

COMMONWEALTH OF PENNSYLVANIA
COUNTY OF **BUCKS**Magisterial District Number: **07-2-08**MDJ Hon. **REGINA ARMITAGE**
Address: **962 TOWN CENTER**
NEW BRITAIN, PA 18901Telephone: **215-230-7265****POLICE CRIMINAL COMPLAINT**
COMMONWEALTH OF PENNSYLVANIA
VS.

DEFENDANT:

(NAME and ADDRESS)

ARTHUR**HERRING****III**First Name Middle Name Last Name
258 N WEST END BLVD
QUAKERTOWN, PA 18951

Gen.

NCIC Extradition Code Type

- ☐ 1 - Felony Full ☐ 5 - Felony Pend. ☐ C - Misdemeanor Surrounding States ☐ Distance: _____
☐ 2 - Felony Ltd. ☐ 6 - Felony Pend. Extradition Determ. ☒ D - Misdemeanor No Extradition
☐ 3 - Felony Surrounding States ☐ A - Misdemeanor Full ☐ E - Misdemeanor Pending
☐ 4 - Felony No Ext. ☐ B - Misdemeanor Limited ☐ F - Misdemeanor Pending Extradition Determ.

DEFENDANT IDENTIFICATION INFORMATION

Docket Number	Date Filed	OTN/LiveScan Number	Complaint Number	Incident Number	Request Lab Service?
	04/27/2024		PA0093200-C000003114	2024-24-3634	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
GENDER	DOB	POB	Add'l. DOB	Co-Defendants? <input type="checkbox"/>	
<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	11/02/1953				
AKA	First Name	Middle Name	Last Name	Gen.	
RACE	<input checked="" type="checkbox"/> White	<input type="checkbox"/> Asian	<input type="checkbox"/> Black	<input type="checkbox"/> Native American	<input type="checkbox"/> Unknown
ETHNICITY	<input type="checkbox"/> Hispanic	<input checked="" type="checkbox"/> Non-Hispanic	<input type="checkbox"/> Unknown		
HAIR COLOR	<input checked="" type="checkbox"/> Gry (Gray)	<input type="checkbox"/> Red (Red/Aubn)	<input type="checkbox"/> SDY (Sandy)	<input type="checkbox"/> BLU (Blue)	<input type="checkbox"/> PLE (Purple)
	<input type="checkbox"/> Blk (Black)	<input type="checkbox"/> Ong (Orange)	<input type="checkbox"/> WHI (White)	<input type="checkbox"/> XXX (Ink./Bald)	<input type="checkbox"/> GRN (Green)
	<input type="checkbox"/> Bln (Blonde / Strawberry)				
EYE COLOR	<input type="checkbox"/> Blk (Black)	<input checked="" type="checkbox"/> Blu (Blue)	<input type="checkbox"/> BRO (Brown)	<input type="checkbox"/> GRN (Green)	<input type="checkbox"/> GRY (Gray)
	<input type="checkbox"/> HAZ (Hazel)	<input type="checkbox"/> MAR (Maroon)	<input type="checkbox"/> PNK (Pink)	<input type="checkbox"/> MUL (Multicolored)	<input type="checkbox"/> XXX (Unknown)
DNA	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO DNA Location				WEIGHT (lbs.)
FBI Number			MNU Number	140	
Defendant Fingerprinted	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				FT. HEIGHT in.
Fingerprint Classification					5 55

DEFENDANT VEHICLE INFORMATION

Plate #	State	Hazmat	Registration Sticker (MM/YY)	Comm'l Veh Ind.	School Veh.	Oth. NCIC Veh. Code	Reg. Same as Def.
LTN8346	PA	<input type="checkbox"/>	10/24	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>
VIN	Year	Make	Model	Style	Color		
1FAHP35N98W259914	2008	FORD	Focus, Ford	4D	GREEN		

Office of the attorney for the Commonwealth ☐ Approved ☐ Disapproved because: _____

(The attorney for the Commonwealth may require the complaint, arrest warrant affidavit, or both, be approved by the attorney for the Commonwealth prior to filing. See PA. R. Crim. P 507.)

(Name of the attorney for the Commonwealth - Please Print or Type)

(Signature of the attorney for the Commonwealth)

(Date)

I, **OFFICER ALEX KOMATICK****113/43450**

PSP/MPOETC - Assigned Affiant ID Number & Badge #

PA0093200

(Police Agency ORI Number)

of **NEW BRITAIN TOWNSHIP POLICE DEPARTMENT**

(Identify Department or Agency Represented and Political Subdivision)

do hereby state:

1. ☒ I accuse the above named defendant who lives at the address set forth above
☐ I accuse the defendant whose name is unknown to me but who is described as

- ☐ I accuse the defendant whose name and popular designation are unknown to me and whom I have therefore designated as John Doe or Jane Doe

with violating the penal laws of the Commonwealth of Pennsylvania at [**215**] **NEW BRITAIN TOWNSHIP**
(Subdivision Code) (Place/Political Subdivision)**106 SHADYHILL DR CHALFONT**in **BUCKS** County [**09**] on or about **27 APRIL 2024 AT 0909 HRS.**
(County Code) (Offense Date)

**POLICE CRIMINAL COMPLAINT**

Docket Number	Date Filed 04/27/2024	OTN/LiveScan Number	Complaint Number PA0093200-C000003114	Incident Number 2024-24-3634
Defendant Name	First ARTHUR	Middle	Last HERRING	

The acts committed by the accused are described below with each Act of Assembly or statute allegedly violated, if appropriate. When there is more than one offense, each offense should be numbered chronologically.

(Set forth a **brief** summary of the facts sufficient to advise the defendant of the nature of the offense(s) charged. A citation to the statute(s) allegedly violated, without more, is not sufficient. In a summary case, you must cite the specific section(s) and subsection(s) of the statute(s) or ordinance(s) allegedly violated.

Inchoate Offense	<input type="checkbox"/> Attempt 18 901 A	<input type="checkbox"/> Solicitation 18 902 A	<input type="checkbox"/> Conspiracy 18 903	Number of Victims Age 60 or Older 0				
<input checked="" type="checkbox"/> Lead?	1	2709	A4	18	1	M3		90C
	Offense #	Section	Subsection	PA Statute (Title)	Counts	Grade	NCIC Offense Code	UCR/NIBRS Code

PennDOT Data (if applicable)	Accident Number		<input type="checkbox"/> Interstate	<input type="checkbox"/> Safety Zone	<input type="checkbox"/> Work Zone
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Statute Description (Include the name of statute or ordinance):

Harassment - Comm. Lewd, Threatening, Etc. Language

Acts of the accused associated with this Offense:

HARASSMENT - COMMUNICATES IN LEWD, LASCIVIOUS, THREATENING, OR OBSCENE MANNER:

The Actor Arthur Herring III, on or about Wednesday, April 10th, Tuesday, April 23th & Saturday, April 27, in the County of Bucks, commits the crime of harassment when, with intent to harass, annoy or alarm another, the person: communicates to or about such other person any lewd, lascivious, threatening or obscene words, language, drawings or caricatures, in violation of Section 2709 (A) (4) of the Pennsylvania Crimes Code, as amended, 18 Pa.C.S. 2709 (A) (4)

Inchoate Offense	<input type="checkbox"/> Attempt 18 901 A	<input type="checkbox"/> Solicitation 18 902 A	<input type="checkbox"/> Conspiracy 18 903	Number of Victims Age 60 or Older 0				
<input type="checkbox"/> Lead?	2	2709	A3	18	1	S		
	Offense #	Section	Subsection	PA Statute (Title)	Counts	Grade	NCIC Offense Code	UCR/NIBRS Code

PennDOT Data (if applicable)	Accident Number		<input type="checkbox"/> Interstate	<input type="checkbox"/> Safety Zone	<input type="checkbox"/> Work Zone
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Statute Description (Include the name of statute or ordinance):

Harassment - Course of Conduct W/No Legitimate Pur

Acts of the accused associated with this Offense:

HARASSMENT - CONDUCT OR REPEATED ACTS THAT SERVE NO LEGITIMATE PURPOSE:

The Actor Arthur Herring III on or about, Wednesday, April 10, Tuesday, April 23 & Saturday, April 27, in the County of Bucks, commits the crime of harassment when, with intent to harass, annoy or alarm another, the person: engages in a course of conduct or repeatedly commits acts which serve no legitimate purpose. in violation of Section 2709 á(A) (3) of the Pennsylvania Crimes Code, as amended, 18 Pa.C.S. 2709 á(A) (3)



POLICE CRIMINAL COMPLAINT

Docket Number	Date Filed 04/27/2024	OTN/LiveScan Number	Complaint Number PA0093200-C000003114	Incident Number 2024-24-3634
	First ARTHUR	Middle	Last HERRING	

2. I ask that a warrant of arrest or a summons be issued and that the defendant be required to answer the charges I have made.
3. I verify that the facts set forth in this complaint are true and correct to the best of my knowledge or information and belief. This verification is made subject to the penalties of section 4904 of the Crimes Code (18 PA C.C. 4904) relating to unsworn falsification to authorities.
4. This complaint is comprised of the preceding page(s) numbered 1 through 2.
5. I certify that this filing complies with the provisions of the *Case Records Public Access Policy of the Unified Judicial System of Pennsylvania* that require filing confidential information and documents differently than non-confidential information and documents.

The acts committed by the accused, as listed and hereafter, were against the peace and dignity of the Commonwealth of Pennsylvania and were contrary to the Act(s) of Assembly, or in violation of the statutes cited.
(Before a warrant of arrest can be issued, an affidavit of probable cause must be completed, sworn to before the issuing authority, and attached.)

(Date)

(Signature of Affiant)

AND NOW, on this date _____ I certify that the complaint has been properly completed and verified.
An affidavit of probable cause must be completed before a warrant can be issued.

07-2-08

(Magisterial District Court Number)

(Issuing Authority)

SEAL



POLICE CRIMINAL COMPLAINT

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AFFIDAVIT of PROBABLE CAUSE

Your Affiant is a duly sworn Police Officer in the Township of New Britain and is currently assigned to the Patrol Division. On Saturday, April 27 2024; Your Affiant was in full uniform operating marked patrol vehicle 48-03.

On Saturday, April 27 2024, at approximately 0905 hours; Your Affiant was dispatched to 106 Shady Hill Drive for a suspicious person (male across the street with sign about sex trafficking).

While enroute to the listed location, Police received three (3) additional calls for different residence about the same male who was identified as Arthur Herring III.

Upon arrival, Your Affiant made contact with resident's and the Victim who were alarmed and/or scared by the Offender Herring III behavior. Herring was wearing a large sign around his neck about 6'X 3' that stated the Victim was a "human trafficking sex pervert".

Your Affiant was advised that on Wednesday, April 10 2024 Herring III placed letters on residence doors about the Victim. The letters stated that the Victim was corrupt and part of a corrupt guardianship mafia which includes lawyers, judges, and psychologists.

Furthermore, on Tuesday, April 23 2024, Your Affiant responded to the area of Shady Hill Drive for Herring III causing alarm and/or fear to a resident and her children playing outside. While on location Herring III had written on the sidewalk in front of the victims residence in chalk stating that the Victim was a sex trafficker. Herring was also in possession of a large sign that sated that the victim was a "human trafficking sex pervert". (Reference Incident # 2024-70-3065)

On Tuesday, April 23 2024; Your Affiant advised Herring III that his actions alarmed and/or scared multiple residents in the area.

I, OFFICER ALEX KOMATICK (113) _____, BEING DULY SWORN ACCORDING TO THE LAW, DEPOSE AND SAY THAT THE FACTS SET FORTH IN THE FOREGOING AFFIDAVIT ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION, AND BELIEF.

I CERTIFY THAT THIS FILING COMPLIES WITH THE PROVISIONS OF THE CASE RECORDS PUBLIC ACCESS POLICY OF THE UNIFIED JUDICIAL SYSTEM OF PENNSYLVANIA THAT REQUIRE FILING CONFIDENTIAL INFORMATION AND DOCUMENTS DIFFERENTLY THAN NON-CONFIDENTIAL INFORMATION AND DOCUMENTS.

(Signature of Affiant)

Sworn to me and subscribed before me this _____ day of _____,

_____, Date _____, Magisterial District Judge

My commission expires first Monday of January, _____

SEAL

**POLICE CRIMINAL COMPLAINT**

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AFFIDAVIT of PROBABLE CAUSE CONTINUATION

Several residence stated that they were afraid to let their children outside due to Herring III behavior. Additionally, residence explained that due to the fact the large sign Herring III was holding was vulgar and referenced sex trafficking they had to keep their children in the house.

Herring III actions serve no legitimate purpose and the statement written on his sign claiming the victim is involved in sex / human trafficking are baseless.

(Signature of Affiant)



Complete the defendant's SSN information if known. If this form is submitted as part of a Police Criminal Complaint, the NCIC Cautions/Medical Conditions and Scars/Marks/Tatoos sections should also be completed if known.

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First ARTHUR		Middle	Last HERRING	
<input type="checkbox"/> 00 <input type="checkbox"/> 20 <input type="checkbox"/> 50 <input type="checkbox"/> 70 <input type="checkbox"/> 01 - Other <input type="checkbox"/> .05 <input type="checkbox"/> 25 <input type="checkbox"/> 55 <input type="checkbox"/> 80 <input type="checkbox"/> 10 <input type="checkbox"/> 30 <input type="checkbox"/> 60 <input type="checkbox"/> 85 <input type="checkbox"/> 15 <input type="checkbox"/> 40 <input type="checkbox"/> 65 <input type="checkbox"/> 90				

Pursuant to the *Case Records Public Access Policy of the Unified Judicial System of Pennsylvania*, the Confidential Information Form shall accompany a filing where confidential information is required by law, ordered by the court, or otherwise necessary to effect the disposition of a matter. This form, and any additional pages, shall remain confidential, except that it shall be available to the parties, counsel of record, the court, and the custodian. This form, and any additional pages, must be served on all unrepresented parties and counsel of record.

This Form Pertains to:	Confidential Information:	Reference in Filing:
HERRING III, ARTHUR (full Name of adult) OR This information refers to a minor with the initials of _____ and the full name of _____ (full Name of adult) and date of birth: _____	Social Security Number (SSN): 176-42-7986 Financial Account Number (FAN): _____ Driver's License Number (DLN): 16285890 State of Issuance (DLN): PA Expires (DLN): _____ State Identification Number (SID): _____	Alternate Reference: SSN1 Alternate Reference: Alternate Reference: DLN1 Alternate Reference:

Additional pages attached. 0 total pages attached to this filing.

I certify that this filing complies with the provisions of the *Case Records Public Access Policy of the Unified Judicial System of Pennsylvania* that require filing confidential information and documents differently than non-confidential information and documents.

Signature of Attorney or Affiant

Name: **OFFICER ALEX KOMATICK**

Address: **NEW BRITAIN TOWNSHIP POLICE DEPARTMENT**

**207 PARK AVE
CHALFONT, PA 18914**

Date

Attorney Number: (if applicable)

Telephone:

Email: