Under penalty of perjury, I, the undersigned Complainant swear or affirm that I have reason to believe that the Accused committed a criminal offense, on or about

DATE OFFENSE OCCURRED

in the ☐ City X County ☐ Town

OF **Middlesex**

I base my belief on the following facts:
Section 4.01(1) a. Nuisance animals/ To fail to exercise proper care and control of his/her animal to prevent it from becoming a public nuisance.

The statements above are true and accurate to the best of my knowledge and belief.

In making this complaint, I have read and fully understand the following:

- By swearing to these facts, I agree to appear in court and testify if a warrant or summons is issued.
- The charge in this warrant cannot be dismissed except by the court, even at my request.

NAME OF COMPLAINANT (LAST, FIRST, MIDDLE)

SIGNATURE OF COMPLAINANT

Subscribed and sworn to before me this day.

DATE AND TIME

☐ CLERK ☐ MAGISTRATE ☐ JUDGE

DC-311 10/97 (114:6-010 5/99)

CRIMINAL COMPLAINT

ACCUSED:
Name, Description, Address/Location

LAST NAME, FIRST NAME, MIDDLE NAME

COMPLETE DATA BELOW IF KNOWN

RACE	SEX	MO	BORN DAY	YR	FT	IN	WGT	EYES	HAIR

SSN