

17CT 301

OBTS Number		ARREST / NOTICE TO APPEAR Juvenile Referral Report		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1		Juvenile	
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>06-17-023078</b>					
Charge Type: Check as many as apply: <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input 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>01</b>							
Location of Arrest (Including Name of Business) <b>3138 LAKE WORTH RD</b>				Location of Offense (Business Name, Address) <b>3138 LAKE WORTH RD</b>							
Date of Arrest <b>01/06/2017</b>		Time of Arrest <b>0306</b>		Booking Date		Booking Time		Jail Date		Jail Time	
Name (Last, First, Middle) <b>Beltran, Nestor F</b>				Alias (Name, DOB, Soc. Sec. #, Etc.)							
Race W - White I - American Indian B - Black O - Oriental/Asian <b>W</b>		Sex <b>M</b>		Date of Birth <b>06/29/1992</b>		Height <b>5-07</b>		Weight <b>150</b>		Eye Color <b>Brn</b>	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		Marital Status <b>Single</b>		Religion <b>CHRISTIAN</b>		Indication of: Alcohol Influence Drug Influence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Unk.		Complexion <b>Tan</b>		Build <b>Med</b>	
Local Address (Street, Apt. Number) <b>5878 Albert Rd West Palm Beach, FL 33415</b>				(City)		(State)		(Zip)		Phone <b>(561) 294-1181</b>	
Permanent Address (Street, Apt. Number)				(City)		(State)		(Zip)		Phone <b>( ) ( ) ( )</b>	
Business Address (Name, Street)				(City)		(State)		(Zip)		Phone <b>( ) ( ) ( )</b>	
D/L Number, State <b>FL/B436-626-92-229-0</b>		Soc. Sec. Number <b>[REDACTED]</b>		INS Number		Place of Birth (City, State) <b>BOGATA, COLOMBIA</b>		Citizenship <b>USA</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:		Name (Last)		(First)		(Middle)		Residence Phone <b>( ) ( ) ( )</b>			
Address (Street, Apt. Number)		(City)		(State)		(Zip)		Business Phone <b>( ) ( ) ( )</b>			
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 <b>DUI</b>		Counts <b>1</b>		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number <b>316.193(1)</b>		Violation of ORD #			
Drug Activity <b>N</b>		Drug Type <b>N</b>		Amount / Unit		Offense # <b>17-023078</b>		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) <b>3228 GUN CLUB RD WEST PALM BEACH, FL 33406</b>											
Court Date and Time Month <b>02</b> Day <b>02</b> Year <b>2017</b> Time <b>8:30</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 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) <b>[Signature]</b>				Date Signed							
HOLD for other Agency Name: <input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:				Signature of Arresting Officer <b>[Signature]</b> Name of Arresting Officer (Print) <b>CPL THOMAS WALTON</b> I.D. # <b>6942</b>				Name Verification (Printed by arrestee) <b>SCANNED</b> <b>JAN 09 2017</b>			
Intake Deputy I.D. # Pouch #				Transporting Officer <b>CPL T. WALTON</b> I.D. # <b>6942</b> Agency <b>PBSO</b>				Witness here if subject signed with an "X" <b>1</b> OF <b>1</b>			

