

SSN Redacted

Date	COURT ACTION, ORDERS, ENTRIES		
Plea:	<input type="checkbox"/> Guilty	<input type="checkbox"/> Not Guilty	<input type="checkbox"/> No Contest
	<input type="checkbox"/> 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			
<hr/> <hr/> <hr/> <hr/>			
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			
<hr/> <hr/> <hr/>			
<input type="checkbox"/> Defendant Indicted by the <input type="checkbox"/> The Court Binds Defendant to the Clark County Grand Jury.			
<hr/> <hr/> <hr/>			
_____ Judge			
Notice of Appeal Filed			
Attorney: _____			
Address: _____			
Telephone No.: _____			

Case No. 25CRB001689

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

THE STATE OF OHIO

VS.

DAVID DANIEL ROSE

4641 Dayton Springfield Rd.

Springfield, OH 45502-

DOB: 4/7/1970

* * * - * * - 5827

W/M - 603/240 - BRO/BLU

CHARGE: Violating Protection Order Or Consent Agreement

In violation of Section 2919.27(A)(1) of the Ohio Revised Code.

PENALTY:

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

FOR WARRANTY ONLY

Date of Arrest:

Date of Arraignment:

Bond Posted - Cash - Surety

Amount:

Criminal Complaint

THE STATE OF OHIO
CLARK COUNTY

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

Defendant:

DAVID DANIEL ROSE
4641 Dayton Springfield Rd.
Springfield, OH 45502-
DOB: April 07, 1970
SSAN: * * * - * * - 5827
W/M - 603/240 - BRO/BLU

Criminal Charge

Violating Protection Order Or Consent Agreement

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 OFFICER OFFICER N. CRONE who being duly sworn states that on or about March 10, 2025, one DAVID ROSE In the City of Springfield, County of Clark, State of Ohio did:
recklessly violate the terms of a protection order issued or consent agreement approved pursuant to section 2919.26 or 3113.31 of the Revised Code.

TO WIT:

The defendant violated a protection order regarding the victim by interfering with the victim's residence. The protection order was served 07/23/2024 by mail. Protection order case number 24DP0254.

In violation of Section 2919.27(A)(1) of the Ohio Revised Code.

FOR WARRANT ONLY

PENALTY:

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



BRIAN P TAYLOR
Notary Public
State of Ohio
My Comm. Expires
April 22, 2026

Off. N. Crone

Complainant: Officer Officer N. Crone

*Sworn to and subscribed before me by the
Complainant on March 10, 2025*

B. P. Taylor

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:
25-SPD000010203

The State of Ohio ss:
Clark County

Court Case # CR-_____

The Affiant, Officer Officer N. Crone , being first sworn, says there is probable cause to believe the defendant, David Daniel Rose , committed an offense based on the summary of facts below:

On 03/10/2025 at approximately 1530 hours, Officer Davis and Officer Crone (532E) were dispatched to Project Women located at 525 E Home Rd in reference to a protection order violation.

Upon arrival, Officers spoke to the caller, . who advised her husband, David Rose violated a civil protection order on 03/10/2025. . stated Mr. Rose contacted "CJ's" who provides trash removal services for her residence located at . advised CJ's did not pick up her trash on 03/10/2025. . stated she contacted CJ's at around 1234 hours on 03/10/2025 who advised Mr. Rose called and transferred the trash service to his residence located at 4641 Dayton Springfield Rd. . advised that was the reason her trash was not picked up.

provided officers the served civil protection order between her and Mr. Rose. The protection order was served through the mail on 07/23/2024 (case number 24DP0254).

Section 4 of the protection order stated Mr. Rose shall not enter or interfere with . residence. Section 12 of the protection order stated Mr. Rose shall not cause or encourage any of the following sections, including section 4.

advised Mr. Rose interfered with her residence by switching the trash service to his address resulting in her trash not being picked up on 03/10/2025.

Mr. Rose's listed address on the protection order was 4641 Dayton Springfield Rd.

Warrants have been requested on David Rose for Violating Protection Order.

Defendant:

David Daniel Rose

FOR WARRANT ONLY

Further Affiant Sayeth Not.



