

BINDER MARGIN (DO NOT WRITE ABOVE THIS LINE)

**ASSISTANT STATE'S ATTORNEY:**

(For State's Attorney Use Only)

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
2251878	Tacorey Killebrew	29	8/1/2016	Aggravated Battery

Date of offense 5/23/2016 Time 1635 hrs Place CCDOC Division Cermak, 2700 S California, Chicago Ill 60608, Illinois

**The facts briefly stated are as follows:**

ON 23 MAY 16 AT THE COOK COUNTY DEPARTMENT OF CORRECTIONS, DIVISION CERMAK, INMATE/OFFENDER KILLEBREW, TACOREY WAS IN THE E.R. WAITING TO BE TREATED. KILLEBREW REQUESTED TO GO TO BATHROOM AND HIS HANDCUFFS WERE REMOVED. UPON RETURNING, KILLEBREW REFUSED TO BE HANDCUFFED IN THE BACK AND WANTED TO BE HANDCUFFED IN THE FRONT. KILLEBREW REFUSED MULTIPLE ORDERS FROM C/O [REDACTED] AND C/O [REDACTED] AS C/O [REDACTED] AND C/O [REDACTED] TRIED TO SECURE KILLEBREW, KILLEBREW STOOD UP FROM THE BENCH AND ELBOWED C/O [REDACTED] IN THE FACE AREA. C/O [REDACTED] SUSTAINED PAIN AND BRUISING TO HIS FACE AREA. NO FURTHER

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

PROSECUTING WITNESS: Inv. Madrid for C/O 3026 S. California Chicago, Ill 60608 [REDACTED]

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

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