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588

## ARREST / NOTICE TO APPEAR

Juvenile Referral Report

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

Juvenile

N

OBTS Number			ARREST / NOTICE TO APPEAR			Juvenile Referral Report			Agency Report Number (N.T.A.'s only)						
Agency ORI Number <b>FLO- 5 0 0 0 0 0</b>			Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>						06- 16-145048						
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 2 1. Yes 2. No N/A						
Location of Arrest (Including Name of Business) <b>703 SUNNY PINE WAY, GREENACRES, FL 33415</b>			Location of Offense (Business Name, Address) <b>703 SUNNY PINE WAY, GREENACRES, FL 33415,</b>						Multiple Clearance Indicator <b>01</b>						
Date of Arrest <b>10/29/2016</b>		Time of Arrest <b>0234</b>		Booking Date		Booking Time		Jail Date		Jail Time		Location of Vehicle <b>AT RESIDENCE</b>			
Name (Last, First, Middle) <b>WALTER, SHILOH, DANIELLE</b>															
Alias (Name, DOB, Soc. Sec. #, Etc.)															
Race W - White I - American Indian B - Black O - Oriental/Asian		Sex W F		Date of Birth <b>07/27/1983</b>		Height <b>5'03"</b>		Weight <b>190</b>		Eye Color <b>BRN</b>		Hair Color <b>BLOND</b>		Complexion <b>MED</b>	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) <b>TAT - BACK</b>															
Marital Status <b>DIVORCED</b>			Religion <b>CHRISTIAN</b>			Indication of: Alcohol Influence Drug Influence			Y N <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>						
Local Address (Street, Apt. Number) <b>904 TIMBERLANE CIR, GREENACRES, FL 33463</b>			(City) (State) (Zip)			Phone <b>(561) 633-2090</b>			Residence Type: 1. City 2. County 3. Florida 4. Out of State						
Permanent Address (Street, Apt. Number) ,			(City) (State) (Zip)			Phone ( )			Address Source <b>VERBAL / FL DL</b>						
Business Address (Name, Street)			(City) (State) (Zip)			Phone ( )			Occupation <b>BILLING / CODING</b>						
D/L Number, State <b>W436784837670, FL</b>		Soc. Sec. Number		INS Number		Place of Birth (City, State) <b>TEXAS</b>		Citizenship <b>TEXAS</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			
Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other:															
Residence Phone ( )															
Address (Street, Apt. Number)			(City) (State) (Zip)			Business Phone ( )									
Notified by: (Name)				Date		Time		Juvenile Disposition 1. Handled/processed within Dept. and Released.			2. TOT HRS / DYS 3. Incarcerated				
Released To: (Name)				Relationship							Date Time				
The above address provided by <input type="checkbox"/> defendant and / or <input type="checkbox"/> defendant's parents The child and / or parent was told to keep the Juvenile Court Clerk (Phone 355-2526) informed of any change of address. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)							School Attended								
							Grade								
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property					Value of Property								
CODE	S. Sell N. N/A P. Possess	R. Smuggle B. Buy T. Traffic	K. Dispense/ D. Deliver E. Use	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	Charge Description <b>DUI - DRIVING UNDER THE INFLUENCE</b>					Counts 1	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number <b>316.193(1)(b)</b>	Violation of ORD #						
CHARGE	Drug Activity N	Drug Type N	Amount / Unit N/A	Offense # <b>16-145048</b>			Warrant / Capias Number	Bond							
CHARGE	Charge Description					Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number	Violation of ORD #						
CHARGE	Drug Activity	Drug Type	Amount / Unit	Offense #			Warrant / Capias Number	Bond							
CHARGE	Charge Description					Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number	Violation of ORD #						
CHARGE	Drug Activity	Drug Type	Amount / Unit	Offense #			Warrant / Capias Number	Bond							
CHARGE	Charge Description					Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number	Violation of ORD #						
CHARGE	Drug Activity	Drug Type	Amount / Unit	Offense #			Warrant / Capias Number	Bond							
NOTICE TO APPEAR	Location (Court, Room Number, Address) <b>NORTH COUNTY COURTHOUSE / 3188 PGA BLVD, PALM BEACH GARDENS, FL 33410</b>														
NOTICE TO APPEAR	Court Date and Time Month <b>NOVEMBER</b> Day <b>23</b> Year <b>2016</b> Time <b>08:30</b> AM X PM														
NOTICE TO APPEAR	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														
ADMIN	Signature of Defendant (or Juvenile and Parent/Custodian) <b>SCANNED</b> Date Signed <b>10/29/2016</b>														
ADMIN	HOLD for other Agency Name:			Signature of Arresting Officer			Name Verification (Printed by <b>10/29/2016</b> )								
ADMIN	<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal			<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:			Name of Arresting Officer (Print) <b>Inv. S. Levey #9415</b>			I.D. # <b>9415</b>		(PRINT)			
ADMIN	Inmate Deputy <b>G. H. Levey 4716</b>			I.D. # <b>4716</b>			Transporting Officer <b>D/S S. LEVEY</b>			ID # <b>9415</b>		Agency <b>PBSO</b>			
ADMIN	Witness here if subject signed with an "X" DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT / IN T.A.'S ON VI DCT 29 AM 5:00														

# D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 29TH DAY OF OCTOBER 2016 AT 0225

AM

SUBJECT: WALTER, SHILOH, DANIELLE

CASE NUMBER: 16-145048

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: Inv. S. Levey #9415

## PERSONAL CONTACT

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

ON 10/29/16 AT APPROXIMATELY 0224 HOURS, I WAS DRIVING MY MARKED PATROL VEHICLE SOUTHBOUND ON JOG ROAD, APPROACHING THE INTERSECTION OF FOREST HILL RD, IN THE CITY OF GREENACRES. AS I CAME TO A STOP AT THE RED LIGHT, I SLOWED BEHIND A WHITE KIA WITH AN ATTACHED FL TAG OF EFRP24. AS THE LIGHT TURNED GREEN, THE VEHICLE REMAINED AT THE RED LIGHT FOR A FEW SECONDS, AFTER TRAFFIC HAD ALREADY BEGUN TO DRIVE OFF FROM THE GREEN LIGHT. AS THE VEHICLE BEGAN TO DRIVE, AND AFTER PASSING FOREST HILL BLVD, IT CROSSED OVER INTO THE NUMBER ONE LANE (INNER) FROM THE NUMBER TWO LANE (MIDDLE). THE DRIVER THEN CORRECTED, AND CONTINUED SOUTH. THE DRIVER CONTINUED TO DRIVE, HOWEVER DID NOT MAINTAIN A CONSTANT SPEED, AND KEPT SLOWING AND SPEEDING UP, FROM 50 MPH TO 40 MPH. AS THE VEHICLE PASSED A DEPUTY THAT WAS ON A TRAFFIC STOP AT THE INTERSECTION OF PUDY LN AND S JOG RD, IT SIGNALLED AND CHANGED LANES INTO THE NUMBER ONE LANE. AFTER DRIVING IN THE NUMBER ONE LANE, THE VEHICLE CROSSED OVER THE SOLID LINE NEAR THE MEDIAN, ALMOST STRIKING IT, THEN RODE THE LINE FOR APPROXIMATELY A TENTH OF A MILE. THE VEHICLE THEN CORRECTED, AND CONTINUED TO DRIVE IN THE NUMBER ONE LANE, BUT SLOWED TO 37 MPH IN A POSTED 45 MPH ZONE. AS THE VEHICLE APPROACHED THE INTERSECTION OF CRESTHAVEN BLVD, IT BEGAN TO BRAKE IN THE NUMBER ONE LANE, THEN CHANGED INTO THE LEFT TURN LANE WITHOUT SIGNALING. THE DRIVER THEN TURNED ON THE LEFT SIGNAL ONCE IN THE TURN LANE. THE DRIVER THEN SLOWED TO A GREEN LIGHT TO APPROXIMATELY 10 MPH, WHERE THERE WAS NO ONCOMING TRAFFIC OR TRAFFIC STOPPED AT THE LIGHT. ONCE ON CRESTHAVEN BLVD, THE DRIVER THEN IMMEDIATELY TURNED ON THE RIGHT TURN SIGNAL WELL BEFORE THE VEHICLE WAS GOING TO TURN. THE VEHICLE THEN TURNED ONTO SUNNY PINE WAY. THE VEHICLE THEN TURNED ON ITS LEFT SIGNAL, JUST BEFORE MAKING A LEFT TURN. THE DRIVER THEN TURNED ON THE RIGHT SIGNAL AS IT WAS DRIVING, AND DID NOT MAKE A RIGHT TURN. THE DRIVER THEN SHUT OFF THE RIGHT SIGNAL. AS THE VEHICLE MADE A LEFT TURN INTO A PARKING SPOT IN FRONT OF 703 SUNNY PINE WAY. AS IT TURNED INTO THE SPOT, I ACTIVATED MY OVERHEAD LIGHTS.

### OBSERVATION OF DRIVER:

AS THE VEHICLE STRUCK THE CONCRETE LIKE PARKING STOP, I EXITED MY PATROL VEHICLE. AS I DID THIS THE DRIVER BEGAN TO OPEN HER DOOR, AND CLOSE HER DRIVER WINDOW. AS I APPROACHED THE DRIVER'S FRONT DOOR, I INSTRUCTED HER TO PUT HER WINDOW DOWN. SHE THEN SAID OKAY, AND BEGAN TO LOOK INTO HER PURSE. SHE HAD TO BE ASKED AGAIN BEFORE SHE PUT IT DOWN. I THEN ASKED HER FOR HER LICENSE REGISTRATION AND PROOF OF INSURANCE. SHE HANDED ME AN EXPIRED INSURANCE CARD, AND FUMBLED TO LOCATE HER DRIVERS LICENSE. SHE HANDED ME ANOTHER REGISTRATION, IN ADDITION TO THE VALID ONE THAT SHE PROVIDED ME. I OBSERVED THAT HER EYES WERE GLASSY AND WATERY.

### DRIVER'S STATEMENTS:

SHE STATED THAT THIS WAS HER MOM'S CAR, 703 SUNNY PINE WAY, AND THAT THEY HAVE LIVED HERE FOR A WHILE. SHE STATED THAT SHE WAS COMING FROM A BIRTHDAY PARTY. WHEN ASKED IF SHE HAD ANYTHING TO DRINK, SHE FIRST STATED NO, THEN STATED THAT SHE HAD A FEW BEERS.

AS SHE EXITED HER VEHICLE, SHE WAS UNEASY ON HER FEET. I ASKED HER IF SHE WAS WILLING TO DO ROADSIDE TASKS, TO MAKE SURE THAT SHE WAS OKAY TO DRIVE. SHE STATED THAT SHE WANTED HER LAWYER AND WAS REFUSING TO DO ROADSIDES. I INFORMED HER THAT WITH HER REFUSING TO DO THE TASKS, SHE WAS FORCING ME TO MAKE A DECISION ON HER BEHALF BASED ON THE EVIDENCE THAT WAS IN FRONT OF ME. SHE AGAIN REFUSED.

### ODORS:

STRONG OBVIOUS ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE COMING FROM HER PERSON, AND AS SHE SPOKE TO ME IT BECAME STRONGER

## GENERAL OBSERVATIONS

SPEECH: SLOW, SHORT, SLURRED

ATTITUDE: CALM, COOPERATIVE

CLOTHING: WHITE TANK TOP, BLUE JEANS, TAN SANDALS

MEDICAL/OTHER: \*\*All roadside tasks were conducted on in car video\*\*

STATE OF FLORIDA

COUNTY OF PALM BEACH

Inv. S. Levey #9415

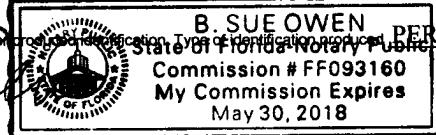
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 29TH day of OCTOBER 2016

by Inv. S. Levey #9415

(Print name of Arresting/Investigative Officer), who is personally known to me and/or cross checked identification. Type identification number if applicable.

Sue Owen (#3184)



**SUBJECT:** WALTER, SHILOH, DANIELLE

**CASE NUMBER:** 16-145048

**ROADSIDE TASKS**

**HORIZONTAL GAZE NYSTAGMUS:**

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

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

**Other Observations:**

**REFUSED**

**WALK & TURN:**

**REFUSED**

**ONE LEG STAND:**

**REFUSED**

**FINGER TO NOSE:**

**REFUSED**

**ROMBERG ALPHABET:**

**REFUSED**

**BREATH TEST RESULTS:** 1) REF 2) REF 3) 4)

**STATE OF FLORIDA**  
**COUNTY OF PALM BEACH**

**Inv. S. Levey #9415**

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 29TH day of OCTOBER 2016 by Inv. S. Levey #9415

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

**B. SUE OWEN**  
State of Florida-Notary Public  
Commission # FF093160  
My Commission Expires  
May 30, 2018

**PERSONALLY KNOWN LEO**

**Sue Owen (#3184)**

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

## WITNESS LIST

CASE NUMBER: 16-145048

ARRESTING OFFICER: Inv. S. Levey #9415

ADDRESS: 3228 GUN CLUB ROAD, WEST PALM BEACH, FL 33406

PHONE NUMBERS (HOME): N/A (WORK) 561-688-3000

CAN TESTIFY TO: The elements of the crime of DUI - Arresting officer

NAME: D/S T. TOMLINSON #24969

ADDRESS: 3228 GUN CLUB ROAD, WEST PALM BEACH, FL 33406

PHONE NUMBERS (HOME) N/A (WORK) 561-688-3000

CAN TESTIFY TO: Backup Officer on scene

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: \_\_\_\_\_

ADDRESS \_\_\_\_\_

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

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

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

ADDRESS \_\_\_\_\_

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

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

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

ADDRESS \_\_\_\_\_

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

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

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

ADDRESS \_\_\_\_\_

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

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

# TESTING FACILITY TASK REPORT

AGENCY: PB50

JECT: Walter, Shiloh Danielle CASE NUMBER: 16-145048

ATE: 10/29/16 VIDEO TAPE NUMBER: OKD# 61527

EGINNING TIME: 0315 ENDING TIME: 0319

REATH TESTS RESULTS: 1) 0319 A.M./P.M. 2) TIME A.M./P.M.  
3) TIME A.M./P.M. 4) TIME A.M./P.M.

REATH OPERATOR: S. Owen #3184

AINTEANCE TECHNICIAN: J. Karlecke #6467

## ESTING OFFICER'S OBSERVATIONS

EECH:

ITUDE: quiet, co-operative

OTHING: Flip Flops, jeans, flowered shirt

EDICAL CONDITIONS: epilepsy

EDICATIONS: none

OTHER:

During intro I asked for a Attorney

COMMENTS: I/0 & I arrived at 0255 hrs

I/0 observed 20 minutes

I/0 requested breath test, I refused

I/0 read I/C, I didn't understand.

(Kept asking for lawyer) I/0 reread I/C,

I didn't understand again. Refusal called

I/0 read c/w, I understood risks

NO Q & I asked for attorney

UBJECT: Walter, Shiloh Danielle CASE NUMBER: 16-145048

## IMPLIED CONSENT FOR DUI IN A MOTOR VEHICLE

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

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

-OR-

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-

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.

am Inv. Levey of the PB50

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 (twice)

## CONSTITUTIONAL WARNINGS

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

- You have the right to remain silent and not answer any questions.
- Any statement must be freely and voluntarily given.
- You have the right to the presence of a lawyer of your choice before you make any statement and during any questioning.
- 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.
- If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.
- I can make no threats or promises to induce you to make a statement. This must be of your own free will.
- Any statement can and will be used against you in a court of law.

SUSPECT'S SIGNATURE: (X)

Read on Camera

UBJECT: Walter, Shiloh Danielle CASE NUMBER: 16-148048

## QUESTIONS AND ANSWERS

AM NOW GOING TO ASK YOU SOME QUESTIONS. WITH THESE RIGHTS IN MIND, YOU MAY ANSWER SOME OF, ALL OF, OR ONE 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? \_\_\_\_\_

HOW MUCH? \_\_\_\_\_ WHERE? \_\_\_\_\_ WITH WHOM? \_\_\_\_\_

WHEN DID YOU HAVE YOUR FIRST DRINK? \_\_\_\_\_ AND YOUR LAST DRINK? \_\_\_\_\_

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? \_\_\_\_\_

DO 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? \_\_\_\_\_