

#0483988
16CT 24093
P# 3875

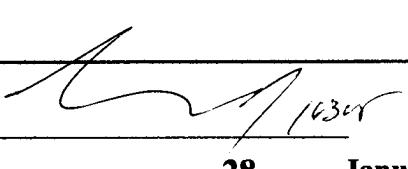
OBTS Number			ARREST / NOTICE TO APPEAR Juvenile Referral Report			1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias			
ADMINISTRATIVE	Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06- 16-170310				
	ChargeType: Check 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		Weapon Seized / Type 1. Yes 2. No		Multiple Clearance Indicator 01				
Location of Arrest (Including Name of Business) LANTANA RD/S JOG RD PBC			Location of Offense (Business Name, Address) LANTANA RD/S JOG RD PBC						
Date of Arrest 12/28/2016		Time of Arrest 0449		Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle PRIORITY TOWING	
Name (Last, First, Middle) Fannon, Kayla M									
Alias (Name, DOB, Soc. Sec. #, Etc.) 									
Race W - White I - American Indian B - Black O - Oriental/Asian W F 09/23/1991									
Height 5-06									
Weight 150									
Eye Color HAZ									
Hair Color BRN									
Complexion FAIR									
Build MED									
Scars, Marks, Tatoos, Unique Physcal Features (Location, Type, Description) NONE									
Marital Status SINGLE									
Religion CHRISTIAN									
Indication of: Alcohol Influence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N Drug Influence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> Unk.									
Local Address (Street, Apt. Number) 2111 54TH TRL S WEST PALM BEACH, FL 33415									
(City) (State) (Zip) (561) 702-5970									
Phone									
Permanent Address (Street, Apt. Number) 									
(City) (State) (Zip) ()									
Phone									
Business Address (Name, Street) 									
(City) (State) (Zip) ()									
Phone									
D/L Number, State FL/F550-513-91-843-0									
Soc. Sec. Number [REDACTED]									
INS Number									
Place of Birth (City, State) ANNAPOLIS, MA									
Citizenship USA									
Co-Defendant Name (Last, First, Middle) 									
Race Sex Date of Birth 									
1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile									
Co-Defendant Name (Last, First, Middle) 									
Race Sex Date of Birth 									
1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile									
Parent Name (Last) (First) (Middle) <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other									
Residence Phone ()									
Address (Street, Apt. Number) 									
(City) (State) (Zip) ()									
Business Phone ()									
Notified by: (Name) 									
Date Time Juvenile Disposition 1. Handled/processed within Dept. and Released.									
2. TOT HRS / DYS 3. Incarcerated									
Released To: (Name) Relationship 									
Date Time									
The above address provided by <input type="checkbox"/> defendant and / or <input type="checkbox"/> defendant's parents The child and / or parent was told to keep the Juvenile Court Clerk (Phone 355-2526) informed of any change of address. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)									
School Attended Grade									
Property Crime? Description of Property Value of Property <input type="checkbox"/> Yes <input type="checkbox"/> No									
Drug Activity S. Sell R. Smuggle K. Dispense/ Distribute M. Manufacture/ Z. Other Drug Type B. Barbiturate H. Hallucinogen P. Paraphernalia/ U. Unknown N. N/A C. Cocaine M. Marijuana S. Synthetics B. Buy D. Deliver E. Use A. Amphetamine E. Heroin O. Opium/Deriv. P. Possess T. Traffic									
Charge Description DUI Counts Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N Statute Violation Number 316.193(1) Violation of ORD #									
Drug Activity Drug Type Amount / Unit Offense # 16-170310 Warrant / Capias Number Bond OR									
Charge Description Counts Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N Statute Violation Number Violation of ORD #									
Drug Activity Drug Type Amount / Unit Offense # Warrant / Capias Number Bond 2									
Charge Description Counts Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N Statute Violation Number Violation of ORD #									
Drug Activity Drug Type Amount / Unit Offense # Warrant / Capias Number Bond 3									
Charge Description Counts Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N Statute Violation Number Violation of ORD #									
Drug Activity Drug Type Amount / Unit Offense # Warrant / Capias Number Bond 4									
Location (Court, Room Number, Address) 3228 GUN CLUB RD WEST PALM BEACH, FL 33406									
Court Date and Time Month 01 Day 26 Year 2017 Time 8:30 AM <input checked="" type="checkbox"/> PM									
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 Name: K. F. Wall			Signature of Arresting Officer X			Name Verification (Printed by Arresting Officer) SCANNED			
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other:			Name of Arresting Officer (Print) CPL THOMAS WALTON			(PRINT)			
Intake Deputy W. G. B. I.D. # 6942 Pouch #			Transporting Officer CPL T. WALTON ID # 6942 Agency PBSO			I.D. # 6942 DEC 29 2016 PAGE			
DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A.'s ONLY) PBSO #148 REV. 8/97									

