| UNITED STATES DIS<br>CENTRAL DISTRICT (   |  |
|---|--|
|   | CASE NUMBER:                                   |
|   |  |
| Plaintiff(s)  |  |
| V.  |  |
|   | WARRANT FOR ARREST                             |
| Defendant(s).   |  |
| TO: UNITED STATES MARSHAL AND ANY AUT   | ΓHORIZED UNITED STATES OFFICER                 |
| YOU ARE HEREBY COMMANDED to arrest  |  |
| and bring him/her forthwith to the nearest Magistrate J   | Judge to answer a(n): ☐ Complaint ☐ Indictment |
| ☐ Information ☐ Order of Court ☐ Violation Petit  | <u> </u>                                       |
| charging him/her with (ENTER DESCRIPTION OF OFFENSE BELOW)  | ion Violation Notice                           |
| CHAI GIII GIIIII/II WITH (ENTER DESCRIPTION OF OFFENSE BELOW)   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
| in violation of TitleUnited States Coo  | de, Section(s)                                 |
| Brian D. Karth  |  |
| NAME OF ISSUING OFFICER   |  |
| Clark of Count  |  |
| Clerk of Court  |  |
| TITLE OF ISSUING OFFICER  | DATE AND LOCATION OF ISSUANCE                  |
|   |  |
| SIGNATURE OF DEPUTY CLERK   | By:<br>NAME OF JUDICIAL OFFICER                |
|   |  |
| RETURN  | N  |
| THIS WARRANT WAS RECEIVED AND EXECUTED WITH THE ARREST OF THE ABOVE-NAMED DETAILS WARRANT WAS RECEIVED AND EXECUTED WITH THE ARREST OF THE ABOVE-NAMED DETAILS. | EFENDANT AT (LOCATION):                        |
|   |  |
|   |  |
| DATE DECEMEN  | WALKE OF ADDRETING OFFICER                     |
| DATE RECEIVED   | NAME OF ARRESTING OFFICER                      |
| DATE OF ARREST  | TITLE  |
| 22 o. manar   |  |
| DESCRIPTIVE INFORMATION FOR DEFENDANT   |  |
| CONTAINED ON BACE TWO   | CICNATURE OF ARRESTING OFFICER                 |

## UNITED STATES DISTRICT COURT CENTRAL DISTRIC OF CALIFORNIA

|  |                               | CENT            | KAL DIST.            | KIC OF                       | CALIFORN              | IA                |                |  |
|--|-------------------------------|-----------------|----------------------|------------------------------|-----------------------|-------------------|----------------|--|
|  |                               |                 |                      |                              | CASE NUMBER:          |                   |                |  |
|  |                               |                 | D1 :                 |                              |                       |                   |                |  |
|  |                               | **              | Plain                | tiff(s)                      |                       |                   |                |  |
|  |                               | V.              |                      |                              |                       |                   |                |  |
|  |                               |                 |                      |                              |                       |                   |                |  |
|  |                               |                 |                      |                              | W/ A D                | RANT FOR ARRES    | <b>T</b>       |  |
|  |                               |                 |                      |                              | WAR                   | KANT FOR ARRES    | ) <u>1</u>     |  |
|  |                               |                 | Defend               | ant(s)                       |                       |                   |                |  |
|  |                               |                 |                      |                              |                       |                   |                |  |
|  |                               | ADDI            | TIONAL DE            | FENDAN'                      | Γ INFORMA             | ΓΙΟΝ              |                |  |
| RACE: SEX:                                   |                               | HEIGHT: WEIGHT: |                      | HAIR:                        | EYES:                 | OTHER:            |                |  |
|  |                               |                 |                      |                              |                       |                   |                |  |
| DATE OF BIRTH:                               | ATE OF BIRTH: PLACE OF BIRTH: |                 | SOCIAL SEC           | CURITY NO.:                  | DRIVER'S LICENSE NO.: | ISSUING STATE:    |                |  |
|  |                               |                 |                      |                              |                       |                   |                |  |
| ALIASES: SCARS, TATTOOS OR OTHER DISTINGUISI |                               |                 | CHICHING MADV        | c.                           |                       |                   |                |  |
| ALIAGES.                                     |                               | SCARS, TATTO    | OS OK OTTIEK DISTING | JOISTHING WARK               | J.                    |                   |                |  |
|  | 1                             |                 |                      | T                            |                       | T                 | T              |  |
| AUTO YEAR:                                   | AUTO MAKE:                    | AUTO MODEL:     |                      | AUTO COL                     | OR:                   | AUTO LICENSE NO.: | ISSUING STATE: |  |
|  |                               |                 |                      |                              |                       |                   |                |  |
| LAST KNOWN RESIDENCE:                        |                               |                 | LAST KNO             | LAST KNOWN EMPLOYMENT:       |                       |                   |                |  |
|  |                               |                 |                      |                              |                       |                   |                |  |
|  |                               |                 |                      |                              |                       |                   |                |  |
| FBI NUMBER:                                  |                               |                 |                      |                              |                       |                   |                |  |
|  |                               |                 |                      |                              |                       |                   |                |  |
| ADDITIONAL INFOR                             | RMATION:                      |                 |                      |                              |                       |                   |                |  |
|  |                               |                 |                      |                              |                       |                   |                |  |
|  |                               |                 |                      |                              |                       |                   |                |  |
|  |                               |                 |                      |                              |                       |                   |                |  |
|  |                               |                 |                      |                              |                       |                   |                |  |
|  |                               |                 |                      |                              |                       |                   |                |  |
|  |                               |                 |                      | <u> </u>                     |                       |                   |                |  |
| INVESTIGATIVE AGENCY NAME                    |                               |                 | INVESTIGA            | NVESTIGATIVE AGENCY ADDRESS: |                       |                   |                |  |
|  |                               |                 |                      |                              |                       |                   |                |  |

NOTES: