

J-0433462

18CT2245-MB

P-1074

ARREST / NOTICE TO APPEAR  
Juvenile Referral Report

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

OBTS Number	Agency ORI Number <b>FLO 500000</b>		Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>		Agency Report Number (N.T.A.'s only) <b>06-18-034142</b>	
Charge Type: Check as many as apply	<input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony	<input 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 <b>1</b>	
Location of Arrest (Including Name of Business) <b>N FEDERAL HWY AND 9 AVE N LAKE WORTH FL 334</b>				Location of Offense (Business Name, Address) <b>N FEDERAL HWY AND 9 AVE N LAKE WORTH FL 334</b>		
Date of Arrest <b>02/03/2018</b>	Time of Arrest <b>0136</b>	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle <b>JOY TOWING</b>

Name (Last, First, Middle) <b>MORALES MARQUEZ LAURA V</b>		Alias (Name, DOB, Soc. Sec. #, Etc.)				
Race W - White I - American Indian B - Black O - Oriental/Asian	Sex <b>F</b>	Date of Birth <b>08/10/1988</b>	Height <b>504</b>	Weight <b>157</b>	Eye Color <b>BRO</b>	Hair Color <b>BRO</b>
Complexion <b>MED</b>		Build <b>MED</b>		Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) <b>TAT FOOT ONE BACK</b>		
Local Address (Street, Apt. Number) <b>920 N FEDERAL HWY LAKE WORTH FL 33460</b>		Phone <b>(561) 729 6928</b>		Residence Type: 1. City 2. County 3. Florida 4. Out of State <b>1</b>		
Permanent Address (Street, Apt. Number)		Phone		Address Source <b>DEFENDANT</b>		
Business Address (Name, Street)		Phone		Occupation		
D/L Number, State <b>(FL)M642538887900</b>	Soc. Sec. Number	INS Number		Place of Birth (City, State) <b>ELSALVADOR</b>		Citizenship <b>RES</b>

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

<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other	Address (Street, Apt. Number) (City) (State) (Zip)			Residence 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? <input type="checkbox"/> Yes <input type="checkbox"/> No	Description of Property		Value of Property	

Drug Activity N. N/A S. Sell 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 <b>DUI</b>	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number <b>316.193(1)</b>		Violation of ORD #					
Drug Activity	Drug Type	Amount / Unit	Offense # <b>18-034142</b>	Warrant / Capias Number		Bond <b>FEB 3 AM 4:14</b>				
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) <b>3228 GUN CLUB RD WEST PALM BEACH FL 33406</b>	
Court Date and Time Month <b>MARCH</b> Day <b>1</b> Year <b>2018</b> Time <b>0830</b> 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 <b>02/03/2018</b>

HOLD for other Agency Name:	Signature of Arresting Officer <b>E. K. WHITE</b>	Name Verification (Printed by Arrestee) <b>SCANNED</b> <b>FEB 05 2018</b>
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal	Name of Arresting Officer (Print) <b>E. K. WHITE</b>	Witness here if subject signed with an "X"
<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:	ID # <b>7209</b>	PAGE
Intake Deputy <b>Spaul</b>	Transporting Officer <b>E. K. WHITE</b>	Agency <b>PBSO</b>
I.D. #	ID # <b>7209</b>	OF

PROBABLE CAUSE AFFIDAVIT

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

Juvenile  1

ADMIN	OBTS Number	Agency ORI Number <b>FLO 500000</b>	Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>	Agency Report Number <b>06- 18-034142</b>
	Charge Type: Check as many as apply.	Special Notes:		

DEF	Name (Last, First, Middle) <b>MORALES MARQUEZ, LAURA, V</b>	Alias	Race W	Sex F	Date of Birth 08/10/1988
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CHARGES	Charge Description <b>DUI</b>	316.193(1)	Charge Description
	Charge Description		Charge Description

VICTIM	Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
	Local Address (Street, Apt. Number)	(City)	(State)	(zip)
	Business Address (Name, Street)	(City)	(State)	(zip)

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 \_\_\_\_\_  was found to have committed the below acts, resulting from my (described) investigation.  
 admitting to the below facts.  
 On the 3 day of FEBRUARY 20 18 at 0059  A.M.  P.M. (Specifically include facts constituting cause for arrest.)

