

BOROUGH OF MOUNT JOY

POLICE DEPARTMENT

21 EAST MAIN STREET/ MOUNT JOY, PA 17552

24 HOUR DISPATCH 717-664-1180 ADMINISTRATION OFFICE 717-653-1650 FAX 717-653-0052

DAILY PRESS RELEASE: September 20, 2018

Blythe Ashmore Cross, 30, of 824 Colony Lane, Mount Joy, PA, was charged on September 2, 2018 with Disorderly Conduct and Harassment when the defendant did with the intent to harass, annoy, or alarm another at 824 Colony Lane, Mount Joy, PA.

Lloyd Jay Ebersole, 50, of 1429 Landisville Road, Manheim, PA, was charged on September 4, 2018 with Disorderly Conduct when the defendant did with the intent to harass, annoy, or alarm another at the 300 block of Marietta Avenue, Mount Joy, PA.

Kile Ritchie, 49, of 530 Creekside Lane, Mount Joy, PA was charged on September 8, 2018 with Public Drunkenness when the defendant did appear in a public place while visibly intoxicated at 32 West Main Street, Mount Joy, PA.

Jordan M Sager, 22, of 844 East Main Street, Mount Joy, PA, was charged on September 8, 2018 with Disorderly Conduct when the defendant did with the intent to harass, annoy, or alarm another at 844 East Main Street, Mount Joy, PA.

Keegan Michael Swisher, 27, of 832 Wood Street, Mount Joy, PA, was charged on September 13, 2018 with Disorderly Conduct when the defendant did with the intent to harass, annoy, or alarm another at 832 Wood Street, Mount Joy, PA.

See attached for copies of Criminal Complaints for additional Arrests.

The information contained in this e-mail, including any attachments, is intended solely for use by the named addressee. If you are not the intended recipient, or a person designated as responsible for delivering such messages to the intended recipient, you are not authorized to disclose, copy, distribute or retain this message, in whole or in part, without written authorization from the Mount Joy Borough Police Department. This e-mail may contain proprietary, confidential or privileged information. If you have received this message in error, please notify the sender immediately. Thank you for your cooperation.

COMMONWEALTH OF PENNSYLVANIA
COUNTY OF: LANCASTER



POLICE CRIMINAL COMPLAINT
COMMONWEALTH OF PENNSYLVANIA
VS.

COPY
(Name and Address)

Magisterial District Number: ~~02-01~~ 02-1-03
Miles Sixty

MDJ: Hon. Scott ALDER

Address: ~~424 South Angle Street~~ 341 Chestnuts
Mount Joy, PA 17552 Columbia, PA 17532

Telephone: (717) ~~659-4575~~ (717) 654-2761

DEFENDANT:

Shawn Paul DEITZEL
First Name Middle Name Last Name: Gen.
17 East Main Street, Apt. 1
Mountville, PA 17554

NCIC Extradition Code Type

- 1-Felony Full
- 2-Felony Ltd.
- 3-Felony Surrounding States
- 4-Felony No Ext.
- 5-Felony Pend.
- A-Misdemeanor Full
- B-Misdemeanor Limited
- C-Misdemeanor Surrounding States
- D-Misdemeanor No Extradition
- E-Misdemeanor Pending
- Distance: _____

DEFENDANT IDENTIFICATION INFORMATION:

Docket Number: _____ Date Filed: 09/17/2018 OTN/LiveScan Number: _____ Complaint/Incident Number: 1809017810 Request Lab Services? YES NO

GENDER: Male Female
DOB: 08/28/1988 POB: Germany
First Name: _____ Middle Name: _____ Last Name: _____ Gen.: _____

AKA: _____

RACE: White Asian Black Native American Unknown

ETHNICITY: Hispanic Non-Hispanic Unknown

HAIR COLOR: GRY (Gray) RED (Red/Aubn.) SDY (Sandy) BLU (Blue) PLE (Purple) BRO (Brown)
 BLK (Black) ONG (Orange) WHI (White) XXX (Unk./Bald) GRN (Green) PNK (Pink)
 BLN (Blonde / Strawberry)

EYE COLOR: BLK (Black) BLU (blue) BRO (Brown) GRN (Green) GRY (Gray)
 HAZ (Hazel) MAR (Maroon) PNK (Pink) MUL (Multicolored) XXX (Unknown)

DNA: YES NO DNA Location: _____ WEIGHT (lbs.): 175

FBI Number: 490919tc1 MNU Number: _____

Defendant Fingerprinted: YES NO Ft. HEIGHT (in.): 5 11

Fingerprint Classification: _____

DEFENDANT VEHICLE INFORMATION

Plate # ZLR-6637 State PA Hazmat Registration Sticker (MM/YY) 03/2019 Comm'l Veh. Ind. School Veh. Oth. NCIC Veh. Code: _____ Reg. same as Def.

