

ARREST / NOTICE TO APPEAR

1. Arrest 3. Request for Warrant  
2. N.T.A. 4. Request for Capias

1

JUVENILE

OBTS Number \_\_\_\_\_

Agency ORI Number **0500200** Agency Name **Boca Raton Police Department** Agency Report Number (N.T.A.'s only) **3 | 2 | 2017-014036**

Charge Type:  1. Felony  3. Misdemeanor  5. Ordinance  
 2. Traffic Felony  4. Traffic Misdemeanor  6. Other \_\_\_\_\_

If Weapon Seized \_\_\_\_\_ Enter Type **None/not Applicable** Multiple Clearance Indicator \_\_\_\_\_

Location of Arrest (Including Name of Business) **21299 LENNOX DR** Location of Offense (Business Name, Address) **21299 LENNOX DR, BOCA RATON, FL 33486**

Date of Arrest **10/13/2017** Time of Arrest **02:32** Booking Date **10/13/2017** Booking Time **04:20** Jail Date \_\_\_\_\_ Jail Time \_\_\_\_\_ Location of Vehicle \_\_\_\_\_

Name (Last, First, Middle) **THANVI, BASEERUL HAO** Alias: \_\_\_\_\_ Alias (Name, DOB, Soc. Sec. #, Etc.) \_\_\_\_\_

Race **W** Sex **M** Date of Birth **04/22/1966** Height **5'11** Weight **195** Eye Color **BROWN** Hair Color **BLACK** Complexion **MEDIUM** Build **Stocky**

Marital Status **M** Religion **NONE** Indication of Alcohol Influence Yes  No  Unk.   
 Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) \_\_\_\_\_ Drug Influence \_\_\_\_\_

Local Address (Street, Apt. Number) (City) (State) (Zip) Phone **(847) 990-0990** Residence Type: 1. City 3. Florida 2. County 4. Out of State | **3**

Permanent Address (Street, Apt. Number) (City) (State) (Zip) Phone **(847) 990-0990** Address Source **FL DL**

Business Address (Name, Street) (City) (State) (Zip) Phone \_\_\_\_\_ Occupation **President**

D/L Number, State **TS10068661420 / FL** Soc. Sec. Number \_\_\_\_\_ INS Number \_\_\_\_\_ Place of Birth (City, State) **LONDON, LN, England** Citizenship **US**

Co-Defendant Name (Last, First, Middle) \_\_\_\_\_ Race \_\_\_\_\_ Sex \_\_\_\_\_ Date of Birth \_\_\_\_\_  
 1. Arrested  3. Felony  5. Juvenile  
 2. At Large  4. Misdemeanor

Co-Defendant Name (Last, First, Middle) \_\_\_\_\_ Race \_\_\_\_\_ Sex \_\_\_\_\_ Date of Birth \_\_\_\_\_  
 1. Arrested  3. Felony  5. Juvenile  
 2. At Large  4. Misdemeanor

Parent  Other: \_\_\_\_\_ Name (Last, First, Middle) \_\_\_\_\_ Residence Phone \_\_\_\_\_  
 Legal Custodian \_\_\_\_\_ Address (Street, Apt. Number) (City) (State) (Zip) \_\_\_\_\_ Business Phone \_\_\_\_\_

Notified by: (Name) \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_ JUVENILE DISPOSITION  
 1. Handled/Processed within Department and Released  
 2. TOT JAC  
 3. Incarcerated

Released To: (Name) \_\_\_\_\_ Relationship \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

The above address was provided by  defendant and/or  defendant's parents.  
 The child and/or parent was told to keep the Juvenile Court Clerk's Office (Phone 355-2526) informed of any change of address.