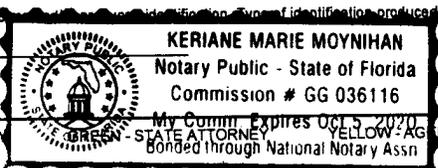
**On Saturday, February 3, 2018 at approximately 0059 hours, I was dispatched to North Federal Highway and 9th Avenue North, in the City of Lake Worth (Palm Beach County) Florida in reference to a female passed out inside of a utility vehicle in the eastbound lanes. While en route to this location Palm Beach Communications advised fire rescue were also on the way to this location. Upon my arrival I noticed other deputies were on scene. I saw a white Chevrolet utility vehicle stopped on 9th Ave in the middle of the roadway facing east. A closer observation revealed a white female who was a single occupant sitting inside the driver seat. The vehicle was on and placed in "DRIVE". The female was passed out with her head tilted back. The doors were locked and the music inside the vehicle was blaring loudly. I asked one of the deputies to place his patrol car in front of the vehicle to prevent it from entering the intersection if the driver woke and attempted to accelerate the vehicle. Fire rescue arrived and placed chocks underneath the front and rear tires. I knocked on the window in an effort to wake the driver. She slowly began awakening and appeared dazed. I yelled for her to open her door. She stared at us and slowly opened the driver side door. The paramedics asked her to step out of the vehicle and began assessing her for any medical problems. I noticed the front zipper of her blue jeans was unfastened. I also saw wetness in the front and rear of her pants. Her pants were disheveled and untidy. She wore a black shirt and white sandals. She later told the paramedics that she was fine.**

**I later spoke with the complainant who dialed 911. He came forward and gave a sworn video statement. The defendant said he was attempting to make a left turn onto 9th Ave N from Federal Hwy when he noticed a white vehicle stopped in the roadway that was blocking both lanes. He thought someone abandoned the vehicle but later saw a white female sitting in the driver seat with her head tilted back. He tried to gain her attention but his efforts were to no avail. He managed to drive pass the vehicle and notify the police.**

STATE OF FLORIDA  
 COUNTY OF PALM BEACH  
 INV. E. K. WHITE 720  
 (Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 3 day of FEBRUARY 20 18 by INV E K WHITE  
 (Print name of Arresting/Investigative Officer), who is personally known to me as KNOWN

**Keriane Marie Moynihan**  
 Notary Public, Clerk of Court, Officer (F.S.S. 117.10)



**SCANNED**  
**FEB 05 2018**

PROBABLE CAUSE AFFIDAVIT

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

1

Juvenile

ADMIN	OBTS Number	Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>		Agency Report Number <b>06- 18-034142</b>
	Agency ORI Number <b>FLO 500000</b>			
Charge Type: Check as many as apply.				Special Notes:
<input type="checkbox"/> 1. Felony		<input type="checkbox"/> 3. Misdemeanor		<input type="checkbox"/> 5. Ordinance
<input type="checkbox"/> 2. Traffic Felony		<input type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 6. Other

DEF	Name (Last, First, Middle) <b>MORALES MARQUEZ, LAURA, V</b>	Alias	Race <b>W</b>	Sex <b>F</b>	Date of Birth <b>08/10/1988</b>
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CHARGES	Charge Description <b>DUI</b>	316.193(1)	Charge Description
	Charge Description		Charge Description

VICTIM	Victim's Name (Last, First, Middle) ,,	Race /	Sex /	Date of Birth /
	Local Address (Street, Apt. Number) ,	(City)	(State)	(zip)
	Business Address (Name, Street) ,	(City)	(State)	(zip)

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 3 day of FEBRUARY 2018 at 0059  A.M.  P.M. (Specifically include facts constituting cause for arrest.)

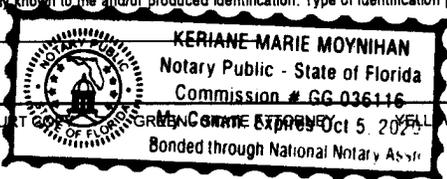
The driver later identified herself as Laura V. Morales Marquez. While speaking with her I noticed she had red, watery and glossy eyes. Her mouth was dry. She was disoriented and confused. I could smell a faint odor of an unknown alcoholic beverage emanating from her breath. I told her residents in the neighborhood called the police when they noticed her passed out in the driver seat of her vehicle. They watched her sit in this location for over 10 minutes. I also explained the the vehicle's engine was on with the shifter placed in "DRIVE". I told her I had a suspicion that she had been drinking an unspecified amount of alcoholic beverages. I asked if she would consent to performing Standardized Field Sobriety Evaluations (SFSTs) for the purpose of determining if she was impaired while in actual physical control of an operational motor vehicle. She told me she did not want to perform the SFSTs. I explained Taylor Warnings, informing her that the SFSTs were voluntary and she did not have to comply. However if she did not comply I would only be left with the evidence before me {previously mentioned indicators} which could be strong basis of her being placed under arrest for DUI. She later consented to performing the SFSTs. Prior to her performance I asked if she had any physical problems with her body that would inhibit her from performing light physical movements. I also asked if she was on medication. The defendant conveyed she neither had anything wrong with her physically, nor was she taking medication. I had her remain with the back up deputies while I located a smooth area for the SFSTs to be performed. I placed yellow tape on the roadway that formed a line. The area was free from obstructions and debris. It was illuminated by ambient lighting and the head lights from my patrol car. The following SFSTs were intended to be administered after being explained, demonstrated and acknowledged by them: HGN, The Walk and Turn, The One Leg Stand, The Finger to Nose and The Romberg Alphabet Recitation. I attempted HGN but the defendant failed to perform this task as instructed. She failed to look at the light and follow it with her eyes. I attempted to administer the Walk and Turn. After placing her in the instructional position she could not maintain her balance. She swayed and ultimately abandoned the position. I asked her to re-assume the position and she became emotional. She told me she had a lumber injury and takes ibuprofen. I asked if she remembered me asking if she had any physical problems prior to the SFSTs. She told me I did not ask her. At the facility however she told the technician she had no physical problems. She later asked to speak with my partner because she thought I was too aggressive. I interrupted the conversation after hearing her ask for advice. She later told me she already had one DUI and her lawyer told her not to perform the SFSTs. I gave her ample opportunities to perform the evaluations, but she stalled and did not cooperate. Thus based on the previously mentioned indicators of impairment, coupled with her being in actual physical control of an operational motor vehicle, probable cause was established for DUI. She was searched and handcuffed (double locked and checked for proper fit) prior to being seated into the rear of my patrol car. Joy Towing responded on a tow rotation request to impound her vehicle.

SCANNED  
FEB 05 2018

STATE OF FLORIDA  
 COUNTY OF PALM BEACH  
 (Signature of Arresting/Investigative Officer) INV. E. K. WHITE 7209

The foregoing instrument was sworn to or affirmed and subscribed before me this 3 day of FEBRUARY 2018 by INV. E. K. WHITE 7209  
 Type of identification produced KNOWN

Name of Arresting/Investigative Officer, who is personally known to me and/or produced identification. Type of identification produced  
Keriane Marie Moynihan  
 Notary Public, Clerk of Court, Officer (F.S.S. 117.10)  
 Notary Public - State of Florida  
 Commission # GG 036116  
 Bonded through National Notary Ass'n



# D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 3 DAY OF FEBRUARY 20 18, AT 0059  AM  PM

SUBJECT: MORALES MARQUEZ LAURA V CASE NUMBER: 18-034142

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: INV. E. K. WHITE 7209

## PERSONAL CONTACT

DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENTS PUTTING DEF. BEHIND WHEEL OF VEHICLE)

SEE PC AFFIDAVIT (1 of 2)

OBSERVATION OF DRIVER:

SEE PC AFFIDAVIT (2 of 2)

DRIVER'S STATEMENTS:

I already have one DUI. My lawyer told me not to do SFSTs

ODORS:

SLIGHT ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE COMING FROM SUBJECT'S BREATH.

## GENERAL OBSERVATIONS

SPEECH: SLIGHTLY SLURRED

ATTITUDE: erratic and unpredictable: crying, argumentative, vile, sarcastic

CLOTHING: blue jeans (disheveled and wet), black top and white sandals

MEDICAL/OTHER: none

STATE OF FLORIDA  
COUNTY OF PALM BEACH

INV. E. K. WHITE 7209

(Signature of Arresting/Investigative Officer)

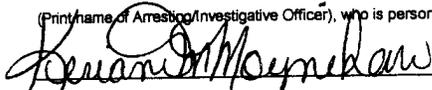


SCANNED

FEB 05 2018

The foregoing instrument was sworn to or affirmed and subscribed before me this 3 day of FEBRUARY 20 18 by INV. E. K. WHITE 7209

