FELONY MINUTE SHEET FORM 101

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: 5/12/2017 Time: 8:13 am

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COURT:						
I.R. NUMBER	DEFENDANTS	AGE	DATE OF ARREST		CHARGE	
1960961	Timothy Dixon		5/12/2017	A	ggravated Batter	у
		- -			<u> </u>	
		<u> </u>	· · · · · · · · · · · · · · · · · · ·			
Date of offense _	3/1/2017 Time 9:45 pm	Place	2700 S. Calif	ornia Av. Chica	go, IL 60608	, illinois
The facts briefly s	tated are as follows:					tan dan kanana
Correctional Office	er stated that h	e opened a	cell door to allow inm	ite Juan Perry oi	at of his cell to re	eceive medication.
stated that of	once the cell door was open, T	imothy Dix	on, an inmate of the (Cook County De	partment of Cor	rections, spat into
		* *				
				4.		
	ELL OUT FIRST AND LAST NA SO FURNISH ADDRESS AND F			ECC		
AL	OO I ORMISII ADDRESS AND F	-HONE NO	ADER OF EACH WILK	EJJ		
PROSECUTING WI	TNESS:					
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BOND: \$	ASST. STATE'S	ATTY.			DATI	-