

BINDER MARGIN (DO NOT WRITE ABOVE THIS LINE)

ASSISTANT STATE'S ATTORNEY:

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.

(For State's Attorney Use Only)

FELONY APPROVAL

ASA Labarbara

Date: 11 Sep 16

Time: 1151 hrs

COURT: _____

I.R. NUMBER	DEFENDANTS	AGE	DATE OF ARREST	CHARGE
2043273	Jesse F Anderer	27	9/4/2016	Aggravated Battery

Date of offense 9/4/2016 Time 1630 Place 2700 S California Ave, Chicago, IL 60608, Illinois

The facts briefly stated are as follows:

Victim [REDACTED] stated on the incident date she was conducting a round chair group therapy session as a Mental Health Specialist. Victim stated during this session a partially seated relaxation exercise is normally performed. Victim stated during this exercise, Suspect (Jesse ANDERER) reached over and grabbed her buttocks.

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

PROSECUTING WITNESS: [REDACTED] 2700 S California Chicago, IL 60608 [REDACTED]

BOND: \$ Must be Set by **ASST. STATE'S ATTY.** _____ **DATE** _____

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