(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)



**ROADSIDE TASKS**

**HORIZONTAL GAZE NYSTAGMUS:**

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

**Other Observations:**

**SUBJECT DID NOT PERFORM THIS TASK AS INSTRUCTED**

**WALK & TURN:**

**THE DEFENDANT WAS PLACED IN THE INSTRUCTIONAL STANCE FOR THE WALK AND TURN. THIS TASK WAS EXPLAINED AND DEMONSTRATED TO THE DEFENDANT. THE DEFENDANT ACKNOWLEDGED THE INSTRUCTIONS PRIOR TO PERFORMING THIS TASK: Subject could not maintain her balance when placed in the instructional position. She swayed and abandoned the position. She later refused to comply with any further evaluations.**

**ONE LEG STAND:**

**REFUSED**

**FINGER TO NOSE:**

**REFUSED**

**ROMBERG ALPHABET:**

**REFUSED**

**BREATH TEST RESULTS: .213 .199**

STATE OF FLORIDA  
COUNTY OF PALM BEACH

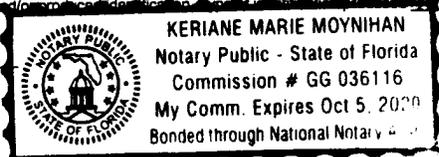
**INV. E. K. WHITE 7209**

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 3 day of FEBRUARY 2018 by INV. E. K. WHITE 7209

(Print name of Arresting/Investigative Officer), who is personally known to me and for me to identify him/her as KNOWN

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



**SCANNED  
FEB 05 2018**

# WITNESS LIST

CASE NUMBER: 18-034142

ARRESTING OFFICER: INV. E. K. WHITE 7209

ADDRESS: HQ

PHONE NUMBERS (HOME): \_\_\_\_\_ (WORK) 561 688 3000

CAN TESTIFY TO: FACTS

NAME: ANDREW NELSON

ADDRESS: 416 9TH AVE N LAKE WORTH FL 33460

PHONE NUMBERS (HOME) (419) 889-3800 (WORK) \_\_\_\_\_

CAN TESTIFY TO: FACTS OF THIS CASE

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) \_\_\_\_\_

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ADDRESS \_\_\_\_\_

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PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) \_\_\_\_\_

CAN TESTIFY TO: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) \_\_\_\_\_

CAN TESTIFY TO: \_\_\_\_\_

**SCANNED**  
**FEB 05 2018**

# TESTING FACILITY TASK REPORT

AGENCY: PBSO

SUBJECT: Miriam Marquez, Lucia V CASE NUMBER: 18-0311412

DATE: 02/03/18 VIDEO TAPE NUMBER: N/A

BEGINNING TIME: 02:41 ENDING TIME: 02:58

BREATH TESTS RESULTS: 1) .213 TIME 02:51 A.M./P.M. 2) .197 TIME 02:54 A.M./P.M.

3) N/A TIME — A.M./P.M. 4) N/A TIME — A.M./P.M.

BREATH OPERATOR: K. Moynihan # 32079

MAINTENANCE TECHNICIAN: J. Karlecke # 64167

## TESTING OFFICER'S OBSERVATIONS

SPEECH: Slurred

ATTITUDE: Irritated, Obnoxious, Repeating Repetitive, Talkative

CLOTHING: Blue Jeans with holes, Black short sleeve shirt, Flip flops

MEDICAL CONDITIONS: None

MEDICATIONS: None

OTHER: Eyes glossy and bloodshot

COMMENTS: Arrived at Testing Center, A/O began 90 minute Observation Period at

Δ refused to answer yes or no

A/O read I/C, give. Δ unable format to read.

Δ str. understood I/C, and stated she would take test.

**SCANNED**  
**FEB 05 2018**

A/O read Rights

Δ stated she wanted her attorney  
Tech read Breath Test Results, Δ stated she understood Results  
No G/H ducts Δ involving rights to counsel.

SUBJECT: Morales Marquez, Loura V CASE NUMBER: 18-034142

**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) Read on Camera

**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  
FEB 05 2018**

SUSPECT'S SIGNATURE: (X) Read on Camera

SUBJECT: Morales-Munoz, Laura V CASE NUMBER: 18-031119

### 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**  
**FEB 05 2018**

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? \_\_\_\_\_

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