

**EXHIBIT E**

COUNTY OF MCHENRY  
MCHENRY COUNTY DEPARTMENT OF HEALTH  
DIVISION OF VETERINARY PUBLIC HEALTH

**NOTICE OF ORDINANCE VIOLATION**

ACTIVITY NO. 21-046481 TICKET NO. 13800

Owner name Curtis Oats

Issued to Mailed

Address 4816 E Lake Shore Dr

City Wonder Lake State IL Zip 60097

Phone \_\_\_\_\_

Sex \_\_\_\_\_ Race \_\_\_\_\_ DOB \_\_\_\_\_

Name "JD"

Breed(s) Pomeranian

Color(s) Tan

Species Canine Sex J

The undersigned states that on 12/4/2021 1:00 am/pm  
In McHenry County the defendant above did unlawfully commit the following offense(s) in violation of Public Health Ordinance for McHenry County Illinois, Animal Control. Each animal constitutes a separate violation. Fines increase for second and subsequent offenses.

Drivers license number - \_\_\_\_\_

or verify State ID - \_\_\_\_\_

☒ 1<sup>st</sup> Offense ☐ 2<sup>nd</sup> Offense ☐ 3<sup>rd</sup> Offense ☐ 4<sup>th</sup> Offense \$ \_\_\_\_\_

Animal not currently immunized (8.04.890 (A)) \$ \_\_\_\_\_

Animal not currently registered in McHenry County (8.04.840 (A)) \$200

Animal running at large (8.04.870 (A)) \$ \_\_\_\_\_

Failure to do Rabies Observation/Release (8.04.880) \$ \_\_\_\_\_

Allowing a dog to bark, howl or whine (8.04.870 (K)) \$ \_\_\_\_\_

Failing to provide an animal with adequate shelter, water, food, humane care or veterinary care (8.04.920 (B)) \$ \_\_\_\_\_

Penalties, Fines, and Remedies (8.04.940) \$ \_\_\_\_\_

Other \$ \_\_\_\_\_

Total: \$200

Within 14 calendar days of receipt of this ticket you must:

1. Mail in amount of total fine(s) or
2. Pay in person at: McHenry County Animal Control Division of Veterinary Public Health 100 N. Virginia St, Crystal Lake IL 60014. (Monday, Tuesday, Thursday, Friday 8:00 am - 4:30 pm; Wednesday 8:00 am - 6:30 pm; Saturday 8:00 am - 2:30 pm)

If fines are not paid, a notice to appear in court will be issued and additional court fees and fines may be assessed.

Officer's Signature [Signature] Date 12/4/21

I HEREBY PLEAD GUILTY TO THE VIOLATION(S) NAMED ABOVE AND WAIVE TRIAL AND COURT HEARINGS

Signature \_\_\_\_\_

Amount Paid \_\_\_\_\_ Check No. \_\_\_\_\_ Cash \_\_\_\_\_ Received by \_\_\_\_\_

COUNTY OF MCHENRY  
MCHENRY COUNTY DEPARTMENT OF HEALTH  
DIVISION OF VETERINARY PUBLIC HEALTH

**NOTICE OF ORDINANCE VIOLATION**

ACTIVITY NO. 21-046481 TICKET NO. 13799

Owner name Curtis Oats

Issued to Mailed

Address 4816 E Lake Shore Dr

City Wonder Lake State IL Zip 60097

Phone \_\_\_\_\_

Sex \_\_\_\_\_ Race \_\_\_\_\_ DOB \_\_\_\_\_

Name "JD"

Breed(s) Pomeranian

Color(s) Tan

Species Canine Sex J

The undersigned states that on 12/4/2021 1:00 am/pm  
In McHenry County the defendant above did unlawfully commit the following offense(s) in violation of Public Health Ordinance for McHenry County Illinois, Animal Control. Each animal constitutes a separate violation. Fines increase for second and subsequent offenses.

Drivers license number - \_\_\_\_\_

or verify State ID - \_\_\_\_\_

☒ 1<sup>st</sup> Offense ☐ 2<sup>nd</sup> Offense ☐ 3<sup>rd</sup> Offense ☐ 4<sup>th</sup> Offense \$ \_\_\_\_\_

Animal not currently immunized (8.04.890 (A)) \$50

Animal not currently registered in McHenry County (8.04.840 (A)) \$ \_\_\_\_\_

Animal running at large (8.04.870 (A)) \$ \_\_\_\_\_

Failure to do Rabies Observation/Release (8.04.880) \$ \_\_\_\_\_

Allowing a dog to bark, howl or whine (8.04.870 (K)) \$ \_\_\_\_\_

Failing to provide an animal with adequate shelter, water, food, humane care or veterinary care (8.04.920 (B)) \$ \_\_\_\_\_

Penalties, Fines, and Remedies (8.04.940) \$ \_\_\_\_\_

Other \$ \_\_\_\_\_

Total: \$50

Within 14 calendar days of receipt of this ticket you must:

1. Mail in amount of total fine(s) or
2. Pay in person at: McHenry County Animal Control Division of Veterinary Public Health 100 N. Virginia St, Crystal Lake IL 60014. (Monday, Tuesday, Thursday, Friday 8:00 am - 4:30 pm; Wednesday 8:00 am - 6:30 pm; Saturday 8:00 am - 2:30 pm)

If fines are not paid, a notice to appear in court will be issued and additional court fees and fines may be assessed.

Officer's Signature [Signature] Date 12/4/21

I HEREBY PLEAD GUILTY TO THE VIOLATION(S) NAMED ABOVE AND WAIVE TRIAL AND COURT HEARINGS

Signature \_\_\_\_\_

Amount Paid \_\_\_\_\_ Check No. \_\_\_\_\_ Cash \_\_\_\_\_ Received by \_\_\_\_\_