

SSN Redacted

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 Pledged 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. 24crb2935

Also see 24CKA 2933
CLARK COUNTY MUNICIPAL COURT
OF
SPRINGFIELD, OHIO
Jail
11/25

THE STATE OF OHIO

vs.

AARON MATTHEW TOMS

3454 Folk Ream Rd. Apt. LOT 231,
Springfield, OH 45502-

DOB: 2/7/1980

* * * - * - 7450

W/M - 509/164 - BRO/HAZ

CHARGE: Domestic Violence

In violation of Section 2919.25(A) of the Ohio
Revised Code.

PENALTY:

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

BY DR

FILED
SHEILA E. RICE, CLERK
MUNICIPAL COURT
2024 NOV 25 AM 8:51

Date of Arrest: 11/24/2024 11:38:00PM

Date of Arraignment: 11/25/2024 10:30:00AM

Bond Posted - Cash - Surety

Amount:

In Jail

Criminal Complaint

THE STATE OF OHIO
CLARK COUNTY

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

Defendant:

AARON MATTHEW TOMS
3454 Folk Ream Rd. Apt. LOT 231,
Springfield, OH 45502-
DOB: February 07, 1980
SSAN: * * * - * * - 7450
W/M - 509/164 - BRO/HAZ

Criminal Charge

Domestic Violence

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 D POLLOCK who being duly sworn states that on or about November 24, 2024, one AARON TOMS In the Township of German, County of Clark, State of Ohio did:

knowingly cause or attempt to cause physical harm to a family or household member.

TO WIT:

The defendant, Aaron Toms, knowingly caused physical harm to his live in boyfriend, by cutting his left thigh with a knife causing visible injury.

In violation of Section 2919.25(A) of the Ohio Revised Code.

PENALTY:

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

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

For Court Use Only

Court Case# ____ - CR - ____ - ____
BCI&I ITN Number:
Law Enforcement Case Number: 24-CCSO00029398

Deputy D. Pollock

Complainant: Deputy D Pollock

*Sworn to and subscribed before me by the
Complainant on November 25, 2024*

St. Sh. Elmer

**Notary Public/Authorized Peace
Officer/Clerk of Court**

Court Date: 11/25/2024 10:30:00AM
Defendant Placed in Jail

Court Copy

Defendant Copy

Return Copy

Extra Copy

The State of Ohio ss:
Clark County

Court Case # CR-_____

The Affiant, Deputy D Pollock, being first sworn, says there is probable cause to believe the defendant, Aaron Matthew Toms, committed an offense based on the summary of facts below:

Your Honor,

On November 25th 2024, deputies were dispatched to _____ in reference to a 911 call mapping to this address. Dispatch advised deputies that they heard someone screaming yelling for help and was crying.

Upon arrival, I spoke with the reportee, who was Aaron Toms. Mr. Toms was sitting on the front porch when I arrived and he advised me that his live in boyfriend, _____ had assaulted him. Mr. Toms advised me that _____ was upset because his phone was not working, and that Aaron was trying to get his phone back on. _____ became upset that it was taking so long and Mr. Toms advised that _____ began to assault him. I had Aaron show me where he was assaulted at, and he showed me his face, and upper thigh to which I did not see any signs of physical injuries.

I then went inside to speak with _____, and he said that they both got into an argument and Mr. Toms had a knife and stabbed him with it. I asked _____ to show me where he was stabbed at, and he started to show me and then did not want to cooperate. Mr. Carranza then went back on his story advising that nothing happened and wanted deputies out of his house.

I stepped back outside, and began to speak with Aaron again to ask him about the knife. Aaron advised that he never had a knife and stated that _____ had cut himself. _____ I then came back outside and stated that he would be willing to speak with deputies about what happened. I spoke with

_____ and he advised that he caught Aaron cheating, which caused a verbal argument between the two. _____ I advised that sometime during the argument, Aaron had one of the kitchen knives and was attempting to cut him with it. I did observe multiple holes in _____ clothing, that appeared to be stab marks. _____ then showed me his left thigh, which did have a fresh laceration and there was also a hole on his pants that lined up with the laceration.

Deputy Garman did find a black kitchen knife that was on the floor of the kitchen. _____ was asked if that was the knife, and _____ advised that it was.

I asked both parties if they were willing to fill out written statements and both parties advised yes. Both parties were also asked if they wanted to be scene by medics, and they both refused.

When inside the trailer, both parties refused to fill out any type of statements. At that time, Mr. Toms was detained and placed into the back of my cruiser.

I transported Mr. Toms to the Clark County Jail, where he will be booked and housed on one count of domestic violence and one count of felonious assault.

Deputy Garman stayed on scene with _____ to go over the domestic violence paperwork, and to contact an advocate for him.

Once at the jail, Mr. Toms advised that he would fill out a statement. Mr. Toms filled out a written statement in booking. I also took pictures of Mr. Toms of the areas he said he was assaulted at. Mr. Toms went back to the shower with one of the corrections officers, and I was advised he had multiple scratches on his back as well. I did take photos of his back as well.

A CCH was ran on Aaron, and he has no prior convictions of domestic violence or assault.

I spoke with Deputy Garman later on to collect paperwork from him, and he advised me that Mr.

I refused to fill out a statement, probably cause form, but did answer the questions on the domestic violence paper. Deputy Garman also contacted an on call advocate to speak with I on scene.

Defendant:

Aaron Matthew Toms

Further Affiant Sayeth Not.

Deputy D. Palko
Affiant Signature
CCSO
Affiant Address & Phone

Sworn to and subscribed before me by the
Affiant on 11/25/2024
Sgt. S.A. Elliff
Notary Public/Authorized Peace
Officer/Clerk of Court

Law Enforcement Arrest Report

Name: TOMS, Aaron Matthew		Race: <input type="checkbox"/> W	Gender: <input type="checkbox"/> M	Height: <input type="checkbox"/> 509	Weight: <input type="checkbox"/> 164	Hair: <input type="checkbox"/> BRO	Eyes: <input type="checkbox"/> HAZ	Build: <input type="checkbox"/>	Case Number: 24-CCSO00029398
D.O.B. 02/07/1980	Age at time of offense: 44 Years 9 Months	SSN: * * * - * * - 7450	FBI#: <input type="checkbox"/>	BCI#: <input type="checkbox"/>	ITN#:				

Address: 3457 Folk Ream Rd. Apt. LOT 231, Springfield, OH		Phone: 937-287-0718	P.O.B. (City & State): Unknown
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Assigning Agency: 45502	Date/Time of Arrest: 11/24/2024 11:58:00PM	On Probation: <input type="checkbox"/> Yes If yes, P.O.'s Name
		On Parole: <input type="checkbox"/> No

Location of Occurrence / Arrest / Both:		Township or County: German Township	Driver's License #: <input type="checkbox"/>	Driver's License State OH
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Employment: <input type="checkbox"/>	Employment Address: , OH	Employment Phone: <input type="checkbox"/>		
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Vehicle License #: <input type="checkbox"/>	Vehicle State: <input type="checkbox"/>	Vehicle License Type: <input type="checkbox"/>	Vehicle Year: <input type="checkbox"/>	Vehicle Make: <input type="checkbox"/>	Vehicle Model: <input type="checkbox"/>	Vehicle Style: <input type="checkbox"/>
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Vehicle Color: <input type="checkbox"/>	Vehicle VIN #: <input type="checkbox"/>	Vehicle Identifiers: <input type="checkbox"/>
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Affiant: Deputy D Pollock	Transporting Officers: <input type="checkbox"/>	Badge/Unit #: <input type="checkbox"/>
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CHARGE(S) AT TIME OF ARREST, CODE NUMBER - PENALTY		
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FELONIOUS ASSAULT - 2903.11(A)(2) - F2

The defendant, Aaron Toms, knowingly attempted to cause serious physical harm to his live in boyfriend, cutting him with a knife causing visible injury.

DOMESTIC VIOLENCE - 2919.25(A) - M1

The defendant, Aaron Toms, knowingly caused physical harm to his live in boyfriend, by cutting his left thigh with a knife causing visible injury.

Victim: <input type="checkbox"/> Sick	Treated by: <input checked="" type="checkbox"/> Refused	Transferred to: <input type="checkbox"/> Squad	Hospital: <input type="checkbox"/> Community	Doctor: <input type="checkbox"/>
<input type="checkbox"/> NA	<input checked="" type="checkbox"/> Injured	<input type="checkbox"/> Squad	<input type="checkbox"/> Hospital	Hospital by: <input type="checkbox"/> P.O.V. <input type="checkbox"/> Mercy <input type="checkbox"/> Other

Victim Description of Sickness/Injury/Condition: Intoxicated Laceration to left thigh				
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Arrestee: <input type="checkbox"/> Sick	Treated by: <input checked="" type="checkbox"/> Refused	Transferred to: <input type="checkbox"/> Squad	Hospital: <input type="checkbox"/> Community	Doctor: <input type="checkbox"/>
<input type="checkbox"/> NA	<input checked="" type="checkbox"/> Injured	<input type="checkbox"/> Squad	<input type="checkbox"/> Hospital	Hospital by: <input type="checkbox"/> P.O.V. <input type="checkbox"/> Mercy <input type="checkbox"/> Other

Arrestee Description of Sickness/Injury/Condition: Intoxicated Scratches on back				
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Arrestee Juvenile? Parent/Legal Guardian Name & Address: <input type="checkbox"/>				
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Arrested Juvenile <input type="checkbox"/> Placed in DH	<input type="checkbox"/> Released to Parent	Parents <input type="checkbox"/> By Arresting Officer	<input type="checkbox"/> By Dispatcher	Date Notified: <input type="checkbox"/>
Disposition: <input type="checkbox"/> Taken to HQ	<input type="checkbox"/> Other	Notified: <input type="checkbox"/> By Transfer Officer	<input type="checkbox"/> By DH Personnel	<input type="checkbox"/> Other

Witnesses: <input type="checkbox"/>				
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Deputy M Garman	3454 Folk Ream Rd. Ste/Apt 231 Springfield, OH 45505-	937-536-2961
Deputy D Pollock	120 N. Fountain Ave. Springfield, OH 45502-	937-328-2560
	120 N. Fountain Ave. Springfield, OH 45502-	937-328-2560

Crash <input type="checkbox"/> Yes	Was OH1 <input type="checkbox"/> Yes	Arrestee have <input type="checkbox"/> Yes	Did Affiant <input type="checkbox"/> Yes	If not, who <input type="checkbox"/>	Vehicle searched? <input type="checkbox"/> Yes
occur? <input type="checkbox"/> No	completed? <input type="checkbox"/> No	insurance? <input type="checkbox"/> Yes	witness driving? <input type="checkbox"/> Yes	witnessed driving? <input type="checkbox"/>	<input type="checkbox"/> No

Vehicle <input type="checkbox"/> IMP	If no one witnessed driving, how is exact time of vehicle operation established? <input type="checkbox"/> NA				DUI Impaired Driver Report prepared? <input type="checkbox"/> Yes
Disposition: <input type="checkbox"/> PTO					<input type="checkbox"/> No

Vehicle held <input type="checkbox"/> Yes	Arrestee make <input type="checkbox"/> Yes	Did Arrestee make <input checked="" type="checkbox"/> Yes	<input type="checkbox"/> Written Statement	<input type="checkbox"/> Verbal	Written summaries of statements prepared? <input type="checkbox"/> Yes
for prints? <input type="checkbox"/> No	admission of guilt? <input checked="" type="checkbox"/> No	statement? <input type="checkbox"/> No	<input type="checkbox"/> Taped Audio Statement	<input checked="" type="checkbox"/> Other BWC	<input type="checkbox"/> No

Arrestee identified <input checked="" type="checkbox"/> Yes	<input type="checkbox"/> Photo Array	<input type="checkbox"/> Affiant Witnessed Crime	Photos of <input type="checkbox"/> Yes	Photos taken by: <input type="checkbox"/>	Scene processed <input type="checkbox"/> Yes	Physical evidence <input type="checkbox"/> Yes
by Witness? <input type="checkbox"/> No	<input type="checkbox"/> Line-Up	<input checked="" type="checkbox"/> At Scene	<input type="checkbox"/> Taken back to Scene	<input type="checkbox"/> No	<input type="checkbox"/> No	<input type="checkbox"/> at scene? <input checked="" type="checkbox"/> No

Property Receipt #:	Copy of receipt or <input type="checkbox"/> Yes	<input type="checkbox"/> NA	inventory attached? <input type="checkbox"/> No - If no, list property: _____	Lab Request Attached <input type="checkbox"/>
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Were any physical or mental examinations or scientific tests conducted in connection with this case? <input type="checkbox"/> Yes - If yes, please specify _____			<input type="checkbox"/> No	<input type="checkbox"/> Lab Request Attached
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Signature of Officer(s): D. Pollock	Supervisor Signature: Sgt. S. E. Elliott	Signature Book-In: <input type="checkbox"/>	Book-In Date/Time: <input type="checkbox"/>
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Date Printed: 11/25/2024

Witness List

Law Enforcement Case Number:
24-CCSO00029398

11/25/2024

Name	Address	Home Phone	Witness Stmt
POLLOCK, Deputy D	120 N.Fountain Ave., Springfield, OH 45502-	937-328-2560	
GARMAN, Deputy M	120 N.Fountain Ave., Springfield, OH 45502-	937-328-2560	