VIN 1FTRF14W46NA94258 Year 2006 Make Ford Model F150 Style TK Color Green

Office of the attorney for the Commonwealth Approved Disapproved because: _____

(The attorney for the Commonwealth may require that the complaint, arrest warrant affidavit, or both be approved by the attorney for the Commonwealth prior to filing. See Pa.R.Crim.P. 507).

(Name of the attorney for the Commonwealth)

(Signature of the attorney for the Commonwealth)

(Date)

I, Officer Daniel M Gordon
(Name of the Affiant)
of Mount Joy Borough Police Department
(Identify Department or Agency Represented and Political Subdivision)

MPOETC 43909 / Badge 33603
(PSP/MPOETC -Assigned Affiant ID Number & Badge #)
PA0361000
(Police Agency ORI Number)

Do hereby state: (check appropriate box)

- 1. I accuse the above named defendant who lives at the address set forth above
- I accuse the defendant whose name is unknown to me but who is identified as _____

I accuse the defendant whose name and popular designation or nickname are unknown to me and whom I have therefore designated as John Doe or Jane Doe

with violating the penal laws of the Commonwealth of Pennsylvania at [414] West Hemfield Township
(Subdivision Code) (Place-Political Subdivision)

350 West Main Street, Mountville PA

in Lancaster County [36] on or about 09/15/2018 at 2330 hrs
(County Code)



POLICE CRIMINAL COMPLAINT

Docket Number:	Date Filed: 09/17/2018	OTN/LiveScan Number	Complaint/Incident Number 1809017810
Defendant Name	First: Shawn	Middle: Paul	Last: DEITZEL

The acts committed by the accused are described below with each Act of Assembly or statute violated, if appropriate. When there is more than one offense, each offense should be numbered chronologically.
 (Set forth a *brief* summary of the facts sufficient to advise the defendant of the nature of the offense(s) charged. A citation to the statute(s) allegedly violated, without more, is not sufficient. In a summary case, you must cite the specific section(s) and subsection(s) of the statute(s) or ordinances(s) allegedly violated.

<input type="checkbox"/> Inchoate Offense	<input type="checkbox"/> Attempt 18 901 A	<input type="checkbox"/> Solicitation 18 902 A	<input type="checkbox"/> Conspiracy 18 903
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<input checked="" type="checkbox"/>	1	§ 3802	§§ (a)(1)	of the	75	1	m		
Lead?	Offense #	Section	Subsection	PA Statute (Title)	Counts	Grade	NCIC Offense Code	UCR/NIBRS Code	
PennDOT Data (if applicable)	Accident Number				<input type="checkbox"/> Safety Zone		<input type="checkbox"/> Safety Zone		

Statute Description (include the name of statute or ordinance):
 An individual may not drive, operate or be in actual physical control of the movement of a vehicle after imbibing a sufficient amount of alcohol such that the individual is rendered incapable of safely driving, operating or being in actual physical control of the movement of the vehicle

Acts of the accused associated with this Offense: TO WIT: the above named defendant on the above date, time and location did admitt to officer's that he smoked marijuana before opertating a motor vehicle.

<input type="checkbox"/> Inchoate Offense	<input type="checkbox"/> Attempt 18 901 A	<input type="checkbox"/> Solicitation 18 902 A	<input type="checkbox"/> Conspiracy 18 903
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<input type="checkbox"/>	2	§ 3802	§§ (d)(2)	of the	75	1	m		
Lead?	Offense #	Section	Subsection	PA Statute (Title)	Counts	Grade	NCIC Offense Code	UCR/NIBRS Code	
PennDOT Data (if applicable)	Accident Number				<input type="checkbox"/> Safety Zone		<input type="checkbox"/> Safety Zone		

Statute Description (include the name of statute or ordinance):
 An individual may not drive, operate or be in actual physical control of the movement of a vehicle under any of the following circumstances: The individual is under the influence of a drug or combination of drugs to a degree which impairs the individual's ability to safely drive, operate or be in actual physical control of the movement of the vehicle

Acts of the accused associated with this Offense: TO WIT: the above named defendant on the above date, time and location did admitt to officer's that he smoked marijuana before opertating a motor vehicle. A drug recognition expert was utilized.