PROBABLE CAUSE AFFIDAVIT

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

Juvenile

1

ADMIN	OBTS Number		PROBABLE CAUSE AFFIDAVIT						
	Agency ORI Number FLO 500000	Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 06-16-170310						
CHARGE DEF	Charge Type: <input type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance Check as many as apply. <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other				Special Notes:				
CHARGES DEF	Name (Last, First, Middle) Fannon, Kayla M				Alias		Race W	Sex F	Date of Birth 09/23/1991
VICTIM	Charge Description Driving Under the Influence		Charge Description 316.193(1)						
VICTIM	Charge Description		Charge Description						
VICTIM	Victim's Name (Last, First, Middle) State of Florida						Race -	Sex -	Date of Birth -
VICTIM	Local Address (Street, Apt. Number)		(City)	(State)	(zip)	Phone ()	Address Source		
VICTIM	Business Address (Name, Street)		(City)	(State)	(zip)	Phone ()	Occupation		
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"/> confessed to _____ admitting to the below facts. <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.									
On the 28 day of December 20 16 at 0453 <input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)									
On the above date and time, I was stopped in east bound lanes of 4700 block of lantana rd. While stopped I observed a Red Hyundai Fl tag DXEU31 travelling west bound at what I estimated to be in excess of 75 mph in a 45 mph zone.									
At this time I cleared my disable vehicle and got behind the Hyundai which was currently stopped at the red light on Lantana Rd and Haverhill rd. When the light turned green the vehicle quickly accelerated. I estimated the vehicles speed to be in excess of 80 mph in a 45 mph zone. I activated my STALKER DUAL SL SERIAL # DC107982 FRONT ANTENA SERIAL # KC064472 using the same direction function. The radar gave a digital read out of 85 mph with a matching Doppler tone. While I was following the vehicle I observed the vehicle, which was in the center lane serving left to right and back again, leaving the lane in both direction, the entire way to Lantana rd. At Lantana Rd the vehicle stopped for a solid red light.									
Once the light turned green and the vehicle proceeded through the light I activated my overhead emergency lights and siren in an effort to stop the vehicle. The vehicle would slow down as if to stop and then continue travelling westbound. The vehicle travelled all the way to Fearnly Rd, where it pulled off to the right and stopped.									
Once the vehicle was stopped I approached the vehicle on the driver side. I could immediately smell the odor of an unknown alcoholic beverage, based on my training an experinces, which intensified as the defendant spoke to me. I asked the defendant where she was coming from and she stated from a friends house. I asked the defendant how much she had to drink and she stated that she did not have anything to drink. I asked the defendant if she had any medical problems, including but not limited to diabetes and vertigo and she stated that she did not. I asked her if she had take any prescription drugs and she stated she had not. I asked her if she had used any illegal drugs or smoked any marijuana and she stated that she had not.									
At this time I asked the subject to step out of the vehicle. She swayed while standing. I had her walked to the front of my vehicle and the defendant swayed while wlaking. Once outside of the vehicle I continued to smell the odor of an unknown alcoholic beverage coming from the subject.									
At this time I contact Inv. T. Walton # 6942 to respond to the scene and conduct an investigation for driving under the influence.									
SCANNED									
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH D/S C . Ward (Signature of Arresting/Investigative Officer)		 DEC 29 2016						
ADMINISTRATIVE	The foregoing instrument was sworn to or affirmed and subscribed before me this 28 day of January 20 16 by D/S C . Ward (Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced Personally Known LEO T. Walton 6942 Notary Public, Clerk of Court, Officer (F.S.S. 117.10)								
PAGE OF 1									

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 28 DAY OF DECEMBER 20 16, AT 0418 AM PM

SUBJECT: Fannon, Kayla M CASE NUMBER: 16-170310

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: CPL T. WALTON #6942

PERSONAL CONTACT

DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENTS PUTTING DEF. BEHIND WHEEL OF VEHICLE)
ON THE ABOVE DATE AND TIME I RESPONDED TO HAGEN RANCH RD AND LANTANA RD IN REF TO A POSSIBLY IMPAIRED DRIVER. UPON ARRIVAL I MET WITH D/S WARD WHO STATED THAT HE WAS HELPING A STRANDED MOTORIST WHEN HE NOTICED A RED HYUNDAI WESTBOUND ON LANTANA RD AT A HIGH RATE OF SPEED. D/S WARD ESTIMATED THE VEHICLE TO BE TRAVELING AT 75MPH IN A 45 MPH. D/S WARD CAUGHT UP TO THE VEHICLE WHICH WAS STOPPED AT THE LIGHT AT LANTANA RD AND HAVERHILL RD. D/S WARD STATED THAT THE LIGHT TURNED GREEN AND THE VEHICLE SPEED OFF AT A HIGH RATE OF SPEED. D/S WARD ACTIVATED HIS RADAR AND GOT A SPEED OF 85MPH IN A 45MPH. D/S ACTIVATED HIS LIGHTS AND THE VEHICLE CONTINUED WESTBOUND UNTIL IT PULLED OVER AT HAGEN RANCH RD. D/S WARD MADE CONTACT WITH THE DEF AND NOTICED AN ODOR OF AN UNK ALCOHOLIC BEVERAGE COMING FROM HER PERSON. D/S WARD HAD THE DEF GET OUT OF THE VEHICLE WHICH HE NOTICED THAT THE DEF WAS SWAYING WHILE STANDING STILL. D/S WARD GAVE A FULL SUPPLEMENTAL PC.

OBSERVATION OF DRIVER:

I MADE CONTACT WITH THE DEF WHO WAS STANDING OUTSIDE OF HER VEHICLE WHEN I ARRIVED. WHEN I MADE CONTACT WITH THE DEF I NOTICED HER EYES TO BE WATERY AND GLASSY. THE DEF HAD AN ODOR OF AN UNK ALCOHOLIC BEVERAGE COMING FROM HER PERSON. I ASKED THE DEF IF SHE HAD ANYTHING TO DRINK TONIGHT AND SHE STATED NO. I STATED THAT I COULD SMELL THE ODOR OF ALCOHOL COMING FROM HER. THE DEF STATED THAT SHE WAS AROUND PEOPLE. I ASKED IF SHE HAD HER FRIENDS SPILL ALCOHOL ON HER AND SHE DIDN'T REPLY. THE DEF WAS SWAYING WHILE STANDING STILL. I NOTIFED THE DEF THAT I WAS CONDUCTING A DUI INVESTIGATION AND WAS REQUESTING HER TO DO SFST'S.

DRIVER'S STATEMENTS:

THE DEF STATED THAT SHE WOULD DO THE SFST'S. THE DEF WAS ASKED IF SHE HAD ANY MEDICAL PROBLEMS AND SHE STATED THAT SHE WAS UNDER PRESSURE WITH PERSONNAL PROBLEMS.

ODORS:

ODOR OF AN UNK ALCOHOLIC BEVERAGE COMING FROM THE MOUTH.

GENERAL OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: SARCASTIC

CLOTHING: BLK PANTS, GRY TOP, BLK SNEAKERS

MEDICAL/OTHER: NONE

ALL ROADSIDES CAPTURED ON IN-CAR VIDEO

STATE OF FLORIDA
COUNTY OF PALM BEACH

CPL T. WALTON #6942

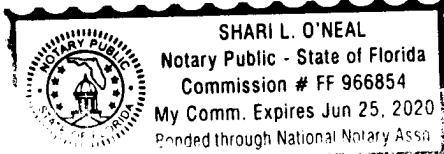
(Signature of Arresting/Investigative Officer)



The foregoing instrument was sworn to or affirmed and subscribed before me this 28 day of DECEMBER 20 16 by CPL T. WALTON #6942

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced KNOWN

Notary Public, Clerk of Court, Officer (F.S.S. 117.10)



SCANNED
DEC 29 2016

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

LT EYE-LACK OF SMOOTH PURSUIT
 LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
 LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

RT EYE-LACK OF SMOOTH PURSUIT
 RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
 RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

Other Observations:**SWAYING, MOVING HEAD, NO VGN, NO LOC.****WALK & TURN:**

THE DEF WAS PLACED INTO THE INSTRUCTIONAL STANCE FOR THE WALK AND TURN AND GIVEN INSTRUCTIONS. THE DEF STATED THAT HE UNDERSTOOD THE INSTRUCTIONS. THE DEF CAME OUT OF THE INSTRUCTIONAL STANCE SEVERAL TIMES, MISSED HEEL TO TOE 4 TIMES, USED ARMS FOR BALANCE, CONDUCTED WRONG TURN, TOOK 9 STEPS FORWARD AND 9 BACK, WALKED OFF THE LINE FOR THREE STEPS ON THE RETURN STEPS,

ONE LEG STAND:

THE DEF WAS PLACED INTO THE INSTRUCTIONAL STANCE FOR THE ONE LEG STAND AND GIVEN INSTRUCTIONS. THE DEF STATED THAT HE UNDERSTOOD THE INSTRUCTIONS. USED ARMS FOR BALANCE, SWAYED DURING THE TASK, SET FOOT DOWN 1 TIME.

FINGER TO NOSE:

THE DEF WAS PLACED INTO THE INSTRUCTIONAL STANCE FOR THE FINGER TO NOSE AND GIVEN INSTRUCTIONS. THE DEF STATED THAT HE UNDERSTOOD THE INSTRUCTIONS. MISSED THE TIP OF HER NOSE 4 TIMES, FAILED TO RETURN HER ARM TO THE SIDE ALL TIMES, SWAYED DURING THE TASK, OPENED EYES DURING THE TASK, AND USED THE WRONG HAND DURING THE TASK BUT THEN CORRECTED HERSELF.

ROMBERG ALPHABET:

THE DEF WAS PLACED INTO THE INSTRUCTIONAL STANCE FOR THE ROMBERG ALPHABET AND GIVEN INSTRUCTIONS. THE DEF STATED THAT HE UNDERSTOOD THE INSTRUCTIONS. RECITED ALPHABET CORRECTLY BUT PAUSED AFTER V. THE DEF WAS SWAYING DURING THE TASK AND SEPERATED HER FEET DURING THE TASK TO KEEP BALANCE.

BREATH TEST RESULTS: 1) .138 2) .144 3) 4)

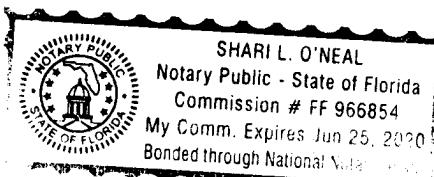
STATE OF FLORIDA
 COUNTY OF PALM BEACH

CPL T. WALTON #6942
 (Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 28 day of DECEMBER 2016 by CPL T. WALTON #6942

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced KNOWN

Notary Public, Clerk of Court, Officer (F.S.S. 117.10)



SCANNED
 DEC 29 2016

WITNESS LIST

16-170310

ARRESTING OFFICER: **CPL T. WALTON #6942**

CASE NUMBER: 16-170310

ADDRESS: DUI UNIT

PHONE NUMBERS (HOME): _____ (WORK) 681-4500

CAN TESTIFY TO: DUI INVESTIGATION

NAME: D/S C WARD

ADDRESS: DIST 6

PHONE NUMBERS (HOME): _____ (WORK) 688-3000

CAN TESTIFY TO: DRIVING PATTERN

NAME: D/S VALENZUELA 18348

ADDRESS: DIST 6

PHONE NUMBERS (HOME): _____ (WORK) 688-3000

CAN TESTIFY TO: BACK UP

NAME: D/S BALDINO 25513

ADDRESS: DIST 6

PHONE NUMBERS (HOME): _____ (WORK) 688-3000

CAN TESTIFY TO: BACK UP

NAME: _____

ADDRESS: _____

PHONE NUMBERS (HOME): _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS: _____

PHONE NUMBERS (HOME): _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS: _____

PHONE NUMBERS (HOME): _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS: _____

PHONE NUMBERS (HOME): _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS: _____

PHONE NUMBERS (HOME): _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS: _____

PHONE NUMBERS (HOME): _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS: _____

PHONE NUMBERS (HOME): _____ (WORK) _____

CAN TESTIFY TO: _____

SCANNED

DEC 29 2016

TESTING FACILITY TASK REPORT

10
6942

AGENCY: Florida Cr. Watch

SUBJECT: F. J. Smith CASE NUMBER: 16-1701-10

DATE: 12-28-16 VIDEO TAPE NUMBER: 6-405

BEGINNING TIME: 05:10:00 ENDING TIME: 05:21:30

BREATH TESTS RESULTS: 1) 128 TIME 05:17 A.M./P.M. 2) 144 TIME 05:20 A.M./P.M.
3) TIME A.M./P.M. 4) TIME A.M./P.M.

BREATH OPERATOR: T. J. Smith #621

MAINTENANCE TECHNICIAN: John J. Smith #627

TESTING OFFICER'S OBSERVATIONS

SPEECH: —

ATTITUDE: Relaxed, Complaining, Tired, Drunk

CLOTHING: Light Gray/Blue Hoodie + Dark Blue Jeans

MEDICAL CONDITIONS: —

MEDICATIONS: —

OTHER: Eyes: Red + Glassy

Color of Urine: Amber + Strong + Odor. # 6942

COMMENTS: 20 min. Observation done by AID Watch

Not enough time to do a full test.

Did not have time to do a full test.

Did not have time to do a full test.

Did not have time to do a full test.

Did not have time to do a full test.

Did not have time to do a full test.

Did not have time to do a full test.

Did not have time to do a full test.

Did not have time to do a full test.

Did not have time to do a full test.

Did not have time to do a full test.

Did not have time to do a full test.

Did not have time to do a full test.

Did not have time to do a full test.

SUBJECT: F. V. 16 CASE NUMBER: 16-1170210

IMPLIED CONSENT FOR DUI IN A MOTOR VEHICLE

NOTE: READ ONLY THE PARAGRAPH APPLICABLE TO THE TYPE OF TEST YOU ARE REQUESTING.

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

-OR-

I am now requesting that you submit to a lawful test of your URINE for the purpose of detecting the presence of chemical or controlled substances.

-OR-

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

NOTE: READ ONLY IF THE SUBJECT DOES NOT COMPLY WITH YOUR REQUEST.

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'S SIGNATURE: (X) _____

CONSTITUTIONAL WARNINGS

I AM REQUIRED TO WARN YOU BEFORE YOU MAKE ANY STATEMENTS THAT YOU HAVE THE FOLLOWING RIGHTS:

1. You have the right to remain silent and not answer any questions.
2. Any statement must be freely and voluntarily given.
3. You have the right to the presence 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 statements 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 and will be used against you in a court of law.

SCANNED

DEC 29 2016

SUSPECT'S SIGNATURE: (X) _____

ON CAMERA

SUBJECT: _____ CASE NUMBER: _____

QUESTIONS AND ANSWERS

I AM NOW GOING TO ASK YOU SOME QUESTIONS. WITH THESE RIGHTS IN MIND, YOU MAY ANSWER SOME OF, ALL OF, OR NONE OF THE FOLLOWING QUESTIONS AS YOU LIKE.

WERE YOU OPERATING A MOTOR VEHICLE AT THE TIME OF THE STOP/ACCIDENT? _____

WHERE WERE YOU GOING? _____

WHAT STREET OR HIGHWAY WERE YOU ON? _____

DIRECTION OF TRAVEL? _____ WHERE DID YOU START? _____

WHAT TIME DID YOU START? _____ WHAT TIME IS IT NOW? _____

WHAT IS TODAY'S DATE? _____ WHAT DAY OF THE WEEK IS IT? _____

WHAT COUNTY AND CITY ARE YOU IN NOW? _____

WHEN DID YOU LAST EAT? _____ WHAT DID YOU EAT? _____

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? _____

HOW MUCH DO YOU WEIGH? _____ HAVE YOU BEEN DRINKING? _____ WHAT? _____

HOW MUCH? _____ WHERE? _____ WITH WHOM? _____

WHEN DID YOU HAVE YOUR FIRST DRINK? _____ AND YOUR LAST DRINK? _____

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? _____

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? _____ ARE YOU UNDER THE INFLUENCE? _____

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? _____ HOW MUCH? _____

WHAT? _____ WHERE? _____ WHEN? _____

WHAT LINE OF WORK ARE YOU IN? _____ WHEN DID YOU LAST WORK? _____

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? _____ WHAT? _____

ARE YOU SICK OR INJURED? _____ WHAT'S WRONG? _____

DO YOU LIMP? _____ DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? _____

WERE YOU IN AN ACCIDENT TODAY? _____

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? _____ WHEN? _____

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? _____ WHO? _____ WHY? _____

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? _____ WHAT? _____ WHEN? _____

DO YOU HAVE: EPILEPSY? _____

GLASS EYE? _____

FALSE TEETH? _____

EAR INFECTION? _____

INNER EAR TROUBLE? _____

DIABETES? _____

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? _____

DO YOU TAKE INSULIN? _____ IF SO, WHEN WAS YOUR LAST INJECTION? _____

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? _____ WHERE? _____

INTERVIEWER: *Joe Johnson* *EOA*

NOT A CERTIFIED COPY

SCANNED
DEC 29 2016