

0493197

17 CT 20390

550

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

OBTS Number	Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06-17-149469	
Charge Type: Check as many as apply.	<input type="checkbox"/> 1. Felony	<input type="checkbox"/> 3. Misdemeanor	<input type="checkbox"/> 5. Ordinance	Weapon Seized / Type 1. Yes 2. No		Multiple Clearance Indicator 01
<input type="checkbox"/> 2. Traffic Felony		<input checked="" type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 6. Other	Location of Arrest (Including Name of Business) 1073 AERO CLUB DR WELLINGTON 33414		
Date of Arrest 11/09/2017			Time of Arrest 0215	Booking Date	Booking Time	Location of Offense (Business Name, Address) 1073 AERO CLUB DR WELLINGTON 33414
Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle

Name (Last, First, Middle) NELSON KENDALL S		Alias (Name, DOB, Soc. Sec. #, Etc.)				
Race W - White I - American Indian B - Black O - Oriental/Asian	Sex W	Date of Birth 05/26/1995	Height 5-08	Weight 155	Eye Color GRN	Hair Color BRN
Complexion FAIR		Build MED		Mental Status SINGLE		
Religion NONE			Indication of Alcohol Influence Y N Unk. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		Indication of Drug Influence Y N Unk. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) TT-VARIOUS PLACES			Local Address (Street, Apt. Number) 11159 SUNSET DR		Phone (757) 576-6072	
Permanent Address (Street, Apt. Number)			City WEST PALM BEACH, FL 33411		Residence Type: 1. City 2. County 3. Florida 4. Out of State 2	
Business Address (Name, Street)			City		Address Source VERBAL	
D/L Number, State FL/N425-517-95-686-0			Soc. Sec. Number		INS Number	
Place of Birth (City, State) VIRGINIA BCH, VA			Citizenship USA			

Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large	<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	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large	<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile
Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other:			Residence Phone		
Address (Street, Apt. Number)			City		State
Address (Street, Apt. Number)			City		State
Address (Street, Apt. Number)			City		State

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? <input type="checkbox"/> Yes <input type="checkbox"/> No	Description of Property	Value of Property	

Drug Activity N. N/A P. Possess	S. Sell B. Buy T. Traffic	R. Smuggle D. Deliver E. Use	K. Dispense/ Distribute	M. Manufacture/ Produce/ Cultivate	Z. Other	Drug Type N. N/A A. Amphetamine	B. Barbiturate C. Cocaine E. Heroin	H. Hallucinogen M. Marijuana O. Opium/Deriv.	P. Paraphernalia/ Equipment S. Synthetics	U. Unknown Z. Other
Charge Description DUI	Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 316.193(1)		Violation of ORD #					
Drug Activity N	Drug Type N	Amount / Unit	Offense # 17-149469	Warrant / Capias Number		Bond				
Charge Description	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation of ORD #					
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond				
Charge Description	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation of ORD #					
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond				
Charge Description	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation of ORD #					
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond				

Location (Court, Room Number, Address) PALM BEACH COUNTY COURTHOUSE CRIMINAL JUSTICE COMPLEX, 3228 GUN CLUB RD, WEST PALM BEACH, FL 33406 - CB: (561) 355-2996	
Court Date and Time Month 12 Day 07 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) <i>Verally had</i>	Date Signed 11/09/2017

HOLD for other Agency Name:	Signature of Arresting Officer <i>Walton</i>	Name Verification (Printed by Arrestee) NOV 9 AM 4:52
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal	<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:	(PRINT)
Name of Arresting Officer (Print) Cpl. Thomas Walton	I.D. # 6942	PAGE 1 OF 1
Transporting Officer Cpl. Thomas Walton	ID # 6942	Agent PBS

PROBABLE CAUSE AFFIDAVIT

1. Arrest
2. N.T.A. 3. Request for Warrant
4. Request for Capias 5. Juvenile

OBTS Number	Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 06-17-149469
Charge Type: Check as many as apply.	<input type="checkbox"/> 1. Felony	<input checked="" type="checkbox"/> 3. Misdemeanor	<input type="checkbox"/> 5. Ordinance	Special Notes:
	<input type="checkbox"/> 2. Traffic Felony	<input type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 6. Other	

Name (Last, First, Middle) NELSON	Alias KENDAL SHAE	Race W	Sex F	Date of Birth 05/28/1995
Charge Description DUI	Charge Description	Charge Description	Charge Description	Charge Description

Victim's Name (Last, First, Middle) STATE OF FL.	Race	Sex	Date of Birth
Local Address (Street, Apt. Number) (City) (State) (zip) Phone	Address Source		
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
 committed the below acts in my presence. was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.
 confessed to _____ admitting to the below facts. was found to have committed the below acts, resulting from my (described) investigation.
 On the **9TH** day of **NOV** 20 **17** at **0120** A.M. P.M. (Specifically include facts constituting cause for arrest.)

ON THUR., 11/09/17 AT APPROXIMATELY 0118HRS., WHILE ON UNIFORM PATROL WORKING, IN THE AREA OF AERO CLUB DR., & BINKS RD., WELLINGTON FL., I OBSERVED A BICYCLIST TRAVELING WEST BOUND ON AERO CLUB, ON THE SIDE WALK WITH PROPER LIGHTING, SWERVING ALL OVER THE SIDEWALK, WHICH CAUGHT MY ATTENTION, AT WHICH TIME I SLOWED TO INVESTIGATE.

AS I SLOWED TO TO WATCH THE BICYCLIST, I OBSERVED THE DRIVER COME CLOSE TO FALLING OFF THE BIKE SEVERAL TIMES, AT WHICH TIME I INITIATED A TRAFFIC STOP AT AERO CLUB DR., & BINKS FOREST. UPON STOPPING THE BICYCLIST, I MADE CONTACT WITH THE DRIVER, W/F KENDAL S. NELSON. AS NELSON EXITED HER BIKE, SHE MADE SEVERAL ATTEMPTS TO PUT THE KICKSTAND DOWN AND ALMOST FELL. ONCE THE BIKE WAS PROPERLY STANDING, I ASKED NELSON FOR HER IDENTIFICATION AND NOTICED A VERY STRONG ODOR OF AN UNKNOWN ALCOHOL BEVERAGE EMANATING FROM NELSON'S BREATH. AS NELSON ATTEMPTED TO GAIN HER IDENTIFICATION, I NOTICED SHE HAD GLASSY BLOOD SHOT EYES AND HER SPEECH WAS SLURRED, INDICATING THAT SHE HAD BEEN DRINKING. DUE TO THE SMELL OF AN UNKNOWN ALCOHOLIC BEVERAGE, SWERVING, STUMBLING, GLASSY EYES AND SLURRED SPEECH, I BELIEVE THAT NELSON WAS UNDER THE INFLUENCE OF ALCOHOL AT WHICH TIME I REQUESTED FOR A DUI INVESTIGATOR.

SEVRAL MINUTES LATER, DUI 14, D/S T. WALTON #6942 ARRIVED TOOK OVER THE INVESTIGATION.

STATE OF FLORIDA
COUNTY OF PALM BEACH
J. BROWN III
 (Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this **9TH** day of **NOV** 20 **17** by **J. BROWN III 8678**
 (Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced **PERSONALLY KNOWN**

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

SCANNED
NOV 14 2017

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 09 DAY OF NOVEMBER 20 17, AT 0116 AM PM

SUBJECT: NELSON KENDALL S CASE NUMBER: 17-149469

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: Cpl. Thomas Walton

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 1073 Aero Club Rd Wellington, FL in ref to a possibly impaired person riding a bicycle. Upon arrival I met with D/S Brown 8678 who stated WHILE ON UNIFORM PATROL WORKING, IN THE AREA OF AERO CLUB DR., & BINKS RD., WELLINGTON FL., I OBSERVED A BICYCLIST TRAVELING WEST BOUND ON AERO CLUB, ON THE SIDE WALK WITH PROPER LIGHTING, SWERVING ALL OVER THE SIDEWALK, WHICH CAUGHT MY ATTENTION, AT WHICH TIME I SLOWED TO INVESTIGATE. AS I SLOWED TO WATCH THE BICYCLIST, I OBSERVED THE DRIVER COME CLOSE TO FALLING OFF THE BIKE SEVERAL TIMES, AT WHICH TIME I INITIATED A TRAFFIC STOP AT AERO CLUB DR., & BINKS FOREST. UPON STOPPING THE BICYCLIST, I MADE CONTACT WITH THE DRIVER, W/F KENDAL S. NELSON. AS NELSON EXITED HER BIKE, SHE MADE SEVERAL ATTEMPTS TO PUT THE KICKSTAND DOWN AND ALMOST FELL. ONCE THE BIKE WAS PROPERLY STANDING, I ASKED NELSON FOR HER IDENTIFICATION AND NOTICED A VERY STRONG ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE EMANATING FROM NELSON'S BREATH. AS NELSON ATTEMPTED TO GAIN HER IDENTIFICATION, I NOTICED SHE HAD GLASSY BLOOD SHOT EYES AND HER SPEECH WAS SLURRED, INDICATING THAT SHE HAD BEEN DRINKING. DUE TO THE SMELL OF AN UNKNOWN ALCOHOLIC BEVERAGE, SWERVING, STUMBLING, GLASSY EYES AND SLURRED SPEECH, I BELIEVE THAT NELSON WAS UNDER THE INFLUENCE OF ALCOHOL AT WHICH TIME I REQUESTED FOR A DUI INVESTIGATOR.

OBSERVATION OF DRIVER:

I made contact with the def who was standing on the sidewalk next to a Blue Huffy bicycle. As I made contact with the def I noticed that the def had red glossy bloodshot eyes. I noticed that the def had a strong of an unk alcoholic beverage coming from her person. I asked the def where she was coming from and she stated that she was at work until about 10pm and then went to JoJo's Sports Bar and had a few drinks. The def stated that she was trying to go to "F" Rd and Connecting Canal Rd to feed her horse. I noticed that the def was swaying while standing still. While the def was speaking she was slurring her words. I asked the def how much she had to drink and she stated three drinks. I asked the def what she was drinking tonight and she stated Whiskey and Ginger Ale. I explained to the def that I was here to conduct a DUI Investigation and explained why the Deputy stopped her. After explaining this to the def she began questioning why I was doing a DUI Investigation. I explained to the def that in the State of FLA a bicycle is considered a Manually powered vehicle and have to follow all motor vehicle laws.

DRIVER'S STATEMENTS:

After explaining this to the def I asked her to submit to SFST's. The def continued to avoid the question and explain that she was only trying to make it home and that she knows she has been drinking. I explained to the def that she could have rode her bicycle into traffic and caused a major accident or fatality. After speaking with the def I asked several more times for her to submit to SFST's and she agreed. The def was walked out to the front of my marked patrol vehicle where SFST's were performed.

ODORS:

Strong odor of an Unk Alcoholic beverage coming from her breath.

GENERAL OBSERVATIONS

SPEECH: Slurred speech

ATTITUDE: Crying, emotional, cooperative

CLOTHING: Gry slacks, Blk shirt and brn shoes

MEDICAL/OTHER: None

ALL ROADSIDES CAPTURED ON IN-CAR VIDEO

STATE OF FLORIDA
COUNTY OF PALM BEACH

Cpl. Thomas Walton

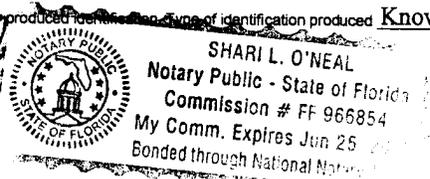
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 09 day of November 20 17 by Cpl. Thomas Walton

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced true identification type of identification produced Known

Shari O'Neal (#6212)

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



SCANNED

NOV 14 2017

SUBJECT NELSON

KENDALL

CASE NUMBER 17-149469

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- | | |
|---|---|
| <input checked="" type="checkbox"/> LT EYE-LACK OF SMOOTH PURSUIT | <input checked="" type="checkbox"/> RT EYE-LACK OF SMOOTH PURSUIT |
| <input checked="" type="checkbox"/> LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION | <input checked="" type="checkbox"/> RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION |
| <input checked="" type="checkbox"/> LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES | <input checked="" type="checkbox"/> RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES |

Other Observations:

Moving head, Swaying, VGN was detected, Not following stimulus properly.

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 WAS UNABLE TO REMAIN IN THE INSTRUCTIONAL STANCE AND HAD TO BE TOLD SEVERAL TIMES TO GET BACK INTO POSITION. THE DEF TOOK 9 STEPS FORWARD MISSING HEEL TO TOE 4 TIMES, THEN THE DEF TOOK THREE STEPS IN CIRCLE NOT LEAVING FOOT ON LINE, THE DEF THEN TOOK FIVE STEPS BACK MISSING ALL FIVE HEEL TO TOE STEPS. THE DEF JUST STOPPED AND NEVER FINISHED THE TASK.

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. THE DEF BEGAN THE TASK AND HAD TO BE TOLD SEVERAL TIMES TO LOOK AT HER FOOT. THE DEF WAS SWAYING AND SET HER FOOT DOWN TWICE. THE DEF USED ARMS FOR BALANCE.

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. THE DEF WAS SWAYING AND MISSED THE TIP OF HER NOSE THREE TIMES. THE DEF USED WRONG HAND BUT 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. THE DEF STATED THAT SHE WAS WORKING ON TWO SEPERATE A.S. DEGREE'S. THE DEF RECITED THE ALPHABET WRONG SEVERAL TIMES AND WOULD THEN JUST TURN TO ME AND ASK WHY SHE IS DOING THIS WHEN SHE WAS ON A BICYCLE. THE DEF WAS SWAYING AND OPENED HER EYES DURING THE TASK.

BREATH TEST RESULTS: 1) .149 2) .146 3) 4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

Cpl. Thomas Walton

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 09 day of November, 2017 by Cpl. Thomas Walton

(Print name of Arresting/Investigative Officer), who is personally known to me and my identification type of identification produced Known

Shari O'Neal (#6212)

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

SHARI L. O'NEAL
 Notary Public, State of Florida
 Commission # FF 96685
 My Comm. Expires Jan 2018
 Bonded through National Notary Association

SCANNED
NOV 14 2017

WITNESS LIST

CASE NUMBER: 17-149469

ARRESTING OFFICER: Cpl. Thomas Walton

ADDRESS: DUI Unit

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

CAN TESTIFY TO: DUI Investigation

NAME: D/S JOHN BROWN 8678

ADDRESS: DIST 8

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

CAN TESTIFY TO: WHEEL WITNESS AND RIDING PATTERN

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) 0 (WORK) 0

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

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ADDRESS _____

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CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

SCANNED
NOV 14 2017

TESTING FACILITY TASK REPORT

19

AGENCY: 1030 Cpl. Walton #6942

SUBJECT: Nelson, Donald S. CASE NUMBER: 17-149469

DATE: 11-09-17 VIDEO TAPE NUMBER: ---

BEGINNING TIME: 0314 ENDING TIME: 0315

BREATH TESTS RESULTS: 1) .194 TIME 0327 A.M./P.M. 2) .146 TIME 0331 A.M./P.M.
3) _____ TIME _____ A.M./P.M. 4) _____ TIME _____ A.M./P.M.

BREATH OPERATOR: O'Neil #16212

MAINTENANCE TECHNICIAN: D/S J. Wallace #6907

TESTING OFFICER'S OBSERVATIONS

SPEECH: Slurred

ATTITUDE: Emotional, Crying, Upset, Cooperative

CLOTHING: Blue Jacket, Pants - Gray

MEDICAL CONDITIONS: None

MEDICATIONS: None

OTHER: Eyes: Very Red, Watery, Crying

Also of my own alcoholic beverage.

COMMENTS: 20 min. observation. Done by A.O. Walton #6942

A/O requested the breath test.

I submitted to the test.

I asked questions about the test.

I implied consent and on camera.

I decided to submit to the breath test.

SCANNED

NOV 14 2017

SUBJECT: N. 100, 1st St. S. CASE NUMBER: 17-159969

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 Cpt. Walton #0142 of the PBSO

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.

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SUSPECT'S SIGNATURE: (X) _____

SUBJECT: Nelson, Michael J. CASE NUMBER: 17-149469

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? _____

SCANNED
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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: CA - West #6072