<input type="checkbox"/> Inchoate Offense	<input type="checkbox"/> Attempt 18 901 A	<input type="checkbox"/> Solicitation 18 902 A	<input type="checkbox"/> Conspiracy 18 903
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<input type="checkbox"/>	3	§ 1543	§§ (b)(1.1)	of the	75	1	s		
Lead?	Offense #	Section	Subsection	PA Statute (Title)	Counts	Grade	NCIC Offense Code	UCR/NIBRS Code	
PennDOT Data (if applicable)	Accident Number				<input type="checkbox"/> Safety Zone		<input type="checkbox"/> Safety Zone		

Statute Description (include the name of statute or ordinance):
 any person who drives a motor vehicle on any highway or trafficway of this Commonwealth after the commencement of a suspension, revocation or can-cellation of the operating privilege and a person who has an amount of alcohol by weight in his blood that is equal to or greater than .02% at the time of testing or who at the time of testing has in his blood any amount of a Schedule I or nonpre-scribed Schedule II or III controlled substance,

Inchoate Offense	<input type="checkbox"/> Attempt 18 901 A	<input type="checkbox"/> Solicitation 18 902 A	<input type="checkbox"/> Conspiracy 18 903
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<input type="checkbox"/>	4	§ 780-113	§§ (a)(32)	of the	18	1	m		
Lead?	Offense #	Section	Subsection	PA Statute (Title)	Counts	Grade	NCIC Offense Code	UCR/NIBRS Code	

PennDOT Data (if applicable)	Accident Number	<input type="checkbox"/> Safety Zone	<input type="checkbox"/> Safety Zone
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Statute Description (include the name of statute or ordinance):

The use of, or possession with intent to use, drug paraphernalia for the purpose of planting, propagating, cultivating, growing, harvesting, manufacturing, compounding, converting, producing, processing, preparing, testing, analyzing, packing, repacking, storing, containing, concealing, injecting, ingesting, inhaling or otherwise introducing into the human body a controlled substance in violation of this act

Acts of the accused associated with this Offense: TO WIT: the above named defendant on the above date, time and location did possess a small glass smoking pipe in his vehicle.

Inchoate Offense	<input type="checkbox"/> Attempt 18 901 A	<input type="checkbox"/> Solicitation 18 902 A	<input type="checkbox"/> Conspiracy 18 903
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<input type="checkbox"/>	5	§ 780-113	§§ (a)31	of the	18	1	m		
Lead?	Offense #	Section	Subsection	PA Statute (Title)	Counts	Grade	NCIC Offense Code	UCR/NIBRS Code	

PennDOT Data (if applicable)	Accident Number	<input type="checkbox"/> Safety Zone	<input type="checkbox"/> Safety Zone
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Statute Description (include the name of statute or ordinance):

Notwithstanding other subsections of this section, (i) the possession of a small amount of marihuana only for personal use

Acts of the accused associated with this Offense: TO WIT: the above named defendant on the above date, time and location did possess a small amount of marijuana on his person.

Inchoate Offense	<input type="checkbox"/> Attempt 18 901 A	<input type="checkbox"/> Solicitation 18 902 A	<input type="checkbox"/> Conspiracy 18 903
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<input type="checkbox"/>	6	§ 4703	§§ a	of the	75	1	s		
Lead?	Offense #	Section	Subsection	PA Statute (Title)	Counts	Grade	NCIC Offense Code	UCR/NIBRS Code	

PennDOT Data (if applicable)	Accident Number	<input type="checkbox"/> Safety Zone	<input type="checkbox"/> Safety Zone
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Statute Description (include the name of statute or ordinance):

Operation of vehicle without official certificate of inspection
(a) General rule.--Except as otherwise provided in this section, no motor vehicle

Acts of the accused associated with this Offense: TO WIT: the above named defendant on the above date, time and location did operate a motor vehicle with expired inspection from July 2018.

