

0494739

NH

180572

459

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

1
Juvenile

ADMINISTRATIVE	OBTS Number		Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06- 18-023794			
	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			
	Location of Arrest (Including Name of Business) 2900 SOUTHSHORE BLVD WELLINGTON, FL 33414		Location of Offense (Business Name, Address) 2900 SOUTHSHORE BLVD WELLINGTON, FL 33414		Multiple Clearance Indicator 01					
DEFENDANT	Date of Arrest 01/08/2018	Time of Arrest 0206	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle WESTWAY TOWING			
	Name (Last, First, Middle) COLLADO MIGUEL A		Alias (Name, DOB, Soc. Sec. #, Etc.)							
	Race W - White 1 - American Indian B - Black 0 - Oriental/Asian	Sex M	Date of Birth 09/28/1991	Height 6-03	Weight 240	Eye Color BRN	Hair Color BLK	Complexion TAN	Build LARGE	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		Marital Status SINGLE		Religion CATHOLIC		Indication of: Alcohol Influence Drug Influence Y <input type="checkbox"/> N <input type="checkbox"/> Unk. <input type="checkbox"/>				
Local Address (Street, Apt. Number) 808 Pelham Circle		(City) (State) (Zip) Wellington, FL 33414		Phone (561) 568-9528		Residence Type: 1. City 2. County 3. Florida 4. Out of State 2				
Permanent Address (Street, Apt. Number)		(City) (State) (Zip)		Phone		Address Source VERBAL				
Business Address (Name, Street)		(City) (State) (Zip)		Phone		Occupation HORSE TRAINER				
D/L Number, State NONE		Soc. Sec. Number NONE		INS Number		Place of Birth (City, State) ARGENTINA		Citizenship ARGENTINA		
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 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? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property		Value of Property						
CHARGE	Drug Activity N. N/A S. Sell B. Buy P. Possess T. Traffic		R. Smuggle D. Deliver E. Use		K. Dispense/ Distribute		M. Manufacture/ Produce/ Cultivate		Z. Other	
	Charge Description DUI		Counts 1	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number 316.193(1)		Violation of ORD #			
	Drug Activity N	Drug Type N	Amount / Unit	Offense # 18-023794	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			
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D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 08 DAY OF January 20 17 AT 0134 AM PM
SUBJECT: COLLADO MIGUEL A CASE NUMBER: 18-023794
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 ABOVE DATE AND TIME I RESPONDED TO THE 2900 BLK OF SOUTHSORE BLVD AS BACK UP FOR D/S SCHNEIDER. UPON ARRIVAL I MET WITH D/S SCHNEIDER WHO HAD ME TAKE OVER THE TRAFFIC STOP FOR A POSSIBLY IMPAIRED DRIVER. D/S SCHNEIDER STATED THE FOLLOWING IN A SUPPLEMENTAL PC. I WAS TRAVELLING WEST IN MY PISO MARKED PATROL CAR ON SOUTH SHORE BLVD WHEN I OBSERVED A PICK UP TRUCK APPEARING TO HAVE A HARD TO MAINTAINING A SINGLE LANE OF TRAFFIC. THE TRUCK SWERVED MULTIPLE TIMES OVER THE RIGHT FOG LINE AND THE LEFT DASHED LINE. I ACTIVATED MY EMERGENCY LIGHTS AND THE VEHICLE PULLED TO THE LEFT TURN LANE AT PIERSON ROAD. UPON CONTACTING THE DRIVER, I DETECTED A STRONG ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE EMANATING FROM THE VEHICLE. I STATED I WAS STOPPING HIM DUE TO HIS DRIVING PATTERN AND I NOTICED THE DRIVER APPEARED DISHOVLED AND HIS HAIR WAS A MESS. HIS EYES WERE BLOOD SHOT AND GLASSY. I ASKED THE DRIVER WHERE HE WAS COMING FROM AND HE STATED, "THE GRILLE." I ASKED THE DRIVER FOR HIS LICENSE, REGISTRATION AND INSURANCE AND HE HANDED ME HIS ARGENTINIAN DRIVERS LICENSE, AN EXPIRED FLORIDA REGISTRATION AND INSURANCE. I ASKED THE DRIVER IF HE HAD ANY ALCOHOLIC BEVERAGES TO DRINK AND HE STATED 1 WINE. AT THAT TIME DUI INVESTIGATOR WALTON ID 6942 ARRIVED AS A BACKUP OFFICER AND HE CONDUCTED A DUI INVESTIGATION.