Property Crime?  Yes  No Description of Property \_\_\_\_\_ Value of Property \_\_\_\_\_

Drug Activity S. Sell R. Smuggle K. Disperses/ M. Manufacture/ Z. Other  
 N. N/A B. Buy D. Deliver Distribute Produce/ Cultivate  
 P. Possess T. Traffic E. Use

Drug Type B. Barbiturate H. Hallucinogen P. Paraphernalia/ U. Unknown  
 N. N/A C. Cocaine M. Marijuana Equipment Z. Other  
 A. Amphetamine E. Heroin O. Opium/Deriv. S. Synthetic

Charge Description **DUI** Statute Violation Number **316.193(1)** Violation of ORD # \_\_\_\_\_  
 Bond \_\_\_\_\_

Drug Activity Drug Type Amount / Unit Offense # Counts Domestic Violence Warrant / Capias Number  
**N / / 2017-014036 1  Y  N**

Charge Description \_\_\_\_\_ Statute Violation Number \_\_\_\_\_ Violation of ORD # \_\_\_\_\_  
 Bond \_\_\_\_\_

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 Bond \_\_\_\_\_

Charge Description \_\_\_\_\_ Statute Violation Number \_\_\_\_\_ Violation of ORD # \_\_\_\_\_  
 Bond \_\_\_\_\_

Health / Apparent Physical Condition of Defendant **GOOD** Any knowledge of the following:  Mental  Escape Risk  Medication  Deformities  Injuries

Check which applies:  Released O.R.  Released to Parent/Guardian  T.O.T. County Jail  
 Posted Bond  South County Mental Health

PROPERTY - Received By **TOWNSLEY** Released By **TOWNSLEY** Released To \_\_\_\_\_  
 Date Transported \_\_\_\_\_ Time Transported \_\_\_\_\_ Other \_\_\_\_\_

INSTRUCTION NO. 1 - Mandatory appearance in court  
 INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.

Location (Court, Room) **South County 200 W Atlantic Ave Delray Beach, FL 33444**  
 Court Date and Time **11/13/2017 08:30:00**

I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED BY THIS NOTICE TO APPEAR, THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.

Signature of Defendant (or Juvenile and Parent/Custodian) \_\_\_\_\_ Date Signed \_\_\_\_\_

HOLD for Other Agency \_\_\_\_\_ Signature of Arresting Officer \_\_\_\_\_ Name Verification (Printed by Arrestee) **OCT 13 AM 8:45**

Dangerous  Resisted Arrest  Suicidal  Other \_\_\_\_\_ Name of Arresting Officer (Print) **TOWNSLEY, JAMES A.** I.D. # **802** (PRINT)

Transporting Officer **C. Wood** I.D. # **780** Agency **BR PD** Witness here if subject signed with an "X". \_\_\_\_\_