CONFIDENTIAL



**Confidential Information Form
Criminal Complaint**

Complete the defendant's SSN information if known. If this form is submitted as part of a Police Criminal Complaint, the NCIC Cautions/Medical Conditions and Scars/Marks/Tattoos sections should also be completed if known.

Acts of the accused associated with this Offense: TO WIT: the above named defendant on the above date, time and location did operate a motor vehicle with a suspended license while he was under the influence of a controlled substance.



POLICE CRIMINAL COMPLAINT

Docket Number:	Date Filed: 09/17/2018	OTN/LiveScan Number	Complaint/Incident Number 1809017810
Defendant Name	First: Shawn	Middle: Paul	Last: DEITZEL

- I ask that a warrant of arrest or a summons be issued and that the defendant be required to answer the charges I have made.
- I verify that the facts set forth in this complaint are true and correct to the best of my knowledge or information and belief. This verification is made subject to the penalties of Section 4904 of the Crimes Code (18 Pa.C.S. § 4904) relating to unsworn falsification to authorities.
- This complaint consists of the preceding page(s) numbered 1 through 4.
- I certify that this filing complies with the provisions of the *Case Records Public Access Policy of the United Judicial System of Pennsylvania* that require filing confidential information and documents differently than non-confidential information and documents.

The acts committed by the accused, as listed hereafter, were against the peace and dignity of the Commonwealth of Pennsylvania and were contrary to the Act(s) of the Assembly, or in violation of the statutes cited.

(Before a warrant of arrest can be issued, an affidavit of probable cause must be completed, sworn to before the issuing authority, and attached).

Officer Daniel M Gordon

09/17/2018
(Date)

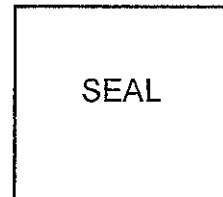
(Signature of Affiant)

AND NOW, on this date _____ I certify that the complaint has been properly completed and verified.

An affidavit of probably cause must be completed before a warrant can be issued.

(Magisterial District Court Number)

(Issuing Authority)



COMMONWEALTH OF PENNSYLVANIA
COUNTY OF: LANCASTER



POLICE CRIMINAL COMPLAINT
COMMONWEALTH OF PENNSYLVANIA
VS.

Magisterial District Number: 02-3-01
MDJ: Hon. Scott ALBERT
Address: 424 South Angle Street
Mount Joy, PA 17552
Telephone: (717) 653-4575

DEFENDANT: (NAME and ADDRESS):
Anthony Charles
First Name Middle Name
1869 Iron Bridge Road
Columbia, Pa 17512
Last Name Gen.

HERETASAGONA
COPY

NCIC Extradition Code Type

- 1-Felony Full 4-Felony No Ext. B-Misdemeanor Limited E-Misdemeanor Pending
 2-Felony Ltd. 5-Felony Pend. C-Misdemeanor Surrounding States Distance: _____
 3-Felony Surrounding States A-Misdemeanor Full D-Misdemeanor No Extradition

DEFENDANT IDENTIFICATION INFORMATION:

Docket Number	Date Filed 09-04-2018	OTN/LiveScan Number	Complaint/Incident Number 1809002949	Request Lab Services? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
GENDER <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	DOB 11-19-1997	POB Pennsylvania	Add'l DOB / /	Co-Defendant(s) <input type="checkbox"/>		
AKA		First Name	Middle Name	Last Name Gen.		
RACE <input checked="" type="checkbox"/> White <input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Native American <input type="checkbox"/> Unknown						
ETHNICITY <input checked="" type="checkbox"/> Hispanic <input type="checkbox"/> Non-Hispanic <input type="checkbox"/> Unknown						
HAIR COLOR	<input type="checkbox"/> GRY (Gray)	<input type="checkbox"/> RED (Red/Aubn.)	<input type="checkbox"/> SDY (Sandy)	<input type="checkbox"/> BLU (Blue)	<input type="checkbox"/> PLE (Purple)	<input type="checkbox"/> BRO (Brown)
	<input checked="" type="checkbox"/> BLK (Black)	<input type="checkbox"/> ONG (Orange)	<input type="checkbox"/> WHI (White)	<input type="checkbox"/> XXX (Unk./Bald)	<input type="checkbox"/> GRN (Green)	<input type="checkbox"/> PNK (Pink)
	<input type="checkbox"/> BLN (Blonde / Strawberry)					
EYE COLOR	<input type="checkbox"/> BLK (Black)	<input type="checkbox"/> BLU (blue)	<input checked="" type="checkbox"/> BRO (Brown)	<input type="checkbox"/> GRN (Green)	<input type="checkbox"/> GRY (Gray)	
	<input type="checkbox"/> HAZ (Hazel)	<input type="checkbox"/> MAR (Maroon)	<input type="checkbox"/> PNK (Pink)	<input type="checkbox"/> MUL (Multicolored)	<input type="checkbox"/> XXX (Unknown)	
DNA <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	DNA Location				WEIGHT (lbs.) 160	
FBI Number	MNU Number			Ft. HEIGHT In. 5 2		
Defendant Fingerprinted <input type="checkbox"/> YES <input type="checkbox"/> NO	Fingerprint Classification:					

DEFENDANT VEHICLE INFORMATION

Plate #	State	Hazmat <input type="checkbox"/>	Registration Sticker(MM/YY)	Comm'l Veh. Ind. <input type="checkbox"/>	School Veh. <input type="checkbox"/>	Oth. NCIC Veh. Code	Reg. same as Def. <input type="checkbox"/>
VIN	Year	Make	Model	Style	Color		

Office of the attorney for the Commonwealth Approved Disapproved because: _____

(The attorney for the Commonwealth may require that the complaint, arrest warrant affidavit, or both be approved by the attorney for the Commonwealth prior to filing. See Pa.R.Crim.P. 507).

(Name of the attorney for the Commonwealth)

(Signature of the attorney for the Commonwealth)

(Date)

I, Officer Daniel M Gordon MPOETC 43909 / Badge 33603
(Name of the Affiant) (PSP/MPOETC -Assigned Affiant ID Number & Badge #)
of Mount Joy Borough Police Department PA0361000
(Identify Department or Agency Represented and Political Subdivision) (Police Agency ORI Number)

Do hereby state: (check appropriate box)

1. I accuse the above named defendant who lives at the address set forth above
 I accuse the defendant whose name is unknown to me but who is identified as _____

I accuse the defendant whose name and popular designation or nickname are unknown to me and whom I have therefore designated as John Doe or Jane Doe

with violating the penal laws of the Commonwealth of Pennsylvania at [413] Mount Joy Borough
(Subdivision Code) (Place-Political Subdivision)

441 West Main Street, Mount Joy Borough

in Lancaster County [36] on or about 09/03/2018 at 1720 hrs
(County Code)



POLICE CRIMINAL COMPLAINT

Docket Number:	Date Filed: 09-04-2018	OTN/LiveScan Number	Complaint/Incident Number 1809002949
Defendant Name	First: Anthony	Middle: Charles	Last: HERFEL SAGONA

The acts committed by the accused are described below with each Act of Assembly or statute violated, if appropriate. When there is more than one offense, each offense should be numbered chronologically.
 (Set forth a *brief* summary of the facts sufficient to advise the defendant of the nature of the offense(s) charged. A citation to the statute(s) allegedly violated, without more, is not sufficient. In a summary case, you must cite the specific section(s) and subsection(s) of the statute(s) or ordinances(s) allegedly violated.

<input type="checkbox"/> Inchoate Offense	<input type="checkbox"/> Attempt 18 901 A	<input type="checkbox"/> Solicitation 18 902 A	<input type="checkbox"/> Conspiracy 18 903
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<input checked="" type="checkbox"/>	1	§ 322 392.2	§§ (a)(1)	of the	18	1	m1		
Lead?	Offense #	Section	Subsection	PA Statute (Title)	Counts	Grade	NCIC Offense Code	UCR/NIBRS Code	
PennDOT Data (if applicable)		Accident Number			<input type="checkbox"/> Safety Zone	<input type="checkbox"/> Safety Zone			

Statute Description (include the name of statute or ordinance):
 Theft by deception- person is guilty of theft if he intentionally obtains or withholds property of another by deception. A person deceives if he intentionally: creates or reinforces a false impression, including false impressions as to law, value, intention or other state of mind; but deception as to a person's intention to perform a promise shall not be inferred from the fact alone that he did not subsequently perform the promise

Acts of the accused associated with this Offense: TO WIT: on the above date, time and location, the defendant did take multiple gift cards and use a manufacture coupon to not pay for the loaded gift card with money on it.