OBSERVATION OF DRIVER:

I made contact with the def who was seated in the drivers seat of the Ford F250 PK. The def had a passenger by the name of Carla who was in the passenger seat of the vehicle. I noticed that the def had an odor of an unk alcoholic beverage coming from his person and later found it to be coming from his breath when he spoke to me. I noticed while talking to the def that he had red blood shot eyes. The def had an accent but showed signs of slurred speech. I asked the def where he was coming from and he stated The Grill. I asked the def where he was going and he stated to his home and pointed in the direction of his home. I asked the def if he had anything to drink tonight and he stated a glass of wine. I asked the def if he had anything else to drink and he stated 2 beers prior to The Grill and then the glass of wine. I had the def step out of the vehicle and walk to the rear of the vehicle. I noticed that the def was swaying while standing still

DRIVER'S STATEMENTS:

and the odor of an unk alcoholic beverage was still present while in the open air. I notified the def that I was conducting a DUI Investigation and requested him to submit to SFST's. The def agreed. I asked the def if he had any medical conditions and he stated that his right knee had torn ligaments in it. The def explained that this happened about 10 days ago. I explained that I would conduct seated battery tasks.

ODORS:

Odor of an Unk Alcoholic beverage coming from his person and breath

GENERAL OBSERVATIONS

SPEECH: Slurred speech WITH ACCENT

ATTITUDE: COOPERATIVE

CLOTHING: BLUEJEANS, GRY T-SHIRT AND GRN SNEAKERS

MEDICAL/OTHER:

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 08 day of JANUARY 20 18 by Cpl. Thomas Walton

(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)



Samantha Palmer
Commission # FF172377
Expires: OCT 28, 2018
BONDED THRU
1ST FLORIDA NOTARY, LLC

SUBJECT: COLLADO

MIGUEL

CASE NUMBER 18-023794

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

LT EYE-LACK OF SMOOTH PURSUIT

RT EYE-LACK OF SMOOTH PURSUIT

LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION

RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION

LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

Other Observations:

The def was swaying during the task and had problems focusing on pen light.

HAND COORDINATION:

THE DEF WAS PLACED INTO THE INSTRUCTIONAL STANCE FOR THE HAND COORDINATION AND GIVEN INSTRUCTIONS. THE DEF STATED THAT HE UNDERSTOOD THE INSTRUCTIONS. THE DEF WOULD ATTEMPT TO START TASK TO SOON. THE DEF STARTED TASK AND COUNTED FORWARD 1-4 THEN CLAPPED THREE TIMES. THE DEF FAILED TO RETURN HANDS BACK TO SAME POSITION. THE DEF THEN COUNTED 1-4 AND PLACED HANDS TO CHEST IN MID ROTATION OF HANDS NOT MAKING THE FULL ROTATION. THE DEF THEN PLACED HIS HANDS ON LAP.

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 THEN TASK AND BEGAN SWAYING DURING THE TASK. THE DEF SET FOOT DOWN THREE TIMES AND HIS ARMS WERE RISING FROM HIS SIDE. THE DEF FAILED TO LOOK AT HIS FOOT WHILE COUNTING.

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 MISSED THE TIP OF HIS NOSE TWO TIMES AND WAS SWAYING DURING THE TASK.

ROMBERG ALPHABET:

THE DEF WAS PLACED INTO THE INSTRUCTIONAL STANCE FOR THE MODIFIED ROMBERG AND GIVEN INSTRUCTIONS. THE DEF STATED THAT HE UNDERSTOOD THE INSTRUCTIONS. THE DEF BEGAN THE TASK AND COUNTED TO 30 SECONDS IN A 29 SECONDS TIME FRAME. THE DEF WAS SWAYING DURING THE TASK.

BREATH TEST RESULTS: 1) 0.093 2) .107 3) 4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

Cpl. Thomas Walton

T. Walton

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 08 day of JANUARY 20 18 by Cpl. Thomas Walton

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

S. Palmer

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



Samantha Palmer
Commission # FF172377
Expires: OCT 28, 2018
BONDED THRU
1ST FLORIDA NOTARY, LLC

OBTS Number		PROBABLE CAUSE AFFIDAVIT			1. Arrest 2. N.T.A.	3. Request For Warrant 4. Request For Capias	1	Juvenile <input type="checkbox"/>				
Agency ORI Number FLO 5 0 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE			Agency Report Number 06		18-023794					
Charge Type: Check as many as apply		Special Notes		Race		Sex		Date of Birth				
<input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other				W		M		09/28/1991				
Defendant Name (Last, First, Middle) COLLADO, MIGUEL												
Charge DUI				Charge								
Charge				Charge								
Victim Name (Last, First, Middle)							Race		Sex		Date of Birth	
Local Address (Street, Apt. Number)			City		State		Zip		Phone		Address Source	
Business Address (Street, Apt. Number)			City		State		Zip		Phone		Occupation	
The undersign 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 checked="" 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 type="checkbox"/> was found to have committed the below acts, resulting from (described) investigation.								
On the 8 day of JAN 20 18 at 0134 <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM												

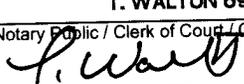
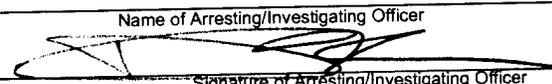
ON SUNDAY JANUARY 8, 2018 AT 0100 HOURS, I WAS TRAVELLING WEST IN MY PBSO MARKED PATROL CAR ON SOUTH SHORE BLVD WHEN I OBSERVED A PICK UP TRUCK APPEARING TO HAVE A HARD TO MAINTAINING A SINGLE LANE OF TRAFFIC. THE TRUCK SWERVED MULTIPLE TIMES OVER THE RIGHT FOG LINE AND THE LEFT DASHED LINE.