Page 1 OF 1

CONARD # 700

SCANNED

OCT 15 2017

PROBABLE CAUSE AFFIDAVIT

1. Arrest  
2. N.T.A.  
3. Request for Warrant  
4. Request for Capias

1 JUVENILE

A D M I N	OBTS Number		Agency ORI Number <b>FL 0500200</b>		Agency Name <b>BOCA RATON POLICE DEPARTMENT</b>		Agency Report Number <b>3   2   2017-014036</b>		
	Charge Type: Check as many as apply. <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony		<input checked="" type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Special Notes:		
D E F	Name (Last, First, Middle) <b>THANVI, BASEERUL HAQ</b>					Alias	Race <b>W</b>	Sex <b>M</b>	Date of Birth <b>04/22/1966</b>
	Charge Description <b>316.193(1) DUI</b>		Charge Description		Charge Description		Charge Description		
C H A R G E S	Victim's Name (Last, First, Middle) <b>STATE OF FLORIDA,</b>					Race	Sex	Date of Birth	
	Local Address (Street, Apt. Number) (City) (State) (Zip) <b>100 NW 2ND AVE, BOCA RATON, FL 33432</b>					Phone <b>(561) -</b>		Address Source	
	Business Address (Name, Street) (City) (State) (Zip)					Phone <b>(56) -</b>		Occupation	
V I C T I M	The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following violation of law. The Person taken into custody ... <input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. <input type="checkbox"/> confessed to _____ admitting to the below facts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation. On the <b>13</b> day of <b>October</b> , <b>2017</b> at <b>02:32</b> (Specifically include facts constituting cause for arrest.)								
	<p>On 10/13/2017 Officer Bissoon and I conducted a traffic stop at 21299 Lennox Dr on a BMW bearing FL tag (CPWH37). I stopped the vehicle because I observed the driver ran a red light on Military Trail and Town Center Rd. He also drove into oncoming traffic while leaving out of the parking lot of Blue Martini. The driver also drove through a stop sign from Perimeter Rd. onto Town Center Rd. It should be noted that upon my approach to the vehicle I made contact with W/M Baseerul Thanvi. When I spoke with Thanvi, he was slurring his speech and I could see that his pupils were dilated.</p> <p>I asked him where he was coming from and he stated that he was heading home after leaving Blue Martini, 6000 W Glades. I asked Thanvi to step out of the vehicle and observed him stumble and use the rear passenger door to maintain balance. He stated that he had a few drinks and was trying to make it home. I then asked Thanvi to walk towards the rear of his vehicle away from oncoming traffic and observed Thanvi take several stutter steps and almost lose his balance. While speaking with Thanvi I could smell an odor of an alcoholic beverage emanating from his person, his eyes were blood shot and glossy and he was slurring his speech. I then asked Thanvi if he had anything to drink and he stated he had a few drinks.</p> <p>I then asked Thanvi if he would consent to roadside sobriety tasks based on all my observations up to this point. Thanv stated that he would. Officer Coon arrived on scene as my backup.</p> <p>I then walked him over to a well lit area and asked him if he had any medical problems or medical issues that would prevent him from doing the tasks. thanvi advised that he had no medical or physical issues that would prevent him from conducting the tasks. The tasks that were conducted were the Walk and Turn, One Leg Stand, Finger to Nose, and the Rhomberg Alphabet.</p>								
P R O B A B L E	SWORN AND SUBSCRIBED BEFORE ME								
	<b>MORAN, JOHN TODD</b> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) <b>10/13/2017</b> DATE					 SIGNATURE OF ARRESTING/INVESTIGATING OFFICER <b>TOWNSLEY, JAMES ARTHUR (802)</b> NAME OF OFFICER (PLEASE PRINT) <b>10/13/2017</b> DATE			
A D M I N I S T R A T I V E	PAGE 1 OF 2								

PROBABLE CAUSE AFFIDAVIT  
SUPPLEMENT

1. Arrest  
2. N.T.A. 3. Request for Warrant  
4. Request for Capias

1

JUVENILE

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Agency ORI Number <b>FL 0500200</b>	Agency Name <b>BOCA RATON POLICE DEPARTMENT</b>	Agency Report Number <b>3   2   2017-014036</b>
Change Type: Check as many as apply. <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Special Notes:

Name (Last, First, Middle) <b>THANVI, BASEERUL HAQ</b>	Alias	Race <b>W</b>	Sex <b>M</b>	Date of Birth <b>04/22/1966</b>
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The first SFST was the Walk and Turn. Thanvi couldn't maintain the starting position. He stepped off the line twice while instructions were given. He stumbled off the line on the first three steps and took approximately 10 steps. He made an improper turn by just turning around instead of the way that was demonstrated. When he made the turn he stumbled sideways and almost fell to the ground. He took 10 steps forward and 9 steps back and he never counted any of the steps. He failed to keep his feet heel to toe throughout the task.