<input type="checkbox"/> Inchoate Offense	<input type="checkbox"/> Attempt 18 901 A	<input type="checkbox"/> Solicitation 18 902 A	<input type="checkbox"/> Conspiracy 18 903
---	--	---	---

<input type="checkbox"/>		§	§§	of the					
Lead?	Offense #	Section	Subsection	PA Statute (Title)	Counts	Grade	NCIC Offense Code	UCR/NIBRS Code	
PennDOT Data (if applicable)		Accident Number			<input type="checkbox"/> Safety Zone	<input type="checkbox"/> Safety Zone			

Statute Description (include the name of statute or ordinance):

Acts of the accused associated with this Offense:

<input type="checkbox"/> Inchoate Offense	<input type="checkbox"/> Attempt 18 901 A	<input type="checkbox"/> Solicitation 18 902 A	<input type="checkbox"/> Conspiracy 18 903
---	--	---	---

<input type="checkbox"/>		§	§§	of the					
Lead?	Offense #	Section	Subsection	PA Statute (Title)	Counts	Grade	NCIC Offense Code	UCR/NIBRS Code	
PennDOT Data (if applicable)		Accident Number			<input type="checkbox"/> Safety Zone	<input type="checkbox"/> Safety Zone			

Statute Description (include the name of statute or ordinance):

Acts of the accused associated with this Offense:



POLICE CRIMINAL COMPLAINT

Docket Number:	Date Filed: 09-04-2018	OTN/LiveScan Number	Complaint/Incident Number 1809002949
Defendant Name	First: Anthony	Middle: Charles	Last: HERFEL SAGONA

- I ask that a warrant of arrest or a summons be issued and that the defendant be required to answer the charges I have made.
- I verify that the facts set forth in this complaint are true and correct to the best of my knowledge or information and belief. This verification is made subject to the penalties of Section 4904 of the Crimes Code (18 Pa.C.S. § 4904) relating to unsworn falsification to authorities.
- This complaint consists of the preceding page(s) numbered 1 through 3.
- I certify that this filing complies with the provisions of the *Case Records Public Access Policy of the United Judicial System of Pennsylvania* that require filing confidential information and documents differently than non-confidential information and documents.

The acts committed by the accused, as listed hereafter, were against the peace and dignity of the Commonwealth of Pennsylvania and were contrary to the Act(s) of the Assembly, or in violation of the statutes cited.

(Before a warrant of arrest can be issued, an affidavit of probable cause must be completed, sworn to before the issuing authority, and attached).

Officer Daniel M Gordon 09-04-2018
(Date)

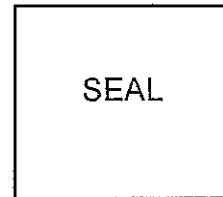
(Signature of Affiant)

AND NOW, on this date _____ I certify that the complaint has been properly completed and verified.

An affidavit of probably cause must be completed before a warrant can be issued.

(Magisterial District Court Number)

(Issuing Authority)



COMMONWEALTH OF PENNSYLVANIA
COUNTY OF: LANCASTER



POLICE CRIMINAL COMPLAINT
COMMONWEALTH OF PENNSYLVANIA
VS.

Magisterial District Number: 02-3-01
MDJ: Hon. Scott ALBERT
Address: 424 South Angle Street
Mount Joy, PA 17552
Telephone: (717) 653-4575

DEFENDANT: (NAME and ADDRESS):
MATTHEW D. SPOO
First Name Middle Name Last Name Gen.
LKA:
55 EAST MAIN STREET APT. A
MOUNT JOY, PA 17552

COPY

NCIC Extradition Code Type

- 1-Felony Full 4-Felony No Ext. B-Misdemeanor Limited E-Misdemeanor Pending
 2-Felony Ltd. 5-Felony Pend. C-Misdemeanor Surrounding States Distance: _____
 3-Felony Surrounding States A-Misdemeanor Full D-Misdemeanor No Extradition

