

State of Arizona
COMMISSION ON JUDICIAL CONDUCT

Disposition of Complaint 22-217

Judge:

Complainant:

ORDER

April 12, 2023

The Complainant alleged two justices of the peace heard his criminal case despite a lack of jurisdiction over the case.

The role of the Commission on Judicial Conduct is to impartially determine whether a judicial officer has engaged in conduct that violates the Arizona Code of Judicial Conduct or Article 6.1 of the Arizona Constitution. There must be clear and convincing evidence of such a violation in order for the Commission to take disciplinary action against a judicial officer.

The Commission does not have jurisdiction to overturn, amend, or remand a judicial officer's legal rulings. The Commission reviewed all relevant available information and concluded there was not clear and convincing evidence of ethical misconduct in this matter. The complaint is therefore dismissed pursuant to Commission Rules 16(a) and 23(a).

Commission member Colleen E. Concannon did not participate in the consideration of this matter.

Copies of this order were distributed to all appropriate persons on April 12, 2023.

CONFIDENTIAL

State of Arizona
Commission on Judicial Conduct
1501 W. Washington Street, Suite 229
Phoenix, Arizona 85007

FOR OFFICE USE ONLY**2022-217****COMPLAINT AGAINST A JUDGE**

Name: _____ Judge's Name: _____

Instructions: Use this form or plain paper of the same size to file a complaint. Describe in your own words what you believe the judge did that constitutes judicial misconduct. Be specific and list all of the names, dates, times, and places that will help the commission understand your concerns. Additional pages may be attached along with copies (not originals) of relevant court documents. Please complete one side of the paper only, and keep a copy of the complaint for your records.

CONVICTED OF MAXIMUM VIOLATION OF
A LAW THAT DOES NOT EXIST BY LOCATION
IN A COURT THAT HAS NO JURISDICTION
BY TERRITORY TRAFFIC TICKET WRITTEN
IN A FEDERAL PASS ZONE
FURTHER THE ONLY EVIDENCE PRESENTED
WAS FAKE- A BLOOD TEST DONE IN 30 DAYS
WITH NO ORIGIN OR FOUNDATION
ALL EVIDENCE WAS PRESENT WHEN
REQUESTED A DISMISSAL, THEN RE-FILED SEVERAL
MONTHS LATER
THESE CHARGES HAD BEEN THROWN OUT BY THE
ORIGINAL JUDGE SAYING THE STATE FAILED TO PROVIDE
EVIDENCE OF A LAW
THIS WENT ON FOR ! I EVEN DISMISSED
MY LAWYER AND FILED A MOTION TO DISMISS ON
THESE GROUNDS: NO LAW! FALSE EVIDENCE!
NO JURISDICTION!
MY MOTION RECEIVED NO ANSWER!
SEE ~~THE~~ INCLUDED DOCUMENTS
REFERRED TO YOU BY THE OFFICE OF THE

CONFIDENTIAL

State of Arizona
Commission on Judicial Conduct
1501 W. Washington Street, Suite 229
Phoenix, Arizona 85007

FOR OFFICE USE ONLY

--

COMPLAINT AGAINST A JUDGE

Name: _____ Judge's Name: _____

Instructions: Use this form or plain paper of the same size to file a complaint. Describe in your own words what you believe the judge did that constitutes judicial misconduct. Be specific and list all of the names, dates, times, and places that will help the commission understand your concerns. Additional pages may be attached along with copies (not originals) of relevant court documents. Please complete one side of the paper only, and keep a copy of the complaint for your records.

I WAS RECENTLY ARRESTED AGAIN ON
A NON EXISTANT WARRANT
(SEE DOCUMENTS) AND ANOTHER
\$ WAS STOLEN FROM ME!

