

SSN Redacted

2A

Date	COURT ACTION, ORDERS, ENTRIES
	Plea: <input type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> No Contest
	Finding on No Contest <input type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty
	Assignment: 1. _____ 2. _____ 3. _____ 4. _____ 5. _____ 6. _____ 7. _____ 8. _____
	Waiver to Trial Time Filed.
	Request for Pre-Trial Hearing Filed.
	Jury Demand Filed.
	ENTRY - MISDEMEANOR
	\$ _____ Bond Forfeited
	Bench Warrant Ordered. Bond Set At \$ _____
	Trial By: <input type="checkbox"/> Court <input type="checkbox"/> Jury <input type="checkbox"/> Defendant Found: <input type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty
	Defendant having Pleaded or Changed Plea <input type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty and found <input type="checkbox"/> No Contest and found The Court therefore imposes the following sentence: Fine \$ _____ and costs (\$ _____) Jail _____ _____
	ENTRY - FELONY
	Defendant Having Appeared and Entered: <input type="checkbox"/> No Plea <input type="checkbox"/> Not Guilty Preliminary Hearing: <input type="checkbox"/> Held <input type="checkbox"/> Waived _____ _____ _____ <input type="checkbox"/> Defendant Indicted by the <input type="checkbox"/> The Court Binds Defendant to the Clark County Grand Jury. _____ Judge
	Notice of Appeal Filed
	Attorney: _____ Address: _____ Telephone No.: _____

Case No. 24CRB01409

**CLARK COUNTY MUNICIPAL COURT
OF
SPRINGFIELD, OHIO**

THE STATE OF OHIO

VS.

BENJAMIN SCOTT ROBERTS

702 Applewood Dr.
New Carlisle, OH 45344-
DOB: 7/14/1994
*** - ** - 8631
W/M - 507/125 - BRO/BLU

CHARGE: Assault

In violation of Section 2903.13(A) of the Ohio
Revised Code.

PENALTY:

First Degree Misdemeanor
Six (6) Months and/or
\$1,000.00 Fine

FILED
2024 MAY 23 AM 8:15
SHEILA E. RICE, CLERK
MUNICIPAL COURT
BY _____ DEPUTY

Date of Arrest:

Date of Arraignment:

Bond Posted - Cash - Surety

Amount: Request for warrant

Criminal Complaint

THE STATE OF OHIO
CLARK COUNTY

SS: IN THE CLARK COUNTY MUNICIPAL
COURT OF CLARK COUNTY, OHIO

Clark County Municipal Court
50 East Columbia Street
Springfield, Ohio 45502
(937) 328-3725

For Court Use Only

Defendant:

BENJAMIN SCOTT ROBERTS
702 Applewood Dr.
New Carlisle, OH 45344-
DOB: July 14, 1994
SSAN: *** - ** - 8631
W/M - 507/125 - BRO/BLU

Victim:

Location of Occurrence:

Court Case# _____ - CR - _____ - _____
BCI&I ITN Number:
Law Enforcement Case Number: 24-CCSO00011980

Criminal Charge

Assault

Complaint By Individual:

Before me, a Notary Public for the State of Ohio, a Peace Officer authorized to administer oaths or Clerk of the Clark County Municipal Court of Springfield, Ohio came DEPUTY JUSTIN DERRINGER who being duly sworn states that on or about May 21, 2024, one BENJAMIN ROBERTS In the City of New Carlisle, County of Clark, State of Ohio did: knowingly cause or attempt to cause physical harm to another or to another's unborn.