		PROBABLE CAUSE AFFIDAVIT		1 Arrest 2 N.T.A.		3 Request for Warrant 4 Request for Capias		Juvenile	
ADMIN	OBTS Number			Agency ORI Number FLO 5 0 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 0 6 1 7 0 2 3 0 7 8	
	Charge Type: Check as many as apply	<input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony		<input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Special Notes:	
DEF.	Name (Last, First, Middle) BELTRAN, NOSTOR E.				Alias		Race W	Sex M	Date of Birth 06.29.92
CHARGES	Charge Description D.U.I.				Charge Description				
	Charge Description				Charge Description				
VICTIM	Victim's Name (Last, First, Middle) STATE OF FLORIDA				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		
PROBABLE CAUSE STATEMENT	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 checked="" 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 type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.								
	On the 6 day of JAN 2017 at 241 A.M. <input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.) I observed a dark grey Chevy 4 door stopped in front of the stop bar on S. Military Trail at Lake Worth Road (Southbound). As I passed the vehicle, I did a U-turn to get in behind it and that's when the vehicle ran the red light and I made a left turn East bound Lake Worth Rd. As I was attempting to get behind the vehicle to run the tag, it began to pick up speed (topping out at 75 mph). The vehicle (FLA TAG GNX Y34) was all over the road way and at one point crashed into the curb and bounced off it. I immediately activated my emergency lights and got the vehicle to stop at 3438 Lake Worth Rd. I made contact with the driver and sole occupant as he opened the door I immediately smelled a strong odor of an unknown alcoholic beverage coming from his face area. I also observed his eyes to be very blood shot and glassy. Due to my training and experience I believed the driver was impaired and summoned a traffic unit to investigate further.								
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH P/S [Signature] (Signature of Arresting/Investigative Officer)				6609 SCANNED JAN 09 2017				
	The foregoing instrument was sworn to or affirmed and subscribed before me this 06 day of JANUARY 2017 by [Signature] (Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced Known [Signature] Notary Public, Clerk of Court, Officer (F.S.S. 117.10)								

# D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 06 DAY OF January 20 17, AT 0241 ✓ AM PM

SUBJECT: Beltran, Nestor F CASE NUMBER: 17-023078

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 the area of 3138 Lake Worth, Fl in ref to a possible impaired driver. Upon arrival I met with D/S Heckler who stated that he witnessed a 4dr vehicle roll into the intersection of Lake Worth Rd and Military Trl thru a red light. The def then proceeded Eastbound on Lake Worth Rd swerving and at a slow speed. The vehicle then sped up to approx 75 mph. D/S Heckler stated that the vehicle was swerving and crossing over the roadway lines. D/S Heckler stated that the vehicle struck the curb hoping the curb. The vehicle that came back onto the roadway. D/S Heckler conducted a traffic stop on a Chevy 4dr FL tag GNXY34. D/S Heckler stated that he made contact with the def, who was the sole occupant of the vehicle, and noticed an odor of an unk alcoholic beverage coming from his person. The def had red glassy eyes. D/S Heckler gave a sworn written supplemental P.C. to the events that took place.

## OBSERVATION OF DRIVER:

I made contact with the def who was seated in his vehicle. I noticed that the def had red glassy eyes and an odor of an unk alcoholic beverage coming from his person. I asked the def where he was coming from and he stated home. I asked the def where he was going and he stated Clematis. I asked the def how much he had to drink and he stated a couple. I asked what he was drinking and he stated a couple. I asked what exactly he was drinking and he stated whiskey. I asked what kind of whiskey and he stated Jack Daniels straight. I asked the def to step out of the vehicle. The def was unbalanced getting out of the vehicle. The def leaned against his vehicle. The def had slurred speech while talking. I notified the def that I was conducting a DUI investigation and that I was requesting him to submit to SFST's. The def asked if he could call someone to come pick him up. I stated that we are past the point of calling someone. I requested him to do SFST's. The def refused to so SFTS's.

## DRIVER'S STATEMENTS:

I explained Taylor Warnings to the def and he stated he understood the warnings. The def was asked again to submit to SFST's and he agreed to do them. I asked the def if he had any physical disabilities and he stated dyslexia.

## ODORS:

ODOR OF AN UNK ALCOHOLIC BEVERAGE COMING FROM THE MOUTH.

