

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. 25CRB01343

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

THE STATE OF OHIO

VS.

GAYE FRANCIS REISSLAND

2535 Bridgestone Dr.
Springfield, OH 43219-
DOB: 1/5/1963
*** - ** -
B/F - 503/230 - BLK/BRO

**CHARGE: Illegal Use Of A Tracking Device
Or Application**

In violation of Section 2903.216 of the Ohio
Revised Code.

PENALTY:

M1
6 months confinement or 1,000 dollar fine

FOR WARRANT ONLY

Date of Arrest:
Date of Arraignment:
Bond Posted - Cash - Surety
Amount:

FILED
CLERK
MAY 19 2025
CLERK
DEPUTY

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:

GAYE FRANCIS REISSLAND

2535 Bridgestone Dr.

Springfield, OH 43219-

DOB: January 05, 1963

SSAN: * * * - * * *

B/F - 503/230 - BLK/BRO

Criminal Charge

Illegal Use Of A Tracking Device Or Application

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 BOWER who being duly sworn states that as a continuous course of conduct from on or about September 01, 2024, to on or about May 14, 2025, one GAYE REISSLAND In the City of Springfield, County of Clark, State of Ohio did:

"Tracking device" means an electronic or mechanical device that permits a person to remotely determine or track the position or movement of another person or another person's property, including an electronic monitoring device.

(B) Except as otherwise provided in division (D) of this section, no person shall knowingly do either of the following:

(1) Install a tracking device or tracking application on another person's property without the other person's consent or cause a tracking device or tracking application to track the position or movement of another person or another person's property without the other person's consent

TO WIT:

The defendfant placed an air tag in the gifts given to her daughter in order to secretly track her location.

In violation of Section 2903.216 of the Ohio Revised Code.

PENALTY:

M1

FOR WARRANT ONLY



NICKOLAS E HOLT
Notary Public
State of Ohio
My Comm. Expires
June 7, 2026

Complainant: Officer Bower

Sworn to and subscribed before me by the
Complainant on May 15, 2025

**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-SPD000204439

The State of Ohio
SS:
Clark County

Court Case # CR-_____

The Affiant, Officer Bower, being first sworn, says there is probable cause to believe the defendant, Gaye Francis Reissland, committed an offense based on the summary of facts below:

On 05-14-2025 at approximately 2250 hours I Off. R. Bower was dispatched to _____ in regard to a female being tracked by an air tag device. Upon arrival at the scene I Off. Bower approached the residence and was met by _____ stated that her mother gifted her a bean bag chair and a mattress for _____ stated that her mother and her are not close and she does not want her mother to know where she is staying as she gives information to _____ child's father who has been physically abusive with her.

_____ stated that she had the mattress her mother gave her, and the bean bag chair in her daughter's room. _____ stated that she heard an odd beeping coming from the mattress and bean bag chair. _____ advised she then began to cut into the bean bag chair and empty the inside out. At this time she found an air tag. _____ also found an air tag in a mattress gifted to her by her mother, Gaye Reissland.

_____ stated that a friend picked up these items from her mother Gaye Reissland, and brought them to her. _____ advised that her mother said to a friend something along the lines of she has her way of tracking _____, and stated she knew she was in Springfield. _____ requested charges be filed. I took photos of the crime scene.

_____ stated her mother gave her these items in September of last year, but only knew about them just now because they were beeping.

A warrant is being requested on Gaye Reissland for illegal tracking.

Defendant:

Gaye Francis Reissland

FOR WARRANT ONLY

Further Affiant Sayeth Not.



NICKOLAS E HOLT
Notary Public
State of Ohio
My Comm. Expires
June 7, 2026

Affiant Signature

Affiant Address & Phone

Sworn to and subscribed before me by the
Affiant on 5/15/2025

Notary Public/Authorized Peace
Officer/Clerk of Court

Law Enforcement Arrest Report

Name: REISSLAND, Gaye Francis		Race: B	Gender: F	Height: 503	Weight: 230	Hair: BLK	Eyes: BRO	Build:	Case Number: 25-SPD00020-439
D.O.B.: 01/05/1963	Age at time of offense: 61 Years 7 Months	SSN:	FBI#:	BCI#:	ITN#:				

Address: 2535 Bridgestone Dr. Springfield, OH 43219-		Phone: 614-477-9095	P.O.B. (City & State): Unknown
Arresting Agency: Springfield Police Division		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: 1421 Warder St.		Township or County: Clark County	Driver's License #: OH
Employment:	Employment Address: , OH	Employment Phone:	
Vehicle License #:	Vehicle State:	Vehicle License Type:	Vehicle Year:
Vehicle Color:	Vehicle VIN #:	Vehicle Make:	Vehicle Model:
Vehicle Identifiers:		Vehicle Style:	
Affiant: Officer Bower		Transporting Officers:	Badge/Unit #:

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

ILLEGAL USE OF A TRACKING DEVICE OR APPLICATION - 2903.216 - M1

The defendant placed an air tag in the gifts given to her daughter in order to secretly track her location.

Victim: <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:
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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:
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Arrestee Description of Sickness/Injury/Condition:

<input 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:
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Witnesses:
Officer Bower 130 N. Fountain Ave. Springfield, OH 45502- 937-324-7685
Gaye Reissland 2535 Bridgestone Dr. Columbus, OH 43219- 614-477-9095

FOR WARRANT ONLY

Crash <input type="checkbox"/> Yes occur? <input type="checkbox"/> No	Was OHI <input type="checkbox"/> Yes completed? <input type="checkbox"/> No	Arrestee have <input type="checkbox"/> Yes insurance? <input type="checkbox"/> No	Did Affiant <input type="checkbox"/> Yes witness driving? <input type="checkbox"/> No	If not, who <input type="checkbox"/> Yes witnessed driving? <input type="checkbox"/> No	Vehicle <input type="checkbox"/> Yes searched? <input 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 type="checkbox"/> NA	DUI Impaired Driver <input type="checkbox"/> Yes 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 a <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 checked="" type="checkbox"/> Other		Written summaries of <input type="checkbox"/> Yes statements prepared? <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: Off Bower	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):	Supervisor Signature:	Signature Book-In:	Book-In Date/Time:
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Date Printed: 5/15/2025