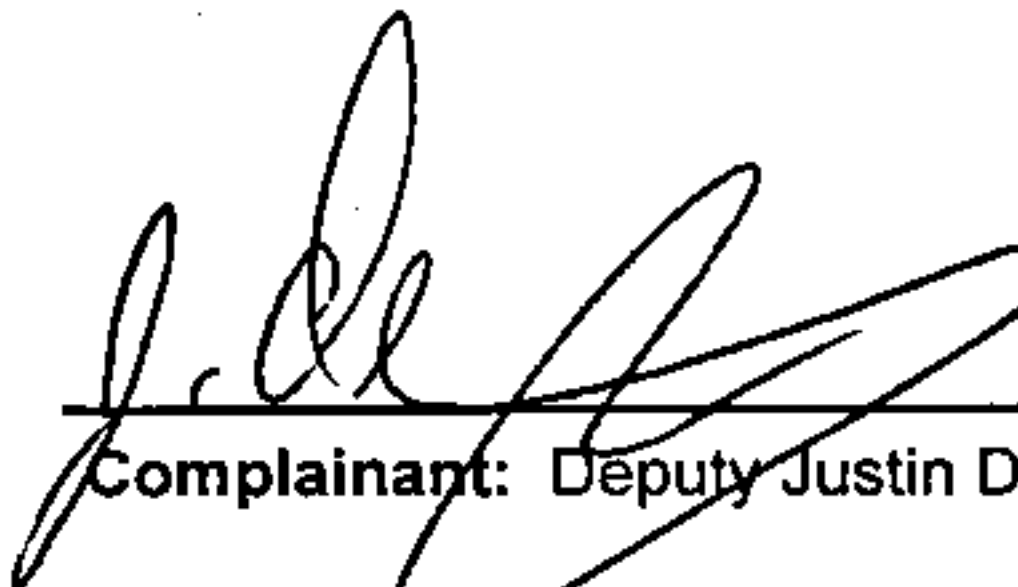
TO WIT:

The defendant did knowingly cause or attempt to cause physical harm to the victim by punching him and tackling him to the concrete causing the victim's left ear to bleed along with causing contusions to the victim's ribs and left eye. The defendant also caused abrasions to the victim's back, elbow, and shoulder.


In violation of Section 2903.13(A) of the Ohio Revised Code.

PENALTY:

First Degree Misdemeanor
Six (6) Months and/or
\$1,000.00 Fine

 #109
Complainant: Deputy Justin Derringer

Sworn to and subscribed before me by the
Complainant on May 22, 2024



Notary Public/Authorized Peace
Officer/Clerk of Court

Court Date:
Request for Warrant

☒ Court Copy ☐ Defendant Copy ☐ Return Copy ☐ Extra Copy

Date	COURT ACTION, ORDERS, ENTRIES
Plea:	<input type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty <input type="checkbox"/> No Contest
Finding on No Contest	<input type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty
Assignment:	1. _____ 2. _____ 3. _____ 4. _____ 5. _____ 6. _____ 7. _____ 8. _____
	Waiver to Trial Time Filed.
	Request for Pre-Trial Hearing Filed.
	Jury Demand Filed.
	ENTRY - MISDEMEANOR
	\$ _____ Bond Forfeited
	Bench Warrant Ordered. Bond Set At \$ _____
	Trial By: <input type="checkbox"/> Court <input type="checkbox"/> Jury <input type="checkbox"/> Defendant Found: <input type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty
	Defendant having Pleaded or Changed Plea <input type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty and found <input type="checkbox"/> No Contest and found The Court therefore imposes the following sentence: Fine \$ _____ and costs (\$ _____) Jail _____ _____ _____
	ENTRY - FELONY
	Defendant Having Appeared and Entered: <input type="checkbox"/> No Plea <input type="checkbox"/> Not Guilty Preliminary Hearing: <input type="checkbox"/> Held <input type="checkbox"/> Waived _____ _____ _____
	<input type="checkbox"/> Defendant Indicted by the <input type="checkbox"/> The Court Binds Defendant to the Clark County Grand Jury.
	Judge _____
	Notice of Appeal Filed
	Attorney: _____
	Address: _____
	Telephone No.: _____

Case No. _____

CLARK COUNTY MUNICIPAL COURT OF SPRINGFIELD, OHIO

THE STATE OF OHIO

VS.

BENJAMIN SCOTT ROBERTS

702 Applewood Dr.
 New Carlisle, OH 45344-
 DOB: 7/14/1994
 *** - ** - 8631
 W/M - 507/125 - BRO/BLU

CHARGE: Aggravated Menacing

In violation of Section 2903.21(A) of the Ohio

Revised Code

PENALTY:

First Degree Misdemeanor
 Six (6) Months and/or
 \$1,000.00 Fine

FILED
 2024 MAY 23 AM 8:15
 SHEILA E. RICE, CLERK
 BY _____
 MUNICIPAL COURT
 DEPUTY

Date of Arrest:

Date of Arraignment:

Bond Posted - Cash - Surety

Amount:

Request for warrant

Criminal Complaint

THE STATE OF OHIO
CLARK COUNTY

SS: IN THE CLARK COUNTY MUNICIPAL
COURT OF CLARK COUNTY, OHIO

Clark County Municipal Court
50 East Columbia Street
Springfield, Ohio 45502
(937) 328-3725

For Court Use Only

Defendant:

BENJAMIN SCOTT ROBERTS

702 Applewood Dr.

New Carlisle, OH 45344-

DOB: July 14, 1994

SSAN: *** - ** - 8631

W/M - 507/125 - BRO/BLU

Criminal Charge

Victim:

Aggravated Menacing

Court Case# ____ - CR - ____ - ____
BCI&I ITN Number:
Law Enforcement Case Number: 24-CCSO00011980

Complaint By Individual:

Before me, a Notary Public for the State of Ohio, a Peace Officer authorized to administer oaths or Clerk of the Clark County Municipal Court of Springfield, Ohio came DEPUTY JUSTIN DERRINGER who being duly sworn states that on or about May 21, 2024, one BENJAMIN ROBERTS In the City of New Carlisle, County of Clark, State of Ohio did: knowingly cause another to believe that the offender would cause serious physical harm to the person or property of the other person, the other person's unborn, or a member of the other person's immediate family.


TO WIT:

The defendant did knowingly cause the victim to believe the suspect would cause serious physical harm to him by verbally threatened to kill the victim prior to and during the altercation with the victim.


In violation of Section 2903.21(A) of the Ohio Revised Code.

PENALTY:

First Degree Misdemeanor
Six (6) Months and/or
\$1,000.00 Fine

 #109
Complainant: Deputy Justin Derringer

Sworn to and subscribed before me by the
Complainant on May 22, 2024


Notary Public/Authorized Peace
Officer/Clerk of Court

Court Date:
Request for Warrant

☒ Court Copy ☐ Defendant Copy ☐ Return Copy ☐ Extra Copy

Clark County Municipal Court
50 East Columbia Street
Springfield, Ohio 45502
(937) 328-3725

Law Enforcement Arrest Report
Probable Cause Affidavit

Case Number:
24-CCSO00011980

The State of Ohio
Clark County

Court Case # CR-_____

The Affiant, Deputy Justin Derringer, being first sworn, says there is probable cause to believe the defendant, Benjamin Scott Roberts, committed an offense based on the summary of facts below:

BWCR

On 5/21/2024, deputies were dispatched to 119 Orth Drive, New Carlisle, Ohio, 45344 on an assault. Upon my arrival, medics were speaking with the victim of the assault. The victim was

I made contact with Kayla Sanford. Mrs. Sanford stated she got a call from Clark County dispatch to pick up Benjamin Roberts from an accident in Park Layne. Mrs. Sanford stated she went to pick him up. Mrs. Sanford advised he got into the backseat. Mrs. Sanford stated he was screaming drunken nonsense the whole way to her house. Mrs. Sanford advised Mr. Robert had gotten into an argument with her husband, _____ on the phone. _____ friends with Mr. Roberts. Mrs. Sanford stated when they pulled up into the driveway, Mr. Roberts jumped out of the car before she was even stopped and started fighting _____ with punches being thrown and tackling him to the ground in the driveway. Mrs. Sanford advised she had called the police to get him to stop. Mrs. Sanford stated when he saw the police lights he ran off down Orth towards Villa Drive. Mrs. Sanford advised Mr. Roberts made threats to _____ during the incident as well. Mrs. Sanford stated Mr. Roberts' child's mother lives at 702 Applewood Drive and could possibly go there.

I made contact with _____ reference what occurred. _____ stated he sent his wife, Mrs. Sanford to get his belligerent friend. _____ advised she brought him home where Mr. Roberts attacked _____ right out of the car. _____ stated Mr. Roberts charged at him throwing punches and tackling him to the concrete. _____ advised he had yelled for help. _____ stated the neighbors came out to help separate them _____ advised Mr. Roberts took him to the ground again. _____ stated the police showed up resulting in Mr. Roberts running down Orth Drive. _____ stated Mr. Roberts made numerous threats of killing him during the incident.

