

048 1403

1401 018238

282

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		
ADMINISTRATIVE	Agency ORI Number FLO 502600		Agency Name Palm Beach Gardens Police Department		Agency Report Number (N.T.A.'s only) 78- 16-004999							
	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 2		Multiple Clearance Indicator			
	Location of Arrest (Including Name of Business) 4155 Northlake Blvd. Palm Beach Gardens, FL 33410				Location of Offense (Business Name, Address) Same as Arrest 4155 Northlake Blvd, PBLT							
	Date of Arrest 09/26/2016		Time of Arrest 0009		Booking Date		Booking Time		Jail Date		Jail Time	
DEFENDANT	Name (Last, First, Middle) WEINDORF, TRENTEN, DANIEL										Alias (Name, DOB, Soc. Sec. #, Etc.)	
	Race W - White I - American Indian B - Black O - Oriental/Asian		Sex M		Date of Birth 10/31/1990		Height 509		Weight 200		Eye Color BRO	
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) Left arm (designed)		Marital Status Single		Religion		Indication of Alcohol Influence Y <input checked="" type="checkbox"/> N <input type="checkbox"/> Unk. <input type="checkbox"/>					
	Local Address (Street, Apt. Number) 13386 61 ST ST N.		(City) WEST PALM BEACH FL		(Zip) 33412		Phone (561) 502-7412		Residence Type: 1. City 2. County 3. Florida 4. Out of State 2			
	Permanent Address (Street, Apt. Number) Same as Local Address		(City)		(State)		(Zip)		Phone () Same		Address Source FL DL	
	Business Address (Name, Street) ()		(City)		(State)		(Zip)		Phone ()		Occupation	
	D/L Number, State		Soc. Sec. Number ()		INS Number		Place of Birth (City, State) West W.P.B FL		Citizenship US			
	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	
	JUVENILE	<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other:		Name (Last) ()		(First) ()		(Middle) ()		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 ()						
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 DRIVING UNDER THE INFLUENCE		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 N		Offense #		Warrant / Capias Number		Bond		
CHARGE	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	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	
NOTICE TO APPEAR	Location (Court, Room Number, Address) North County Courthouse 3188 PGA Blvd, Palm Beach Gardens, FL 33410											
	Court Date and Time Month September Day 26 Year 2016 Time 8:29 PM AM <input type="checkbox"/> PM <input checked="" type="checkbox"/>											
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 ()												
ADMIN	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 ()		Name of Arresting Officer (Print) J. JUNG		I.D. # 454		Name of Arresting Officer (Print) J. JUNG	
	Intake Deputy ()		I.D. # ()		Pouch # ()		Transporting Officer J. JUNG		ID # 454		Agency PBGPD	
	Witness here if subject signed with an "X"		1		PAGE OF 2							
	DISTRIBUTION: WHITE - COURT COPY		GREEN - STATE ATTORNEY		YELLOW - AGENCY		PINK - AGENCY		GOLD - DEFENDANT (N.T.A.'s ONLY)			

