County of:	_ INDIRECT CRIMINAL CONTEMPT COMPLAINT		
Magisterial District:			
Magisterial District Judge Name:	Docket No.		
Address:	Reference Number:		
	Commonwealth of Pennsylvania		
Phone Number:	VS.		
Docket No.			
Date Filed:	Name		
OTN:	Address		

Defendant's Race:	Defendant's Sex:	Defendant's Social Security	Defendant's State Identification No:
		No:	
Defendant's	Defendant's Vehicle Information:		Defendant's Driver's License No:
A.K.A.			
	Plate Number:		State:
	State:		
	Registration Sticker (N	/M/YY)	License Number:
Complaint/Incident	Complaint/Incident Number if other Participants:		UCR/NIBRS Code:
No:	-		

1. Defendant Information:

First	Middle	Last	Suffix (Jr., Sr., etc.)	_	
Address					
City	State		Zip Code		
Sex:		Date of Birth:		Race:	
Defendant's Social Security Number (if known)					
Defendant's State Identification Number:					
Defendant's Driver's License Number: State:				State:	

Defendant's Vehicle Information:	Plate Number:
	State:
	Registration Sticker (mm/yy):
Complaint/Incident Number:	
Complaint/Incident Number if oth	er participants:
UCR/NIBRS Code:	
Defendant's Alias:	
2. District Attorney's Office	
Approved	
Disapproved because	»:
	Attorney Signature:
Date signed:	Attorney Name:
Affiant has the right to initiate a re (Pa.R.Crim.P.506)	eview by the Court of Common Pleas upon disapproval.
3. Affiant's Information	
I,	
Name of Affiant	Officer Badge # ID Dept. or Agency Represented & Political Subdivision
	Agency ORI Originating Agency Case Number

Do hereby state:

1. _____ I accuse the above defendant, who lives at the address set forth above OR

				in		County
ace-Political Subdiv	vision					
On or about				_ at or about		AM / PM
	М	D	YYYY		time	
R At or shout						
At or about	(any of	her date	/time description)			
The	acts con	mmitte	d by the accuse	ed which const	itutes i	ndirect criminal contemp
						f the nature of the offens
charged.)						
A 11 C 1 · 1 ·		1	C			
All of which i	s 1n v10	lation	of			
Title of the Orde	er					
	-					
Docket Number						
County				State		
County				State		
Entered			by			
	Date			Judge's Name		
Plaintiff: First Na						
			Middle Name	Last N	Name	Suffix (Jr., Sr., etc.)

Enter the subsequent history of the Order.

All of which were against the peace and dignity of the Commonwealth of Pennsylvania and contrary to the Act of Assembly, or in violation of

_____ 23 Pa. C.S.§ 6101 et seq.

(Section Subsection of the PA Statute)

Number of Count(s)

_____ Companion criminal charges related to this matter have been filed, namely

- 3. _____ I ask that an arrest warrant be issued and that the defendant be required to answer the charges I have made.
- 4. _____ I verify that the facts set forth in the complaint are true and correct to the best of my knowledge or information and belief.

Name of Affiant

Date

And now, on this date _____

I certify that the complaint has been properly completed and verified. An Affidavit of Probable Cause must be completed in order for a warrant to issue.

Magisterial District

Issuing Authority

SEAL

_____ Arraignment Information

Arrest	DATE:	TIME:
Arraignment	DATE:	TIME:
Incarceration	DATE:	TIME:
Hearing	DATE:	TIME:
Special Conditions	The I The I Prot The I	Defendant shall not abuse, threaten, harass or stalk the victim. Defendant shall have no contact with the victim. Defendant shall comply with all terms and conditions of the ection From Abuse Order. Defendant shall refrain from entering the residence or household ne victim.
Other:		
Committing Authority		Name
Distribution to:		