_____ advised he had numerous injuries from the altercation _____ stated he was bleeding from his ear. _____ stated he had abrasions on his elbow, shoulder, and back _____ advised he had a contusion to his ribs. _____ had a contusion to his left eye as well. Mr. Sanford stated he may have a broken rib. _____ declined the medic taking him to the hospital tonight due to needing to be there for his family. _____ stated he would seek medical attention in the morning. _____ advised he wanted to pursue charges for assault and aggravated menacing. _____ stated he wanted Mr. Roberts trespassed from his property.

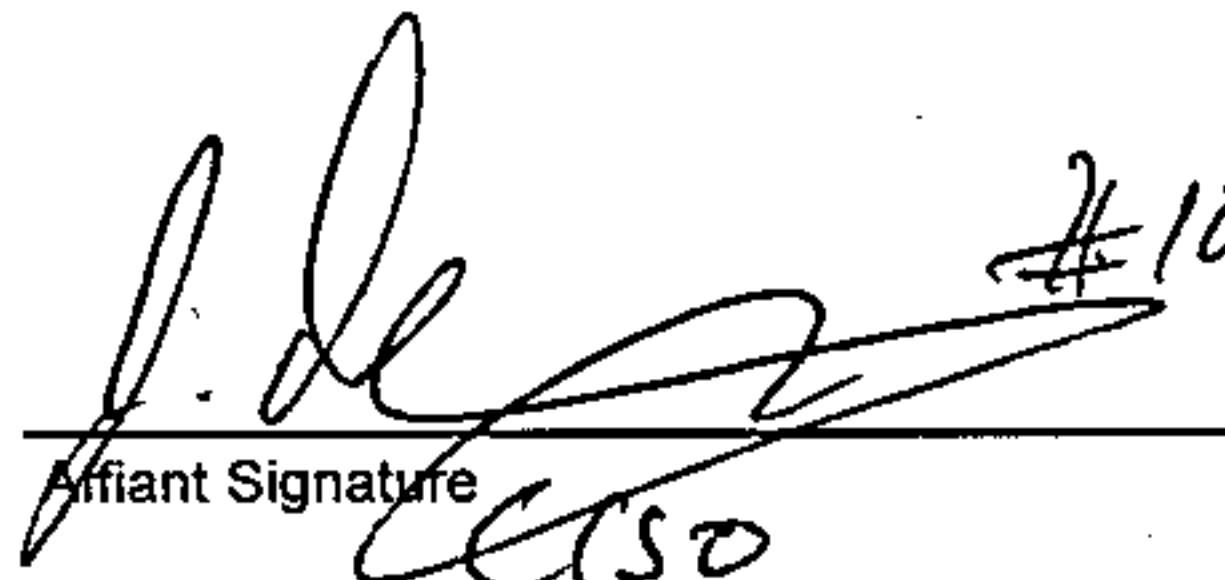
_____ and Mrs. Sanford completed witness statements. I took photos of Mr. _____ injuries. I completed a trespass letter on Mr. Roberts which was signed by _____. At the time of this report, Mr. Roberts has not been located. Warrants will be requested for assault and aggravated menacing on Mr. Roberts from this incident. A computerized computer history check was completed with negative

results of priors for assault or aggravated menacing.

Defendant:

Benjamin Scott Roberts

Further Affiant Sayeth Not.

 #109
Affiant Signature

Affiant Address & Phone

*Sworn to and subscribed before me by the
Affiant on 5/22/2024*

Notary Public/Authorized Peace
Officer/Clerk of Court

Law Enforcement Arrest Report

Name: ROBERTS, Benjamin Scott		Race: W	Gender: M	Height: 507	Weight: 125	Hair: BRO	Eyes: BLU	Build:	Case Number: 24-CCSO00011980
D.O.B.: 07/14/1994	Age at time of offense: 29 Years 10 Months	SSN: *** - ** - 8631	FBI#:	BCI#:	ITN#:				

Address: 702 Applewood Dr. New Carlisle, OH 45344-		Phone: - -	P.O.B. (City & State): Unknown	
Arresting Agency: Clark County Sheriff's Office		Date/Time of Arrest:	On Probation: <input type="checkbox"/> Yes If yes, P.O.'s Name	
			On Parole: <input type="checkbox"/> No	
Location of Occurrence / Arrest / Both: 119 Orth Dr.			Township or County: Bethel Township	Driver's License #: TT653117
			Driver's License State: OH	
Employment:	Employment Address: , OH		Employment Phone:	
Vehicle License #:	Vehicle State:	Vehicle License Type:	Vehicle Year:	Vehicle Make:
				Vehicle Model:
Vehicle Color:	Vehicle VIN #:	Vehicle Identifiers:		
Affiant: Deputy Justin Derringer	Transporting Officers:			Badge/Unit #:

CHARGE(S) AT TIME OF ARREST - CODE NUMBER - PENALTY

ASSAULT - 2903.13(A) - M1

The defendant did knowingly cause or attempt to cause physical harm to the victim by punching him and tackling him to the concrete causing the victim's left ear to bleed along with causing contusions to the victim's ribs and left eye. The defendant also caused abrasions to the victim's back, elbow, and shoulder.

