

BINDER MARGIN (DO NOT WRITE ABOVE THIS LINE)

ASSISTANT STATE'S ATTORNEY:

(For State's Attorney Use Only)

FELONY APPROVAL
ASA Tran, 28 Nov 16 1127 hrs

Enter each continuance here. In cases of multiple defendants indicate which defendants, if any, did not join in the continuance. Also indicate dates of all demands for trial, and by whom demands were made.

COURT: CCB

I.R. NUMBER	DEFENDANTS	AGE	DATE OF ARREST	CHARGE
1489152	Andrea Brown	25	11/28/2016	AGGRAVATED BATTERY

Date of offense 11/12/2016 Time 2140hrs Place 2800 S. California Ave, Chicago, IL 60608, Illinois

The facts briefly stated are as follows:

On Nov 12th, 2016, defendant BROWN, Andrea without legal justificaion knowingly caused bodily harm to Deputy [REDACTED], at the Cook County Department of Corrections, Divison 08RTU, Tier 5G, in that she bit Deputy [REDACTED] on her right arm, causing her to feel pain, knowwing Deputy [REDACTED] to be a peace officer engaged in the execution of her official duties.

**WITNESSES: SPELL OUT FIRST AND LAST NAME; FIRST NAME FIRST
ALSO FURNISH ADDRESS AND PHONE NUMBER OF EACH WITNESS**

PROSECUTING WITNESS: Deputy Sheriff [REDACTED], 3026 S. California Ave., building 5 Chicago, [REDACTED]

Investigator [REDACTED]	3026 S. California Ave., Chicago, IL 60608	[REDACTED]
Deputy Sheriff [REDACTED]	3026 S. California Ave., Chicago, IL 60608	[REDACTED]
Deputy Sheriff [REDACTED]	3026 S. California Ave., Chicago, IL 60608	[REDACTED]

BOND: \$ _____ ASST. STATE'S ATTY. _____ DATE _____

(Do Not Write In This Space---For State's Atty. Use Only)