DEFENDANT IDENTIFICATION INFORMATION

Docket Number	Date Filed 09-07-2018	OTN/LiveScan Number	Complaint/Incident Number 1809007937	Request Lab Services? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
GENDER <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	DOB 11-16-1991	POB PENNSYLVANIA	Add'l DOB / /	Co-Defendant(s) <input type="checkbox"/>
	AKA MICHAEL	First Name MICHAEL	Middle Name SPOO	Last Name SPOO
RACE <input checked="" type="checkbox"/> White <input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Native American <input type="checkbox"/> Unknown				
ETHNICITY <input type="checkbox"/> Hispanic <input checked="" type="checkbox"/> Non-Hispanic <input type="checkbox"/> Unknown				
HAIR COLOR	<input type="checkbox"/> GRY (Gray)	<input type="checkbox"/> RED (Red/Aubn.)	<input type="checkbox"/> SDY (Sandy)	<input type="checkbox"/> BLU (Blue)
	<input type="checkbox"/> BLK (Black)	<input type="checkbox"/> ONG (Orange)	<input type="checkbox"/> WHI (White)	<input type="checkbox"/> XXX (Unk./Bald)
	<input type="checkbox"/> BLN (Blonde / Strawberry)	<input type="checkbox"/> PLE (Purple)	<input checked="" type="checkbox"/> BRO (Brown)	<input type="checkbox"/> GRN (Green)
	<input type="checkbox"/> HAZ (Hazel)	<input type="checkbox"/> MAR (Maroon)	<input type="checkbox"/> PNK (Pink)	<input type="checkbox"/> XXX (Unknown)
EYE COLOR	<input type="checkbox"/> BLK (Black)	<input type="checkbox"/> BLU (blue)	<input type="checkbox"/> BRO (Brown)	<input checked="" type="checkbox"/> GRN (Green)
	<input type="checkbox"/> HAZ (Hazel)	<input type="checkbox"/> MAR (Maroon)	<input type="checkbox"/> PNK (Pink)	<input type="checkbox"/> MUL (Multicolored)
DNA <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	DNA Location			WEIGHT (lbs.) 170
FBI Number	MNU Number		FL HEIGHT In. 5 11	
Defendant Fingerprinted <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Fingerprint Classification			

DEFENDANT VEHICLE INFORMATION

Plate #	State	Hazmat <input type="checkbox"/>	Registration Sticker(MM/YY)	Comm'l Veh. Ind. <input type="checkbox"/>	School Veh. <input type="checkbox"/>	Oth. NCIC Veh. Code	Reg. same as Def. <input type="checkbox"/>
VIN	Year	Make	Model	Style	Color		

Office of the attorney for the Commonwealth Approved Disapproved because: _____

(The attorney for the Commonwealth may require that the complaint, arrest warrant affidavit, or both be approved by the attorney for the Commonwealth prior to filing. See Pa.R.Crim.P. 507).

(Name of the attorney for the Commonwealth)

(Signature of the attorney for the Commonwealth)

(Date)

I, Officer Daniel M Gordon
(Name of the Affiant)
of Mount Joy Borough Police Department
(Identify Department or Agency Represented and Political Subdivision)

MPOETC 43909 / Badge 33603
(PSP/MPOETC -Assigned Affiant ID Number & Badge #)
PA0361000
(Police Agency ORI Number)

Do hereby state: (check appropriate box)

1. I accuse the above named defendant who lives at the address set forth above
 I accuse the defendant whose name is unknown to me but who is identified as _____

I accuse the defendant whose name and popular designation or nickname are unknown to me and whom I have therefore designated as John Doe or Jane Doe
with violating the penal laws of the Commonwealth of Pennsylvania at [413] Mount Joy Borough
(Subdivision Code) (Place-Political Subdivision)
55 East Main Street, Apt. A. Mount Joy Borough
in Lancaster County [36] on or about 09/07/2018 at 1316 hrs
(County Code)



POLICE CRIMINAL COMPLAINT

Docket Number:	Date Filed: 09-07-2018	OTN/LiveScan Number	Complaint/Incident Number 1809007937
Defendant Name	First: MATTHEW	Middle: D.	Last: SPOO

The acts committed by the accused are described below with each Act of Assembly or statute violated, if appropriate. When there is more than one offense, each offense should be numbered chronologically.
 (Set forth a *brief* summary of the facts sufficient to advise the defendant of the nature of the offense(s) charged. A citation to the statute(s) allegedly violated, without more, is not sufficient. In a summary case, you must cite the specific section(s) and subsection(s) of the statute(s) or ordinances(s) allegedly violated.