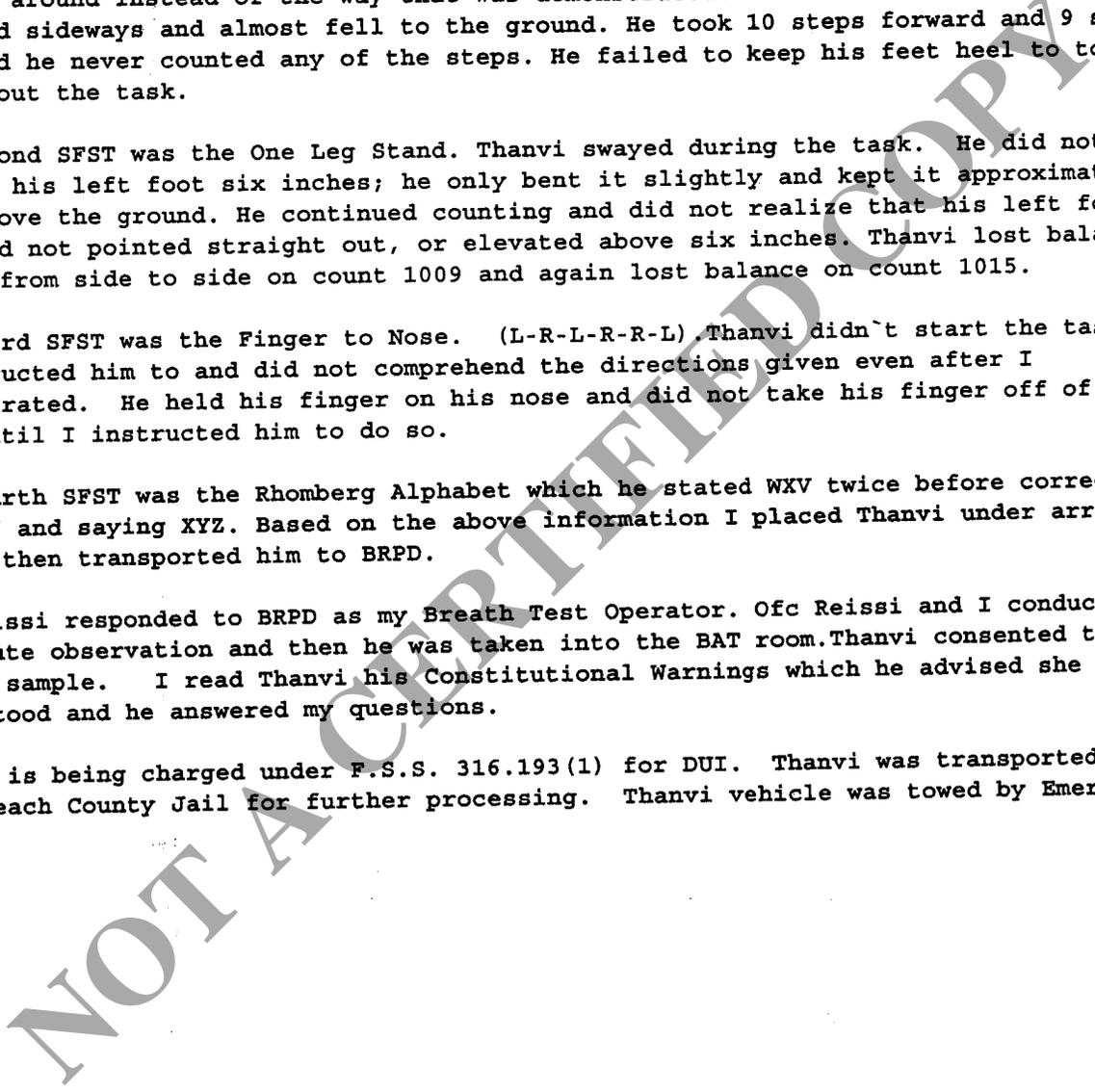
The second SFST was the One Leg Stand. Thanvi swayed during the task. He did not elevate his left foot six inches; he only bent it slightly and kept it approximately an inch above the ground. He continued counting and did not realize that his left foot was bent and not pointed straight out, or elevated above six inches. Thanvi lost balance and swayed from side to side on count 1009 and again lost balance on count 1015.

The third SFST was the Finger to Nose. (L-R-L-R-R-L). Thanvi didn't start the task when I instructed him to and did not comprehend the directions given even after I demonstrated. He held his finger on his nose and did not take his finger off of his nose until I instructed him to do so.

The fourth SFST was the Rhomberg Alphabet which he stated WXV twice before correcting himself and saying XYZ. Based on the above information I placed Thanvi under arrest for DUI. I then transported him to BRPD.

Ofc Reissi responded to BRPD as my Breath Test Operator. Ofc Reissi and I conducted the 20 minute observation and then he was taken into the BAT room. Thanvi consented to a breath sample. I read Thanvi his Constitutional Warnings which he advised she understood and he answered my questions.

Thanvi is being charged under F.S.S. 316.193(1) for DUI. Thanvi was transported to the Palm Beach County Jail for further processing. Thanvi vehicle was towed by Emerald.



