

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
1045861	Frederick L Warren	40	5/7/2016	Aggravated Battery

Date of offense 5/6/2016 Time 1050 hrs Place CCDOC Division 10, 2950 S California, Chicago Ill 60608, Illinois

The facts briefly stated are as follows:

ON 6 MAY 16 AT THE COOK COUNTY DEPARTMENT OF CORRECTIONS, DIVISION 10, TIER 4A, C/O [REDACTED] WAS ENGAGED IN A CONVERSATION WITH INMATE/OFFENDER WARREN, FREDERICK. WARREN WAS PLACED IN HIS CELL AND THE DOOR WAS CLOSED. C/O [REDACTED] REOPENED THE DOOR AND CONTINUED HER CONVERSATION WITH WARREN THAT ESCALATED WHEN THE CONVERSATION BECAME A VERBAL ALTERCATION AND WARREN PUT HIS HAND ON THE LEFT SIDE OF C/O [REDACTED] FACE AND NECK AREA AND PUSHED HER, KNOCKING C/O [REDACTED] HAT OFF.

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

PROSECUTING WITNESS: [REDACTED] for 3026 S. California Chicago, Ill 60608 [REDACTED]

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

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