2016 SEP 26 PM 8:29
P.B. COUNTY CLERK
CLERK OF COURT
CLERK OF COURT

SCANNED
SEP 26 2016

5:30

OBT Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	JUVENILE	
Agency ORI Number FL 0502600		Agency Name PALM BEACH GARDENS POLICE		Agency Report Number 7 8 16-004999						
Charge Type: Check as many as apply. <input type="checkbox"/> 1. Felony <input checked="" 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								Special Notes:		
Name (Last, First, Middle) WEINDORF, TRENTEN DANIEL								Race W	Sex M	Date of Birth 10/31/1990
Charge Description 316.193(1) DUI - DRIVING WHILE UNDER INFLUENCE				Charge Description						
Charge Description				Charge Description						
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				
<p>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.</p> <p>The Person taken into custody...</p> <p><input checked="" type="checkbox"/> committed the below acts in my presence. <input checked="" type="checkbox"/> was observed by ANDREA THOMPSON who told OFC. COLLETTI ID that he/she saw the arrested person commit the below acts.</p> <p><input checked="" type="checkbox"/> confessed to DRINKING admitting to the below facts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the 26 day of September, 2016 at 04:05 (Specifically include facts constituting cause for arrest)</p> <p>On 09/25/2016, at approximately 11:25 p.m. I responded to 4155 Northlake Blvd., in the city of Palm Beach Gardens, Palm Beach County, Florida in reference to a reckless driver. My Body Worn Camera was activated for this call.</p> <p>On arrival, I observed a red in color Dodge pickup truck traveling west bound on the parking isle of ABC Fine Wine & Spirits. Shortly after I observed this truck drive over the side walk of the ABC Fine Wine & Spirits.</p> <p>Upon making contact with the driver later identified as Trenten D. Weindorf (W536-804-90-391-0) by his Florida Driver's license. I asked Trenten for his license, registration, and insurance card. Trenten provided me with his license, and registration but he could not provide me with his insurance card. Trenten had slurred speech. As Trenten was exiting the truck he was staggering, stumbling, unsteady. As I speaking with Trenten I smelled an unknown odor of an alcoholic beverage on his breath.</p> <p>I asked Trenten to perform Standardized Field Sobriety Tasks which he agreed. Trenten could not keep balance while listening to instructions. Trenten had lack of smooth pursuit on his both left and right eye. Trenten had distinct and sustained nystagmus on his both left and right eye. Trenten had onset of nystagmus prior to 45 degrees on his both left and right eye. Trenten started task too soon as I was demonstrating walk and turn task. Trenten missed heel-to-toe. Trenten's steps were bigger than six inches. Trenten stepped off the line as he performing his task. Trenten raised arms over six inches for balance Trenten lost his balance, and he stumbled as he turned. When Trenten performed finger to nose task Trenten failed to return arms to the side. Trenten started his task too soon and used both fingers touch his nose. Trenten could not recite alphabet correctly and he was swaying as he performed this task.</p> <p>Based on my investigation, Trenton D. Weindorf was charged with Driving Under the</p>										
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>SWORN AND SUBSCRIBED BEFORE ME</p> <p><i>[Signature]</i></p> <p>NOTARY PUBLIC / CLERK OF COUNTY OFFICER (ES) SUE WEN State of Florida-Notary Public Commission # FF093160 My Commission Expires May 30, 2018</p> </div> <div style="width: 45%;"> <p><i>[Signature]</i> #454</p> <p>SIGNATURE OF ARRESTING / INVESTIGATING OFFICER</p> <p>JUNG, JASON (454) NAME OF OFFICER (PLEASE PRINT)</p> <p>09/26/2016 DATE</p> </div> </div>										

COURT


STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P.I.O.

A D M I N I S T R A T I V E	OBTS Number		PROBABLE CAUSE AFFIDAVIT SUPPLEMENT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	JUVENILE
	Agency ORI Number FL 0502600		Agency Name PALM BEACH GARDENS POLICE		Agency Report Number 7 8 16-004999					
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	Name (Last, First, Middle) WEINDORF, TRENTEN DANIEL		Alias		Race W		Sex M		Date of Birth 10/31/1990	
Influence pursuant to F.S.S. 316.193(1). <div style="position: absolute; top: 20%; left: 10%; transform: rotate(-30deg); opacity: 0.1; font-size: 100px; pointer-events: none;">NOT A CERTIFIED COPY</div>										
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>SWORN AND SUBSCRIBED BEFORE ME</p> <p><i>[Signature]</i></p> <p>NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 119.18)</p> <p>9/26/16</p> </div> <div style="width: 45%;"> <p><i>[Signature]</i> #454</p> <p>SIGNATURE OF ARRESTING / INVESTIGATING OFFICER</p> <p>JUNG, JASON (454)</p> <p>NAME OF OFFICER (PLEASE PRINT)</p> <p>09/26/2016</p> <p>DATE</p> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 30%;"> <p>NOTARY PUBLIC</p> <p>B. SUE OWEN</p> <p>State of Florida-Notary Public</p> <p>Commission #FF093160</p> <p>My Commission Expires</p> <p>May 30, 2018</p> </div> <div style="width: 10%; text-align: center;">  </div> <div style="width: 55%; text-align: right;"> <p>PAGE</p> <p>2 OF 2</p> </div> </div>										

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 25TH DAY OF September 20 11, AT 23:37

SUBJECT: WEINDORF, TRENTON, DANIEL CASE NUMBER: 16-004999

AGENCY: Palm Beach Gardens Police Department ARRESTING OFFICER: J. JUNG

PERSONAL CONTACT

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

On arrival, I observed a red in color Dodge pickup truck traveling west bound on the parking isle of ABC Fine Wine & Spirits. Shortly after I observed this truck drove over the side walk of the ABC Fine Wine & Spirits. Upon making contact with the driver later identified as Trenton D. Weindorf (W536-804-90-391-0) by his Florida Driver's license.

