

BINDER MARGIN (DO NOT WRITE ABOVE THIS LINE)

ASSISTANT STATE'S ATTORNEY:

(For State's Attorney Use Only)

FELONY APPROVAL

ASA: Tran

Date: 04/21/2017

Time: 8:07am

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: _____

I.R. NUMBER	DEFENDANTS	AGE	DATE OF ARREST	CHARGE
2243137	Myles Hughes	22	4/21/2017	Aggravated Battery

Date of offense 1/25/2017 Time 9:50 pm Place 2834 W. 31st St. Chicago, IL 60652, Illinois

The facts briefly stated are as follows:

Correctional Sergeant [REDACTED] stated that he responded to Tier 3H of Division 9 of the Cook County Department of Corrections due to an inmate refusing to return to his cell. [REDACTED] stated that after securing the inmate in his cell, he walked down a flight of stairs to exit the tier. [REDACTED] stated that while on the staircase, inmate Myles Hughes threw a bottle full of an unknown liquid (suspect urine and feces) onto both Correctional Officer [REDACTED] and [REDACTED].

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

PROSECUTING WITNESS: [REDACTED] [REDACTED] Chicago, IL 60608 [REDACTED]

[REDACTED] [REDACTED] Chicago, IL 60608 [REDACTED]

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

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