SWORN AND SUBSCRIBED BEFORE ME

**MORAN, JOHN TODD**  
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

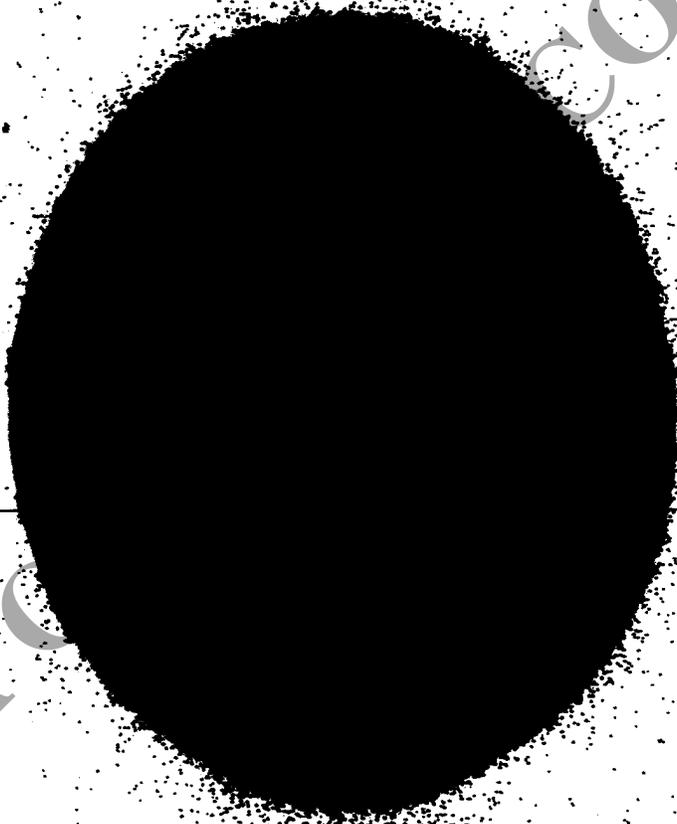
**10/13/2017**  
DATE

*[Signature]*  
SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

**TOWNSLEY, JAMES ARTHUR (802)**  
NAME OF OFFICER (PLEASE PRINT)

**10/13/2017**  
DATE

# D. U. I. INFLUENCE REPORT



NOT A COPY

**Boca Raton Police Services Department**  
**100 Northwest Second Avenue**  
**Boca Raton, Florida 33432**

SCANNED  
OCT 15 2017

ARRESTING OFFICER: Ofc. Townsley

Name: Ofc. Bissoon Phone # Home \_\_\_\_\_ Work \_\_\_\_\_

Address: 100 NW 2nd Ave

Can testify to: Back UP Officer

Name: Ofc. Coon Phone # Home \_\_\_\_\_ Work \_\_\_\_\_

Address: 100 NW 2nd Ave

Can testify to: Back UP Officer

Name: \_\_\_\_\_ Phone # Home \_\_\_\_\_ Work \_\_\_\_\_

Address: \_\_\_\_\_

Can testify to: \_\_\_\_\_

Name: \_\_\_\_\_ Phone # Home \_\_\_\_\_ Work \_\_\_\_\_

Address: \_\_\_\_\_

Can testify to: \_\_\_\_\_

Name: \_\_\_\_\_ Phone # Home \_\_\_\_\_ Work \_\_\_\_\_

Address: \_\_\_\_\_

Can testify to: \_\_\_\_\_

Name: \_\_\_\_\_ Phone # Home \_\_\_\_\_ Work \_\_\_\_\_

Address: \_\_\_\_\_

Can testify to: \_\_\_\_\_

Name: \_\_\_\_\_ Phone # Home \_\_\_\_\_ Work \_\_\_\_\_

Address: \_\_\_\_\_

Can testify to: \_\_\_\_\_

NOT A CERTIFIED COPY

SCANNED  
OCT 15 2017

BOCA RATON POLICE DEPARTMENT

Agency Case# 17-14036

PART II D.U.I. REPORT  
To be filled out at testing facility

I INTRODUCTION (Instrument Operator faces video camera)

A. The day is: Friday, October, 13<sup>th</sup>, 2017  
(day) (month) (date) (year)

B. The time is now approximately 3:19 AM PM

C. The following is in reference to case number 17-14036

D. Present at this time is Ofc. Townsley of the Boca Raton Police Department.  
(Officer's Name)

E. Officer Townsley Have you arrested Baseerul Thanvi  
(Defendant's name)

In violation of Florida State Statute 316.193?