AGGRAVATED MENACING - 2903.21(A) - M1

The defendant did knowingly cause the victim to believe the suspect would cause serious physical harm to him by verbally threatened to kill the victim prior to and during the altercation with the victim.

Victim: <input type="checkbox"/> Sick <input checked="" type="checkbox"/> NA <input checked="" type="checkbox"/> Injured	Treated by: <input checked="" type="checkbox"/> Refused <input type="checkbox"/> Squad <input type="checkbox"/> Hospital	Transferred to <input type="checkbox"/> Squad Hospital by: <input type="checkbox"/> P.O.V.	Hospital: <input type="checkbox"/> Community <input type="checkbox"/> Mercy <input type="checkbox"/> Other	Doctor:
Victim Description of Sickness/Injury/Condition: <input type="checkbox"/> Intoxicated				
Arrestee: <input type="checkbox"/> Sick <input checked="" type="checkbox"/> NA <input type="checkbox"/> Injured	Treated by: <input type="checkbox"/> Refused <input type="checkbox"/> Squad <input type="checkbox"/> Hospital	Transferred to <input type="checkbox"/> Squad Hospital by: <input type="checkbox"/> P.O.V.	Hospital: <input type="checkbox"/> Community <input type="checkbox"/> Mercy <input type="checkbox"/> Other	Doctor:
Arrestee Description of Sickness/Injury/Condition: <input checked="" type="checkbox"/> Intoxicated				
Arrestee Juvenile? Parent/Legal Guardian Name & Address:				
Arrested Juvenile <input type="checkbox"/> Placed in DH <input type="checkbox"/> Released to Parent	Disposition: <input type="checkbox"/> Taken to HQ <input type="checkbox"/> Other		Parents <input type="checkbox"/> By Arresting Officer <input type="checkbox"/> By Dispatcher Notified: <input type="checkbox"/> By Transfer Officer <input type="checkbox"/> By DH Personnel <input type="checkbox"/> Other	Date Notified:

Witnesses:

Justin Derringer	120 N. Fountain Ave. Springfield, OH 45502-	937-328-2560
Brandon Hartsell	120 N. Fountain Ave. Springfield, OH 45502-	937-328-2560
Tyler Long	120 N. Fountain Ave. Springfield, OH 45502-	937-328-2560

Crash <input type="checkbox"/> Yes occur? <input checked="" type="checkbox"/> No	Was OH1 <input type="checkbox"/> Yes completed? <input checked="" type="checkbox"/> No	Arrestee have <input type="checkbox"/> Yes insurance? <input checked="" type="checkbox"/> No	Did Affiant <input type="checkbox"/> Yes witness driving? <input checked="" type="checkbox"/> No	If not, who witnessed driving?	Vehicle <input type="checkbox"/> Yes searched? <input checked="" type="checkbox"/> No
Vehicle <input type="checkbox"/> IMP Disposition: <input type="checkbox"/> RTO	If no one witnessed driving, how is exact time of vehicle operation established?			<input checked="" type="checkbox"/> NA	DUI Impaired Driver Report prepared? <input type="checkbox"/> NA <input type="checkbox"/> No
Vehicle held <input type="checkbox"/> Yes for prints? <input checked="" type="checkbox"/> No	Arrestee make <input type="checkbox"/> Yes admission of guilt? <input type="checkbox"/> No	Did Arrestee make <input type="checkbox"/> Yes statement? <input type="checkbox"/> No	<input type="checkbox"/> Written Statement <input type="checkbox"/> Verbal <input type="checkbox"/> Taped Audio Statement <input type="checkbox"/> Other		Written summaries of statements prepared? <input type="checkbox"/> Yes <input type="checkbox"/> No
Arrestee identified <input checked="" type="checkbox"/> Yes by Witness? <input type="checkbox"/> No	<input type="checkbox"/> Photo Array <input type="checkbox"/> Affiant Witnessed Crime <input type="checkbox"/> Line-Up <input checked="" type="checkbox"/> At Scene <input type="checkbox"/> Taken back to Scene	Photos of <input checked="" type="checkbox"/> Yes scene/victim? <input type="checkbox"/> No	Photos taken by: <i>Derringer</i>	Scene processed <input type="checkbox"/> Yes for prints? <input checked="" type="checkbox"/> No	Physical evidence <input type="checkbox"/> Yes at scene? <input checked="" type="checkbox"/> No
Property Receipt #:	Copy of receipt or <input type="checkbox"/> Yes <input checked="" type="checkbox"/> NA inventory attached? <input type="checkbox"/> No - If no, list property:				