## GENERAL OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: Cooperative, crying

CLOTHING: Jeans, Blk Polo shirt, Blue shoes, Gry jacket

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 06 day of JANUARY 20 17 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

JAN 09 2017

SUBJECT: Beltran, Nestor F

CASE NUMBER 17-023078

### 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:

Swaying, VGN Detected. Red Glassy

#### 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. THE DEF MISSED THE HEEL TO TOE THREE TIMES, WALKED OFF THE LINE TWICE, USED ARMS FOR BALANCE, THE DEF TURNED AROUND BY TAKING SIX STEPS IN A CIRCLE AND WAS STILL FACING THE FORWARD. THE DEF FORGOT THE REMAINDER OF 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 SET FOOT DOWN MULTIPLE TIMES DURING THE TASK AND FAILED TO LOOK AT HIS FOOT THE ENTIRE TIME. THE DEF WAS SWAYING DURING THE TASK. THE DEF LOST BALANCE DURING TASK AND 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 MISSED THE TIP OF HIS NOSE 4 TIMES AND WAS SWAYING DURING THE TASK.

#### 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 RECITED THE ALPHABET A-EEFLNOPN AND KEPT OPENING HIS EYES DURING THE TASK. THE DEF WAS SWAYING DURING THE TASK.

BREATH TEST RESULTS: 1) .155 2) .155 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 06 day of JANUARY 20 17 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  
JAN 09 2017

# WITNESS LIST

CASE NUMBER: 17-023078

ARRESTING OFFICER: CPL T. WALTON #6942

ADDRESS: DUI UNIT

PHONE NUMBERS (HOME): \_\_\_\_\_ (WORK) 681-4500

CAN TESTIFY TO: DUI INVESTIGATION

NAME: D/S Heckler 6609

ADDRESS: K9 Unit

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) \_\_\_\_\_ (WORK) \_\_\_\_\_

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

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

ADDRESS \_\_\_\_\_

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ADDRESS \_\_\_\_\_

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

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

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

ADDRESS \_\_\_\_\_

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

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

SCANNED

JAN 09 2017

# TESTING FACILITY TASK REPORT

AGENCY: PBSU  
SUBJECT: BELTRAN, NESTOR F. CASE NUMBER: 17-023078  
DATE: 01/06/17 VIDEO TAPE NUMBER: 61948  
BEGINNING TIME: 0359 ENDING TIME: 0411  
BREATH TESTS RESULTS: 1) .155 TIME 0404 (A.M.)/P.M. 2) .155 TIME 0407 (A.M.)/P.M.  
3) N/A TIME — A.M./P.M. 4) N/A TIME — A.M./P.M.  
BREATH OPERATOR: G. PARAT #2809  
MAINTENANCE TECHNICIAN: KARL LEE #6467

## TESTING OFFICER'S OBSERVATIONS

SPEECH: ACCENT, RAPID, SLURRED  
ATTITUDE: UPSET, CRYING, RAMPAGING, REPEATING, AND SW-ING  
CLOTHING: BLUE JEANS, BLACK T-SHIRT, CO-POUR, BLACK SHOES  
MEDICAL CONDITIONS: DEPRESS  
MEDICATIONS: NONE  
OTHER: EYES WATERY AND BLOODSHOT, STATED I THINK I HAD 1  
TO MANY,

COMMENTS: ARRIVED AT CENTER A/C BECA THE 20 MINUTE  
OBSERVATION PERIOD AT 0335 HRS.