I ACTIVATED MY EMERGENCY LIGHTS AND THE VEHICLE PULLED TO THE LEFT TURN LANE AT PIERSON ROAD.

UPON CONTACTING THE DRIVER, I DETECTED A STRONG ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE EMANATING FROM THE VEHICLE. I STATED I WAS STOPPING HIM DUE TO HIS DRIVING PATTERN AND I NOTICED THE DRIVER APPEARED DISHOVLED AND HIS HAIR WAS A MESS. HIS EYES WERE BLOOD SHOT AND GLASSY. I ASKED THE DRIVER WHERE HE WAS COMING FROM AND HE STATED, "THE GRILLE." I ASKED THE DRIVER FOR HIS LICENSE, REGISTRATION AND INSURANCE AND HE HANDED ME HIS ARGENTINIAN DRIVERS LICENSE, AN EXPIRED FLORIDA REGISTRATION AND INSURANCE. I ASKED THE DRIVER IF HE HAD ANY ALCOHOLIC BEVERAGES TO DRINK AND HE STATED 1 WINE. AT THAT TIME DUI INVESTIGATOR WALTON ID 6942 ARRIVED AS A BACKUP OFFICER AND HE CONDUCTED A DUI INVESTIGATION.

ONCE DUI INVESTIGATOR WALTON CONCLUDED HIS INVESTIGATION THE DRIVER WAS PLACED INTO CUSTODY AND I TRANSPORTED HIM TO THE PBSO BREATH TESTING FACILITY.

THE DRIVER WAS CITED FOR FAILURE TO DRIVE IN A SINGLE LANE CITATION NUMBER A9CXQ1E.

The foregoing instrument was sworn to and affirmed before me this <u>8</u> day of <u>JAN</u> 20 <u>18</u> , by:	
T. WALTON 6942	D. SCHNEIDER 8723
Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	Name of Arresting/Investigating Officer
	
Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	Signature of Arresting/Investigating Officer
Page 1 of 1	

WITNESS LIST

CASE NUMBER: 18-023794

ARRESTING OFFICER: Cpl. Thomas Walton

ADDRESS: DUI Unit

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

CAN TESTIFY TO: DUI Investigation

NAME: D/S D. SCHNEIDER 8723

ADDRESS: DIST 8

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

CAN TESTIFY TO: DRIVING PATTERN AND DRIVER CONTACT

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 _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

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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: _____

NOT A CERTIFIED COPY

TESTING FACILITY TASK REPORT

AGENCY: PBSO/WALTON

SUBJECT: COLLADO, MIGUEL

CASE NUMBER: 18-023794

DATE: Jan 8, 2018

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 0318

ENDING TIME: 0332

BREATH TESTS RESULTS: 1) .093 TIME 0324 A.M. P.M. 2) .107 TIME 0327 A.M. P.M.

3) XX TIME XX A.M. P.M. 4) XX TIME XX A.M. P.M.

BREATH OPERATOR: S. PALMER #24520

MAINTENANCE TECHNICIAN: J Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: ACCENT, SPANISH SPEAKING

ATTITUDE: QUIET, UPSET, POLITE, COOPERATIVE

CLOTHING: GREY TSHIRT, BLUE JEANS, GREEN SNEAKERS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

EYES GLASSY AND BLOODSHOT,

COMMENTS:

ARRESTING OFFICER CONDUCTED THE 20 MINUTE OBSERVATION BEGINNING AT 0255
SUBJECT AGREED TO TAKE BREATH TEST
TECH EXPLAINED TEST INSTRUCTIONS
SUBJECT STATED HE UNDERSTOOD
AND PROVIDED TWO ADEQUATE SAMPLES SUCCESSFULLY
TECH READ TEST RESULTS
SUBJECT STATED HE UNDERSTOOD RESULTS
A/O READ RIGHTS
SUBJECT STATED HE DID NOT UNDERSTOOD RIGHTS
A/O DID NOT CONDUCT Q&A

SUBJECT: Collado, Miguel CASE NUMBER: 18-02794

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.

SUSPECT'S SIGNATURE: (X) _____

WHITE - STATE ATTY. YELLOW - DHSMV PINK - CENTRAL RECORDS. GOLD - JAIL

SUBJECT: COOPER, M. J. CASE NUMBER: 15-1-5774

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: COOPER, M. J.