100% BRADY MATERIAL REC SITE IN NATIONAL FOREST



ARIZONA TRAFFIC TICKET AND COMPLAINT

IR16019766

Complaint	OLN	Seized <input checked="" type="checkbox"/> Yes	In Possession <input checked="" type="checkbox"/> Yes	State	Class	Military <input type="checkbox"/> Yes	<input type="checkbox"/> COLLISION <input type="checkbox"/> FATALITY <input type="checkbox"/> SERIOUS INJURY	<input type="checkbox"/> COMMERCIAL <input type="checkbox"/> HAZ MAT <input type="checkbox"/> 16 PASSENGER
-----------	-----	---	--	-------	-------	--	--	--

Name: First Middle Last Spanish Speaking Only ☐ Other Language

Residential Address City State Zip Code Phone

Gender Eyes Hair Height Weight Origin DOB Endorsements Restrictions

Business Address City State Zip Code Business Phone

Year Color Make Model Style License Plate Seized ☐ Yes State Expire. Date Vehicle Identification Number (VIN)

Registered Owner Address City State Zip Code

THE UNDERSIGNED CERTIFIES THAT:

ON Date Time SPEED: Approx Posted R&P Speed Measurement Device Equipment Number Direction Of Travel Lane

AT On-Highway Highway Milepost Location NO SUCH STREET Precinct County STATE

THE DEFENDANT COMMITTED THE FOLLOWING:

A Section Statute Violation ☐ Domestic Violence Case

Docket Number Disposition Codes Disposition Date Sanction ☐ Criminal ☐ Civil Traffic ☒ Criminal Traffic ☐ Petty Offense

B Section Statute Violation DUI W/BAC OF .08 OR MORE ☐ Domestic Violence Case

Docket Number Disposition Codes Disposition Date Sanction ☐ Criminal ☐ Civil Traffic ☒ Criminal Traffic ☐ Petty Offense

C Section Statute Violation EXTREME DUI-BAC .15-.20 ☐ Domestic Violence Case

Docket Number Disposition Codes Disposition Date Sanction ☐ Criminal ☐ Civil Traffic ☒ Criminal Traffic ☐ Petty Offense

D Section Statute Violation LIQUOR-POSS OPEN CONT IN VEH ☐ Domestic Violence Case

Docket Number Disposition Codes Disposition Date Sanction ☒ Criminal ☐ Civil Traffic ☐ Criminal Traffic ☐ Petty Offense

E Section Statute Violation EXTREME DUI-BAC > .20 ☐ Domestic Violence Case

Docket Number Disposition Codes Disposition Date Sanction ☐ Criminal ☐ Civil Traffic ☒ Criminal Traffic ☐ Petty Offense

You Must Appear At Court Court No. AT THE DATE AND TIME INDICATED: Date Time

Court Phone No. Business Address City State Zip Code

CRIMINAL: ☒ Without admitting guilt, I promise to appear as directed herein.

CIVIL: ☐ Without admitting responsibility, I acknowledge receipt of this complaint.

X Signature not Obtained ☐ VICTIM? ☐ VICTIM NOTIFIED? ☒ FINGERPRINTED? ☐ Yes ☒ No ☒ IN CUSTODY

I certify upon reasonable grounds, I believe the person named above committed the acts described and I have served a copy of this complaint upon the defendant.

COMPLAINANT BADGE NO. EVENT NUMBER



IMPORTANT NOTICE TO DEFENDANT

This is a true copy of the offense described in the complaint that will be filed in the designated court or hearing office. The offense for which you have been cited is a Civil Traffic violation, a Criminal offense, a Criminal Traffic offense, or a Petty offense. To determine which notice(s) applies to you, look at the box(es) checked under "the defendant committed the following".

CIVIL TRAFFIC: If the Civil Traffic box is checked, notice is hereby given that if you fail to appear as directed in this complaint, a default judgment will be entered against you, a civil sanction will be imposed, and your driver license or nonresident operating privilege will be suspended. Your driver license or nonresident operating privilege will remain suspended until the civil sanction is paid and you satisfy Motor Vehicle Division requirements (A.R.S. 28-1557[B](2)).