Were any physical or mental examinations or scientific tests conducted in connection with this case? ☐ Yes - If yes, please specify ☒ No ☐ Lab Request Attached

Signature of Officer(s): *[Signature]* Supervisor Signature: *[Signature]* Signature Book-In: Book-In Date/Time:

Date Printed: 5/22/2024

Witness List

Law Enforcement Case Number:
24-CCSO00011980

5/22/2024

Name	Address	Home Phone	Witness Stmt
LONG, Tyler	120 N.Fountain Ave., Springfield, OH 45502-	937-328-2560	
HARTSELL, Brandon	120 N.Fountain Ave., Springfield, OH 45502-	937-328-2560	
DERRINGER, Justin Daniel	120 N.Fountain Ave., Springfield, OH 45502-	937-328-2560	

Clark County Sheriff's Office

Official Statement

Date: 5/21/24 Time: 2315 Case Number: 24-11980

_____ do hereby make the following statement of my own free will and accord concerning _____ which occurred at _____

(give location) 119 Orth Dr New Carlisle OH 45344

on the 21 day of MAY, 2024 at 11:24p A.M. / P.M.

(Date)

(Month)

(Year)

(Time)

Statement:

I Sent my wife to get my beligerantly drunk friend, she brought him home where he attacked straight out of the car throwing punches and tackling. I yelled for help for anyone around me - Neighbors came out to help seperate. Things went to the ground once more, cops showed up - Benny ran.

Injuries = _____ Want to press charges for Assault

Slammed on ground

Ear lobe bleeding

elbow bleeding

Shoulder bleeding

Ribs hurt

Will see med. atn tomorrow Am

Are you currently under the influence of alcohol or drugs? NO

Signature: _____ Deputy: Derringer Unit #: 109

Print Name: _____ Deputy: _____ Unit #: _____

Phone: _____ Division: _____

Dat _____

Soci _____

Hgt: _____

Clark County Sheriff's Office
120 N. Fountain Avenue
Springfield, OH 45502

Clark County Sheriff's Office

Official Statement

Date: 5/21/2024

Time: 11:23p

Case Number: 24-11980

I, Kayla Sanford do hereby make the following statement of my own free will and accord concerning assault which occurred at (give location) 119 Orth Dr New Carlisle OH 45344 on the 21 day of May, 20 24 at 11:24 A.M. / P.M.
(Date) (Month) (Year) (Time)

Statement:

I got a call ~~from~~ from CCSO to pick up Benjamin Roberts from an accident. I picked him up, he got in the backseat - he was screaming drunken nonsense the whole way home - got into a verbal argument w/ my husband over the phone - when I pulled into the driveway Benny jumped out of the car before I even parked and started fighting my husband - punches, tackling all over the front yard / driveway. I called police to get him to stop, when he saw the cop lights he ran off down orth.

Are you currently under the influence of alcohol or drugs? No

Witnesses: _____

Signed: Kayla Sanford

E-mail: KLORAE94@GMAIL.COM

Address: 119 Orth Dr New Carlisle OH 45344

Deputy: Derringer

Unit #: 109

Deputy: _____

Unit #: _____

Division: _____

Phone Number: (937) 360-1868

Date of Birth: 12/13/1994 Age: 29

Social Security Number: _____

Hgt: 5'3" Wgt: 170 Hair: Br Eyes: Gr

Clark County Sheriff's Office
120 N. Fountain Avenue
Springfield, OH 45502