<input type="checkbox"/> Inchoate Offense	<input type="checkbox"/> Attempt 18 901 A	<input type="checkbox"/> Solicitation 18 902 A	<input type="checkbox"/> Conspiracy 18 903
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<input checked="" type="checkbox"/>	1	§ 3503	§§ (a)(1)(i)	of the	18	1	m3		
Lead?	Offense #	Section	Subsection	PA Statute (Title)	Counts	Grade	NCIC Offense Code	UCR/NIBRS Code	

PennDOT Data (if applicable)	Accident Number		<input type="checkbox"/> Safety Zone	<input type="checkbox"/> Safety Zone
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Statute Description (include the name of statute or ordinance):
 Criminal Trespass-A person commits an offense if, knowing that he is not licensed or privileged to do so, he:
 (i) enters, gains entry by subterfuge or surreptitiously remains in any building or occupied structure or separately secured or occupied portion thereof

Acts of the accused associated with this Offense: In that, the above named defendant on the above date, time and location did: admit to be staying in a rental property when he knew he was not to be staying at the rental property.

<input type="checkbox"/> Inchoate Offense	<input type="checkbox"/> Attempt 18 901 A	<input type="checkbox"/> Solicitation 18 902 A	<input type="checkbox"/> Conspiracy 18 903
--	---	--	--

<input type="checkbox"/>		§	§§	of the				
Lead?	Offense #	Section	Subsection	PA Statute (Title)	Counts	Grade	NCIC Offense Code	UCR/NIBRS Code

PennDOT Data (if applicable)	Accident Number		<input type="checkbox"/> Safety Zone	<input type="checkbox"/> Safety Zone
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Statute Description (include the name of statute or ordinance):

Acts of the accused associated with this Offense:

<input type="checkbox"/> Inchoate Offense	<input type="checkbox"/> Attempt 18 901 A	<input type="checkbox"/> Solicitation 18 902 A	<input type="checkbox"/> Conspiracy 18 903
--	---	--	--

<input type="checkbox"/>		§	§§	of the				
Lead?	Offense #	Section	Subsection	PA Statute (Title)	Counts	Grade	NCIC Offense Code	UCR/NIBRS Code

PennDOT Data (if applicable)	Accident Number		<input type="checkbox"/> Safety Zone	<input type="checkbox"/> Safety Zone
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Statute Description (include the name of statute or ordinance):

Acts of the accused associated with this Offense:



POLICE CRIMINAL COMPLAINT

Docket Number:	Date Filed: 09-07-2018	OTN/LiveScan Number	Complaint/Incident Number 1809007937
Defendant Name	First: MATTHEW	Middle: D.	Last: SPOO

- 2. I ask that a warrant of arrest or a summons be issued and that the defendant be required to answer the charges I have made.
- 3. I verify that the facts set forth in this complaint are true and correct to the best of my knowledge or information and belief. This verification is made subject to the penalties of Section 4904 of the Crimes Code (18 Pa.C.S. § 4904) relating to unsworn falsification to authorities.
- 4. This complaint consists of the preceding page(s) numbered 1 through 3.
- 5. I certify that this filing complies with the provisions of the *Case Records Public Access Policy of the United Judicial System of Pennsylvania* that require filing confidential information and documents differently than non-confidential information and documents.

The acts committed by the accused, as listed hereafter, were against the peace and dignity of the Commonwealth of Pennsylvania and were contrary to the Act(s) of the Assembly, or in violation of the statutes cited. **(Before a warrant of arrest can be issued, an affidavit of probable cause must be completed, sworn to before the issuing authority, and attached).**

Officer Daniel M Gordon

09-07-2018
(Date)

[Handwritten Signature]
(Signature of Affiant)

AND NOW, on this date _____ I certify that the complaint has been properly completed and verified.

An affidavit of probably cause must be completed before a warrant can be issued.

(Magisterial District Court Number)

(Issuing Authority)