CRIMINAL OR PETTY OFFENSE: If the Criminal or Petty Offense box is checked, notice is hereby given that if you fail to appear in court as directed in this complaint, a warrant will be issued for your arrest (A.R.S. 13-3903.E).

CRIMINAL TRAFFIC: If the Criminal Traffic box is checked, notice is hereby given that if you fail to appear as directed in this complaint on a criminal charge, a warrant will be issued for your arrest and your driver license or nonresident operating privilege will be suspended (A.R.S. 28-1557[B](1)).

This shall act as an official receipt of the contact between you and the contact please feel free to contact us at

if you have any compliments, concerns, or suggestions for this facility or in writing:

Esto actuará como un recibo oficial entre el contacto que tenga usted y la Oficina del Aguacil del Condado de Maricopa. Si usted tiene algunos complementos,



PHLEBOTOMY BLOOD DRAW REPORT

CR #11111111

OTHER AGENCY ID NUMBER

SUSPECT	NAME		DATE OF BIRTH	
	STREET ADDRESS		CITY	
	CHARGES Extreme DUI			
REQUESTING AGENCY				
OFFICER ID NUMBER		OFFICER NAME (PRINT)	SEARCH WARRANT <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	CONSENT DRAW <input type="checkbox"/> YES <input type="checkbox"/> NO
PHLEBOTOMIST ID NO		PHLEBOTOMIST NAME (PRINT)	FELONY(PRESSING CIRCUMSTANCES) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
		AGENCY		
FIRST DRAW	DATE	TIME (24 HOUR)	PHYSICAL LOCATION OF BLOOD DRAWN	
	BLOOD KIT EXPIRATION (MO/YR)		EQUIPMENT USED Standard Blood Kit	
	BLOOD DRAWN FROM <input checked="" type="checkbox"/> LEFT ANTECUBITAL FOSSA <input type="checkbox"/> LEFT WRIST <input type="checkbox"/> LEFT HAND <input type="checkbox"/> RIGHT ANTECUBITAL FOSSA <input type="checkbox"/> RIGHT WRIST <input type="checkbox"/> RIGHT HAND			
SECOND DRAW	DATE	TIME (24 HOUR)	PHYSICAL LOCATION OF BLOOD DRAWN	
	BLOOD KIT EXPIRATION (MO/YR)		EQUIPMENT USED	
	BLOOD DRAWN FROM <input type="checkbox"/> LEFT ANTECUBITAL FOSSA <input type="checkbox"/> LEFT WRIST <input type="checkbox"/> LEFT HAND <input type="checkbox"/> RIGHT ANTECUBITAL FOSSA <input type="checkbox"/> RIGHT WRIST <input type="checkbox"/> RIGHT HAND			

COMMENTS:

Subject arrested for Extreme DUI
 Strong odor of alcoholic beverage emitting from breath
 Subject refused to consent to blood draw
 Search warrant obtained and served
 Draw table, hands and draw site sanitized prior to draw
 Two "full" gray-top vials successfully drawn
 Puncture site clotted within 1 minute

Subject did not complain of pain or discomfort during or post-draw

I drew the blood of the above named suspect using a NON-Alcoholic site cleaner.

PHLEBOTOMIST SIGNATURE: _____

ID NUMBER:

SINCE FIRED FOR MISCONDUCT BY

**THE COMMISSION'S POLICY IS
TO POST ONLY THE FIRST FIVE
PAGES OF ANY DISMISSED
COMPLAINT ON ITS WEBSITE.**

**FOR ACCESS TO THE
REMAINDER OF THE
COMPLAINT IN THIS MATTER,
PLEASE MAKE YOUR REQUEST
IN WRITING TO THE
COMMISSION ON JUDICIAL
CONDUCT AND REFERENCE
THE COMMISSION CASE
NUMBER IN YOUR REQUEST.**