F. Did this violation occur within the City of Boca Raton, Palm Beach County, Florida?

G. Mr. Thanvi I am required to inform you these proceedings are being video taped.

Operator Note: Video tape breath request, breath sample, and interview.

SCANNED  
OCT 15 2017

Agency Case # 17-14036

H. AT THIS TIME THE ARRESTING OFFICER WILL REQUEST A BREATH SAMPLE.

Note: Read only the paragraph applicable to the type of test you are requesting.

**A.**

I am now requesting that you submit to a lawful test of your **BREATH** for the purpose of determining its alcohol content.

B.

I am now requesting that you submit to a lawful test of your **URINE** for the purpose of determining its alcohol content.

C.

I am now requesting that you submit to a lawful test of your **BLOOD** for the purpose of determining its alcohol content and the presence of chemical or controlled substances.

**IMPLIED CONSENT WARNINGS**

Note: Read only if the subject does not comply with your request.

2.

I am \_\_\_\_\_ of the \_\_\_\_\_

If you fail to submit to the test I have requested of you, your privilege to operate a motor vehicle will be suspended for a period of one (1) year for a first refusal, or eighteen (18) months if your privilege has been previously suspended as a result of a refusal to submit to a lawful test of your breath, urine or blood. Additionally, if you refuse to submit to the test I have requested of you and if your driving privilege has been previously suspended for a prior refusal to submit to a lawful test of your breath, urine or blood, you will be committing a misdemeanor. Refusal to submit to the test I have requested of you is admissible into evidence in any criminal proceeding.

Subject signature: \_\_\_\_\_

**ALSO READ FOR CDL HOLDERS**

IN ADDITION, your refusal to submit will result in the loss of your commercial privileges for one year from today. If this is your **SECOND REFUSAL**, you will be permanently disqualified from operating a commercial motor vehicle.

After reading the implied consent warning, the arresting officer must request a breath sample again.

**(IF REFUSAL THEN)**

At this time Mr/Mrs/Ms. \_\_\_\_\_ has refused to submit to a breath test.

The date is \_\_\_\_\_ (Month) \_\_\_\_\_ (Day) \_\_\_\_\_ (Year) and the time \_\_\_\_\_ AM/PM

A refusal form will be completed by the arresting officer.

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OCT 15 2017

CONSTITUTIONAL WARNINGS

Rights of suspects prior to custodial questioning.

Identify yourself and state:

I am required to warn you before you make any statement that you have the following Constitutional rights:

- (1) You have the right to remain silent and not answer any questions. *Tell me in your own words what you think this means. (You do not have to talk to me or answer any questions about this offense. You can be quiet if you want.)*
- (2) Any statement you make must be freely and voluntarily given. *Tell me in your own words what you think this means. (If you do talk to me it has to be because you want to and not because anyone is forcing you to speak.)*
- (3) You have a right to the presence and representation of a lawyer of your choice before you make any statement and during any questioning. *Tell me in your own words what you think this means. (You can talk to a lawyer before we ask you any questions and you can have him/her with you now, during our questioning.)*
- (4) If you cannot afford a lawyer, you are entitled to the presence and representation of a court appointed lawyer before you make any statement and during any questioning. *Tell me in your own words what you think this means. (If you do not have money for a lawyer and you want one, a lawyer will be given to you for free.)*
- (5) If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent. *Tell me in your own words what you think this means. (If you decide to talk to me then change your mind, you can stop answering my questions at any time.)*
- (6) I can make no threats or promises to induce you to make a statement. This must be of your own free will. *Tell me in your own words what you think this means. (I am not allowed to threaten you or make you any promises to get you to talk to me. If you decide to talk, it must be because you want to.)*
- (7) Any statement can be and will be used against you in a court of law. *Tell me in your own words what you think this means. (Anything you say to me can and will be told to the judge or a jury in court. A judge is a person who decides if you have done something wrong. Sometimes a group of people called a jury decide this, but the Judge is the person who decides what punishment you get.)*
- (8) Do you understand these rights as I have read them to you, and do you wish to speak to me?