Δ STATED NO HE WOULD NOT TAKE TEST

A/O READ I/C

Δ STATED HE UNDERSTOOD I/C AND AGREED TO TAKE TEST  
A/O READ RIGHTS

Δ STATED HE UNDERSTOOD RIGHTS

TECH READ BREATH TEST RESULTS Δ STATED HE UNDER-  
STOOD THEN ASKED WHAT THEY MEANT. TECH EXPLAINED

A/O ATTEMPTED Q & A

Δ DECLINED TO ANSWER WITHOUT COUNSEL

SCANNED

JAN 09 2017

SUBJECT: BELTRAN, Nestor F. CASE NUMBER: 17-023078

## 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**

**JAN 09 2017**

SUSPECT'S SIGNATURE: (X) \_\_\_\_\_

SUBJECT: RELTRAV, NESTOR F. CASE NUMBER: 17-023078

## 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? \_\_\_\_\_

SCANNED

JAN 09 2017

INTERVIEWER: CH P. WELLS #6842

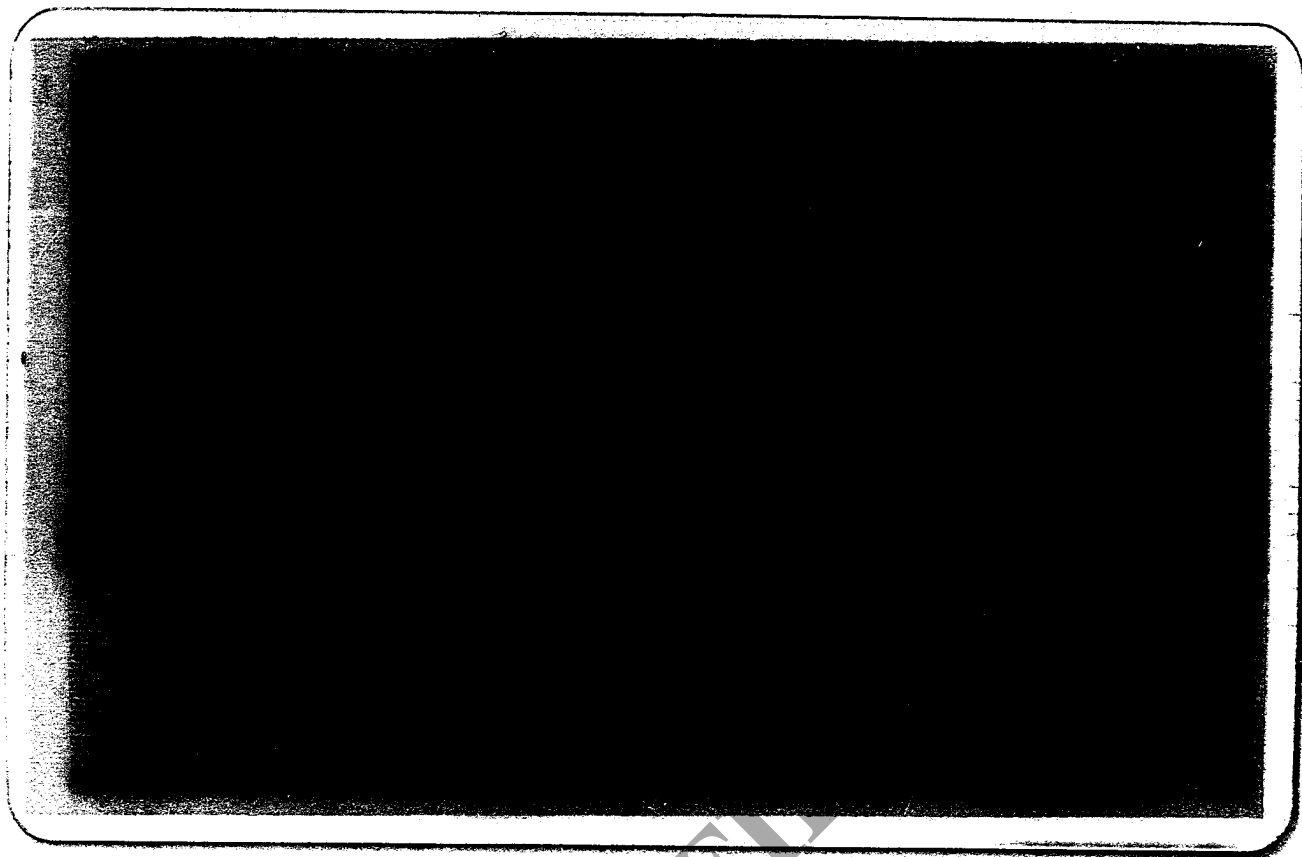
WHITE - STATE ATTY.

YELLOW - DHSMV

PINK - CENTRAL RECORDS

GOLD - JAIL





NOT A CERTIFIED

SCANNED

JAN 09 2017