BRIAN P TAYLOR
Notary Public
State of Ohio
My Comm. Expires
April 22, 2026

Off. N. Crone

Affiant Signature

SPD

Affiant Address & Phone

*Sworn to and subscribed before me by the
Affiant on 3/10/2025*

[Signature]
Notary Public/Authorized Peace
Officer/Clerk of Court

1960-1961

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Law Enforcement Arrest Report

Name: ROSE, David Daniel	Race: W	Gender: M	Height: 603	Weight: 240	Hair: BRO	Eyes: BLU	Build: Large	Case Number: 25-SPD000010203
D.O.B. 04/07/1970	Age at time of offense: 54 Years 11 Months	SSN: _____	FBI#: _____	BCI#: _____	ITN#: _____			

Address: 4641 Dayton Springfield Rd. Springfield, OH 45502-	Phone: 937-917-9411	P.O.B. (City & State): Springfield, OH					
Arresting Agency: Springfield Police Division	Date/Time of Arrest: WARRANT	On Probation: <input type="checkbox"/> Yes If yes, P.O.'s Name _____					
Location of Occurrence / Arrest / Both: _____	Township or County: Clark County	On Parole: <input type="checkbox"/> No					
Employment: None	Employment Address: _____	Driver's License #: RB471828					
Vehicle License #: _____	Vehicle State: _____	Vehicle License Type: _____	Vehicle Year: _____	Vehicle Make: _____	Vehicle Model: _____	Vehicle Style: _____	Employment Phone: _____
Vehicle Color: _____	Vehicle VIN #: _____	Vehicle Identifiers: _____					
Affiant: Officer Officer N. Crone	Transporting Officers: _____	Badge/Unit #: _____					

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

VIOLATING PROTECTION ORDER OR CONSENT AGREEMENT - 2919.27(A)(1) - M1

The defendant violated a protection order regarding the victim by interfering with the victim's residence. The protection order was served 07/23/2024 by mail. Protection order case number 24DP0254.

Victim: <input type="checkbox"/> Sick <input 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 <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: None				
Arrestee: <input type="checkbox"/> Sick <input 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 <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: N/A				
Arrestee Juvenile? Parent/Legal Guardian Name & Address: N/A				
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:
 Officer N. Crone, OH 937-324-7685
 Officer Davis, Spd, OH

FOR WARRANT ONLY

Crash <input type="checkbox"/> Yes <input type="checkbox"/> No	Was Off duty <input type="checkbox"/> Yes <input type="checkbox"/> No	Arrestee have <input type="checkbox"/> Yes <input type="checkbox"/> No	Did Affiant <input type="checkbox"/> Yes <input type="checkbox"/> No	If not, who <input type="checkbox"/> witness driving? <input type="checkbox"/> Yes <input type="checkbox"/> No	Vehicle <input type="checkbox"/> Yes <input type="checkbox"/> No	searched? <input type="checkbox"/> Yes <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 <input type="checkbox"/> No
Disposition: <input type="checkbox"/> RTO					<input type="checkbox"/> NA	<input type="checkbox"/> NA
Vehicle held <input type="checkbox"/> Yes <input type="checkbox"/> No	Arrestee make <input type="checkbox"/> Yes <input type="checkbox"/> No	Did Arrestee make <input type="checkbox"/> Yes <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	
for prints? <input type="checkbox"/> Yes <input type="checkbox"/> No	admission of guilt? <input type="checkbox"/> Yes <input type="checkbox"/> No	statement? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Arrestee identified <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Photo Array <input type="checkbox"/> Line-Up	<input type="checkbox"/> Affiant Witnessed Crime <input type="checkbox"/> At Scene	Photos of <input type="checkbox"/> Yes <input type="checkbox"/> No	Photos taken by: <input type="checkbox"/> Yes <input type="checkbox"/> No	Scene processed <input type="checkbox"/> Yes <input type="checkbox"/> No	Physical evidence <input type="checkbox"/> Yes <input type="checkbox"/> No
by Witness? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Taken back to Scene	scene/victim? <input type="checkbox"/> Yes <input type="checkbox"/> No			for prints? <input type="checkbox"/> Yes <input type="checkbox"/> No	at scene? <input type="checkbox"/> Yes <input type="checkbox"/> No
Property Receipt #: N/A	Copy of receipt or <input type="checkbox"/> Yes <input type="checkbox"/> NA	inventory attached? <input type="checkbox"/> Yes <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): **Off. n/a for** Supervisor Signature: **Sgt. Taylor** Signature Book-In: _____ Book-In Date/Time: _____

Date Printed: 3/10/2025

[REDACTED]

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