Signed: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

Revised 8/2006

SCANNED  
OCT 15 2017

BOCA RATON POLICE DEPARTMENT  
TESTING FACILITY TASK REPORT

SUBJECT: Baseervi Thanvi

CASE#: 17-14036 DATE: 10/13/17

BREATH TESTS RESULTS

1) TIME \_\_\_\_\_ AM/PM 2) TIME \_\_\_\_\_ AM/PM

3) TIME \_\_\_\_\_ AM/PM 4) TIME \_\_\_\_\_ AM/PM

BREATH OPERATOR: Reissi

MAINTENANCE TECHNICIAN: Pare

TESTING OFFICER'S OBSERVATIONS

SPEECH: \_\_\_\_\_

ATTITUDE: Calm

CLOTHING: Gray button down shirt, khaki pants, Blk shoes

MEDICAL CONDITION: None

OTHER: \_\_\_\_\_

COMMENTS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SCANNED  
OCT 15

Agency Case # 17-14036

**ADULT CONSTITUTIONAL WARNINGS**  
(Juvenile warning on reverse side)

"I am required to warn you before you make any statement that you have the following rights":

- 1) You have the right to remain silent and not answer any questions.
- 2) Any statement you make must be freely and voluntarily given.
- 3) You have the right to the presence of a lawyer and representation of a lawyer of your choice before you make any statement and during any questioning.
- 4) If you cannot afford a lawyer, you are entitled to the presence of a court appointed lawyer before you make any statement and during any questioning.
- 5) If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.
- 6) I can make no threats or promises to induce you to make a statement. This must be of your own free will.
- 7) Any statement can be and will be used against you in a court of law.

**DO YOU UNDERSTAND THESE RIGHTS AS I HAVE READ THEM TO YOU AND DO YOU WISH TO SPEAK TO ME?**

\_\_\_\_\_

**QUESTIONS AND ANSWERS**

Were you operating a motor vehicle at the time of the accident/stop? Yes

Where were you going? Home

What street or highway were you on? Military Trl

Direction of travel? South

Where did you start driving from? Blue Martini

What City (County) were you stopped in? Boca Raton, Fl Palm beach

What time did you start? around mid night AM What time is it now? I don't know

What is today's date? Oct. 15th What day of the week is it? Friday

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OCT 15 2017

Agency Case # 17-14036

When did you last eat? 11 or 10 pm What did you eat? Curry Chicken

What have you been doing the past three hours prior to this stop/accident? in the lounge with people

How much do you weigh? 195 lb Have you been drinking? yes What were you drinking? Beer

How much? 3 glasses Where? Blue Mahini With whom were you drinking? Himself

When did you have your first drink? 12  AM  PM When did you stop drinking? 2  AM  PM

How did you consume your last two drinks? Sip

Are you under the influence of alcohol now? Yes  No

Can you feel the affects of alcohol? Yes  No

Have you consumed alcohol since the accident? Yes  No

Can you feel the affects of alcohol? Yes  No

Have you consumed alcohol since the accident? Yes  No  How much? \_\_\_\_\_ What? \_\_\_\_\_  
Where? \_\_\_\_\_

What line of work are you in? President CEO of Software Company

When did you last work? Today

Do you have any physical defects or injuries? Yes  No  If yes, explain:  
right leg and back

Are you sick or injured? Yes  No  If yes explain:  
Partially

Do you limp? Slightly Did you get a bump on the head? NO

Were you involved in an accident today? NO

Have you taken any drugs or smoked marijuana today? NO  
What? \_\_\_\_\_ When? \_\_\_\_\_

Have you seen a doctor or dentist today? NO Who? \_\_\_\_\_

Are you taking any prescription medicines? Yes  No  What? \_\_\_\_\_ When? \_\_\_\_\_

Do you have: Epilepsy? Yes  No  Inner ear trouble? Yes  No   
Glaucoma? Yes  No  Ear Infection? Yes  No   
False Teeth? Yes  No  Diabetes? Yes  No

Any eye problems not correctable by glasses or contact lenses? NO

Do you take insulin? Yes  No  If yes, when was your last injection? \_\_\_\_\_

Have you ever had a driver's license in any other state? California

I am now ending this videotaping. The time now is approximately 344  AM  PM

The date is: October (month) 13<sup>th</sup> (day) 2017 (year)

UNRECORDED COPY

SCANNED  
OCT 15 2017