

USDC-EDMO
CRIMINAL CASE COVER SHEET **INDICTMENT**

Division of Filing:	County of Offense:	Matter to be Sealed:	Type of Charge:
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor

Defendant Information:

Defendant's Name _____
 Alias Name _____
 Birthdate _____ Not Available
 Social Security No _____ Not Available

Related Case Information:

Superseding Indictment/Information? Yes No *If yes, original case number:* _____
 Is this a New Defendant in the Superseding Indictment/Information? Yes No
 Prior Complaint? Yes No If yes, Complaint No. _____
 Complaint: Pending Dismissed
 Deft. has had an appearance before a Magistrate? Yes No If yes, Magistrate name: _____

Victim-Witness Act applies: Yes No

Corporate Defendant: ___Yes ___No **Corporate Victim:** ___Yes ___No

Name of AUSA: _____

Location Status:

Agency/Agent: _____

Arrest Date:

Bond/Detention: _____

_____ Currently in Federal Custody

Interpreter Needed: ___Yes ___No

_____ Currently in State Custody Writ Issued ___Yes ___No

Language: _____

_____ Currently on bond set by Court

_____ Defendant not in custody

SA XXX - NCIC & APPREHENSION or USMS NCIC & APPREHENSION

U.S.C. Citations and Total # of Counts against this Defendant: _____

Index Key/Code/Offense Level/AOcd/Sev	Description of Offense Charged	Count(s)	Penalty Information
			I nmt yrs., I nlt yrs. F nmt \$250,000 <u>or both</u> Sup. Rel. nmt \$100 Special Assessment/count
			I nmt XX yrs., I nlt yrs. F nmt \$250,000 <u>or both</u> Sup. Rel. nmt \$100 Special Assessment/count

Return Date: _____

Signature of AUSA: _____
AUSA NAME & BAR NUMBER