FLORIDA DUI UNIFORM TRAFFIC CITATION **A9IAVPE**

COMPLAINT

COUNTY OF: HILLSBOROUGH	☐ (1) FHP ☐ (2) P.D. ☒ (3) S.O. ☐ (4) OTHER
CITY (IF APPLICABLE): UNINCORPORATED H.C.	AGENCY NAME: HILLSBOROUGH COUNTY SHERIFF'S OFFICE
	AGENCY #:

IN THE COURT DESIGNATED BELOW THE UNDERSIGNED CERTIFIES THAT HE/SHE HAS JUST AND REASONABLE GROUNDS TO BELIEVE AND DOES BELIEVE THAT ON **COMPLAINT** (RETAINED BY COURT)

DAY OF WEEK	MONTH	DAY	YEAR	
Wed	12	09	2020	04:43 ☐ A.M. ☒ P.M.

NAME (PRINT) FIRST	MIDDLE	LAST
KIMBERLY	DAWN	BRYANT

STREET: 1503 LORETTA CT — IF DIFFERENT THAN ONE ON DRIVER LICENSE "X" HERE ▶

CITY	STATE	ZIP CODE
BRANDON	FL	33511

TELEPHONE NUMBER	DATE OF BIRTH MO	DAY	YR	RACE	SEX	HGT
813-967-3217	10	16	1968	W	F	505

DRIVER LICENSE NUMBER	STATE	CLASS	CDL LICENSE	YR. LICENSE EXP.	COMMERCIAL VEHICLE
B 6 5 3 5 0 4 6 8 8 7 6 0	FL	E	☐ Y ☒ N	2025	☐ YES ☒ NO

YR. VEHICLE	MAKE	STYLE	COLOR	PLACARDED HAZARDOUS MATERIAL
2013	INFI	4D	WHI	☐ YES ☒ NO

VEHICLE LICENSE NO.	TRAILER TAG NO.	STATE	YEAR TAG EXPIRES	> 16 PASSENGERS
1639PI		FL	2021	☐ YES ☒ NO

UPON A PUBLIC STREET OR HIGHWAY, OR OTHER LOCATION, NAMELY: FORBES RD S / WALLER CATFISH TL — MOTORCYCLE ☐ YES ☒ NO

COMPANION CITATION(S) ☐ YES ☒ NO

FT. _____ MILES _____ ☐N ☐S ☐E ☐W OF NODE _____

DID UNLAWFULLY COMMIT THE OFFENSE OF DRIVING UNDER THE INFLUENCE OF ALCOHOLIC BEVERAGES, CHEMICAL OR CONTROLLED SUBSTANCES; DID DRIVE, OR WAS IN ACTUAL PHYSICAL CONTROL OF A VEHICLE, WHILE UNDER THE INFLUENCE OF AN ALCOHOLIC BEVERAGE/CHEMICAL SUBSTANCE/CONTROLLED SUBSTANCE TO THE EXTENT NORMAL FACULTIES WERE IMPAIRED, OR WITH A BLOOD OR BREATH ALCOHOL LEVEL OF .08 OR ABOVE OF .260.

COMMENTS PERTAINING TO OFFENSE (Only one offense each citation) — RE-EXAM ☐ YES ☒ NO

☐ AGGRESSIVE DRIVER	PASSENGER < 18 YEARS	STATE STATUTE	SECTION SUB-SECTION
	☐ YES ☒ NO		316.193(3)(c)1

CRASH	DAMAGE TO OTHER PROPERTY	INJURY TO ANOTHER	SERIOUS BODILY INJURY TO ANOTHER	FATAL
☒ YES ☐ NO	☒ YES $ 3500 ☐ NO	☐ YES ☒ NO	☐ YES ☒ NO	☐ YES ☒ NO

THIS IS A CRIMINAL VIOLATION. COURT APPEARANCE REQUIRED, AS INDICATED BELOW.

CONTACT COURT FOR COURT DATE **A9IAVPE**

COURT DATE TIME

PLANT CITY COURT (10 DAYS)

COURT AND LOCATION

301 NORTH MICHIGAN AVENUE #1071
PLANT CITY, FL 33563

ARREST DELIVERED TO **HILLSBOROUGH COUNTY JAIL (ORIENT I** DATE **12/09/2020**

I AGREE AND PROMISE TO COMPLY AND ANSWER TO THE CHARGES AND INSTRUCTIONS SPECIFIED IN THIS CITATION. WILLFUL REFUSAL TO ACCEPT AND SIGN THE CITATION MAY RESULT IN ARREST. I UNDERSTAND MY SIGNATURE IS NOT AN ADMISSION OF GUILT OR WAIVER OF RIGHTS. IF YOU NEED REASONABLE FACILITY ACCOMMODATIONS TO COMPLY WITH THIS CITATION, CONTACT THE CLERK OF THE COURT.

X SIGNATURE OF VIOLATOR

EFFECTIVE IMMEDIATELY, YOUR DRIVING PRIVILEGE IS SUSPENDED/DISQUALIFIED FOR:

☒ DRIVING WITH AN UNLAWFUL BLOOD OR BREATH ALCOHOL LEVEL. THIS SUSPENSION IS FOR A PERIOD OF SIX MONTHS IF THIS IS THE FIRST VIOLATION OR ONE YEAR IF PREVIOUSLY SUSPENDED FOR DRIVING WITH AN UNLAWFUL BLOOD OR BREATH ALCOHOL LEVEL. IF YOU HOLD A CDL OR YOU ARE OPERATING A CMV, YOUR COMMERCIAL DRIVER LICENSE/PRIVILEGE WILL ALSO BE DISQUALIFIED FOR ONE YEAR FOR THE FIRST OFFENSE OR PERMANENTLY DISQUALIFIED FOR A SUBSEQUENT OFFENSE.

☐ REFUSAL TO SUBMIT TO LAWFUL BREATH, BLOOD OR URINE TEST SECTION 322.2615, F. S. THIS SUSPENSION IS FOR A PERIOD OF ONE YEAR IF THIS IS A FIRST REFUSAL OR 18 MONTHS IF PREVIOUSLY SUSPENDED FOR THIS OFFENSE. IF YOU HOLD A CDL OR YOU ARE OPERATING A CMV, YOUR COMMERCIAL DRIVER LICENSE/PRIVILEGE WILL ALSO BE DISQUALIFIED FOR A PERIOD OF ONE YEAR FOR A FIRST REFUSAL OR PERMANENTLY DISQUALIFIED FOR A SUBSEQUENT REFUSAL.

LICENSE SURRENDERED? ☒ YES ☐ NO **REASON** _____

ELIGIBLE FOR PERMIT? ☐ YES ☒ NO **REASON** _____

UNLESS INELIGIBLE, THIS CITATION SHALL SERVE AS A TEMPORARY DRIVER LICENSE AND WILL EXPIRE AT MIDNIGHT ON THE 10TH DAY FOLLOWING THE DATE OF SUSPENSION.

AT THE Tampa BUREAU OF ADMINISTRATIVE REVIEWS OFFICE, YOU MAY REQUEST, WITHIN 10 DAYS AFTER THE DATE OF SUSPENSION, A REVIEW OF SUPENSION BY THE DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES OR A REVIEW TO DETERMINE ELIGIBILITY FOR A RESTRICTED LICENSE IF THIS IS YOUR FIRST DUI RELATED OFFENSE. SEE RIGHT SIDE.

DEP **GARCIA, M 235198** **235198**

RANK - SIGNATURE OF OFFICER | BADGE NO. | ID. NO. | TROOP UNIT

HSMV 75904 (Rev. 10/14)

CASE NO. _____ DOCKET NO. _____ PAGE NO. _____

DATE	COURT ACTION AND OTHER ORDERS
	BAIL FIXED AT $_____ OR CASH DEPOSIT OF $_____ _____ SIGNATURE OF PERSON GIVING BAIL _____ SIGNATURE OF PERSON TAKING BAIL
	FINE IN THE AMOUNT OF $_____ RECEIVED AS REQUIRED BY COURT SCHEDULE. _____ SIGNATURE OF CLERK
	CONTINUANCE TO _____ REASON _____
	CONTINUANCE TO _____ REASON _____
	BOND ESTREATED _____
	WARRANT ISSUED _____
	VIOLATOR FAILED TO APPEAR-DRIVER LICENSE SUSPENDED
	VIOLATOR ARRAIGNED ON _____ (DATE) PLEA: _____ FINDING: _____ ADJUDICATION: _____ SENTENCE: FINE _____ COST _____ JAILED _____ DAYS DRIVER IMPROVEMENT SCHOOL _____ OTHER _____ DRIVER LICENSE SUSPENDED OR REVOKED FOR ____ DAYS RECOMMEND DRIVER LICENSE SUSPENSION FOR ____ DAYS RECOMMEND RE-TEST _____ _____ SIGNATURE OF JUDGE
	TESTIMONY - JUDGE'S NOTES (OR OTHER COURT ORDERS):
	APPEAL BOND OF $ _____
	VIOLATOR'S FINGERPRINT WHEN APPLICABLE ⟶