



POLICE CRIMINAL COMPLAINT

Docket Number:	Date Filed: 12/10/2024	OTN/LiveScan Number	Complaint Number	Incident Number 2024-00000077
Defendant Name:	First: Luigi	Middle: Nicholas	Last: Mangione	

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.)

<input checked="" type="checkbox"/> 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
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<input checked="" type="checkbox"/>	1	9134		of the	42	1			
Lead?	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):

Arrest prior to requisition

Acts of the accused associated with this Offense:

42 9134 - Arrest prior to requisition

Whenever any person within this Commonwealth shall be charged on the oath of any credible person before any judge or issuing authority of this Commonwealth with the commission of any crime in any other state, and, except in cases arising under section 9127 (relating to extradition of persons not present in demanding state at time of commission of crime) with having fled from justice or with having been convicted of a crime in that state and having escaped from confinement or having broken the terms of his bail, probation or parole, or whenever complaint shall have been made before any judge or issuing authority in this Commonwealth, setting forth on the



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OFFENSE DESCRIPTION CONTINUATION

Offense #: 1

affidavit of any credible person in another state that a crime has been committed in such other state and that the accused has been charged in such state with the commission of the crime, and, except in cases arising under section 9127, has fled from justice or with having been convicted of a crime in that state and having escaped from confinement or having broken the terms of his bail, probation or parole and is believed to be in this Commonwealth, the judge or issuing authority shall issue a warrant directed to any peace officer commanding him to apprehend the person named therein wherever he may be found in this Commonwealth and to bring him before the same or any other judge or issuing authority who or which may be available in, or convenient of, access to the place where the arrest may be made to answer the charge or complaint and affidavit, and a certified copy of the sworn charge or complaint and affidavit upon which the warrant is issued shall be attached to the warrant.



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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.S. § 4904) relating to unsworn falsification to authorities.
4. This complaint consists of the preceding page(s) numbered 1 through 3.
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 the 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.)

December 10,

2024

(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.

(Magisterial District Court Number)

(Issuing Authority)

SEAL



POLICE CRIMINAL COMPLAINT

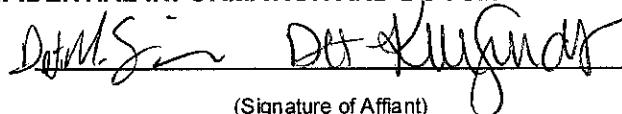
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AFFIDAVIT of PROBABLE CAUSE

On 12-09-2024 the defendant, Luigi Mangione, was arrested and charged with criminal offenses in the Commonwealth of Pennsylvania. After a preliminary arraignment, he was held on those charges without bail and housed as a Blair County inmate in SCI Huntingdon. On 12-10-2024 your Affiants received an arrest warrant for the crime of Murder in the 2nd Degree, a violation of New York Penal Law 125.25 (1) issued by the Honorable Michael E. Ryan of the Criminal Court of the City of New York. Your Affiants are aware and confirmed the issuance of the above warrant through the County of New York District Attorney's Office and the New York Police Department Manhattan Homicide Division at approximately 0849 hours this date. Your Affiants further confirmed the existence of the arrest warrant through NCIC via Blair County 911. The New York Police Department and the Manhattan District Attorney's Office is seeking the Defendant's extradition pursuant to this Warrant of Arrest.

I, MICHAEL SAPIENZA, AND I, KIMBERLY SANDERS, 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 _____

_____, Magisterial District Judge
Date _____

My commission expires first Monday of January,



SEAL

**CONFIDENTIAL**

Confidential Information Form Criminal Complaint

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/Tattoos sections should also be completed if known.

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NCIC Cautions and Medical Conditions (check up to 9)

<input type="checkbox"/> 00	<input type="checkbox"/> 20	<input type="checkbox"/> 50	<input type="checkbox"/> 70	<input type="checkbox"/> 01
<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	

**Scars, Marks, Tattoos
(NCIC Codes)**

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 Information Pertains to:	Confidential Information:	Reference in Filing:
Luigi Nicholas Mangione (full name of adult) OR	Social Security Number (SSN): <u>000-00-0000</u>	Alternate Reference: SSN1
This information pertains to a minor with the initials of _____ and the full name of _____ (full name of minor) and date of birth: <u>05/06/1998</u>	Financial Account Number (FAN): Driver License Number (DLN): <u>M525560630346</u> State of Issuance (DLN): <u>MD</u> Expires (DLN): State Identification Number (SID):	Alternate Reference: FAN1 Alternate Reference: DLN1 Alternate Reference: SID1

Additional page(s) attached. 0 total pages are 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.

Det. Michael Sapienza
Signature of Attorney or Affiant

12-10-2024
Date

Name: Michael Sapienza and I, Kimberly Sanders

Attorney Number: (if applicable) _____

Address: 423 Allegheny St. Suite 421,

Telephone: (814) 693-3010

Hollidaysburg, PA 16648

Email: msapienza@blairco.org / ksanders@blairco.org

NOTE: Parties and attorney of record in a case will have access to this Confidential Information Form. Confidentiality of this information must be maintained.