OBSERVATION OF DRIVER:

I asked Trenton for his license, registration, and insurance card. Trenton provided me with his license, and registration but he could not provide me with his insurance card. Trenton had slurred speech. As Trenton was exiting the truck he was staggering, stumbling, and unsteady.

DRIVER'S STATEMENTS:

Driver stated he only had three drinks. Driver stated he drank Mike's hard lemonade.

ODORS:

Driver had moderate odor of alcoholic beverage.

GENERAL OBSERVATIONS

SPEECH: Slurred speech

ATTITUDE: cooperative, polite, disoriented.

CLOTHING: Yellow shirts, tan shorts, and no shoes.

MEDICAL PROBLEMS: no

MEDICATIONS: no

OTHER:

SUBJECT: WEINDORF, TRENTEN, DANIEL

CASE NUMBER: 16-004999

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

☒ LEFT EYE DOES NOT FOLLOW SMOOTHLY

☒ RIGHT EYE DOES NOT FOLLOW SMOOTHLY

☒ LEFT EYE JERKS AT 45 DEGREE ANGLE OR LESS

☒ RIGHT EYE JERKS AT 45 DEGREE ANGLE OR LESS

☒ DISTINCT JERKING LEFT EYE MAXIMUM DEVIATION

☒ DISTINCT JERKING RIGHT EYE MAXIMUM DEVIATION

CAN NOT DO, WHY? _____

WALK AND TURN:

Driver could not keep balance while listening to instructions. Driver started task too soon. Driver missed heel-to-toe. Driver's steps were bigger than six inches. Driver stepped off the line as he performing his task. Driver raised arms over six inches. Driver lost his balance while turning, and he stumbled as he turned.

CAN NOT DO, WHY? _____

ONE LEG STAND:

Driver was swaying while balancing. Driver used arms to balance. Driver raised arms over six inches. Driver put foot down before thirty second elapsed. Driver could not keep his leg straight as he performed his task.

CAN NOT DO, WHY? _____

FINGER TO NOSE:

Driver failed to return arms to the side. Driver started his task too soon and used both fingers touch his nose.

CAN NOT DO, WHY? _____

ROMBERG/ALPHABET:

Driver could not recite alphabet correctly and he was swaying as he performed his task.

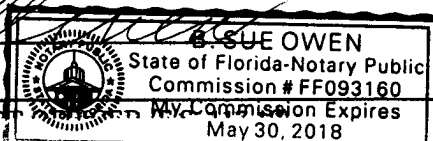
CAN NOT DO, WHY? _____

BREATH TEST RESULTS: 259, 257

STATE OF FLORIDA
COUNTY OF PALM BEACH

THE FOLLOWING INSTRUMENT WAS NOTARIZED OR SWORN BEFORE ME THIS 9/26/2016 (DATE)

BY: [Signature]



[Signature] #454

SIGNATURE OF ARRESTING OFFICER

2062

WITNESS LIST

CASE NUMBER: 16-004999

ARRESTING OFFICER: J. JUNG #454

ADDRESS: 10500 N. Military Trail, Palm Beach Gardens, FL 33410

PHONE NUMBERS (HOME): 561-799-4445 (WORK) 561-799-4445

CAN TESTIFY TO: SFST task

NAME: Andrea L. Thompson

ADDRESS: 345 HAVERHILL RD N # R-70, WEST PALM BEACH, FL 33415

PHONE NUMBERS (HOME) 561-876-1253 (WORK) 561-493-7386

CAN TESTIFY TO: Driving pattern

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 _____

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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: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

TESTING FACILITY TASK REPORT

AGENCY: Pt 9 ofc. Jung #1454
SUBJECT: Winters, T. Tenk. CASE NUMBER: 16-151602
DATE: 04-26-16 VIDEO TAPE NUMBER: 61442
BEGINNING TIME: 00381.2 ENDING TIME: 01211.25
BREATH TESTS RESULTS: 1) .254 TIME 0104 (A.M./P.M.) 2) .257 TIME 0109 (A.M./P.M.)
3) _____ TIME _____ A.M./P.M. 4) _____ TIME _____ A.M./P.M.

BREATH OPERATOR: S. O'Neil #6-12

MAINTENANCE TECHNICIAN: W. J. Kunkle #6427

TESTING OFFICER'S OBSERVATIONS

SPEECH: Low, mumbled

ATTITUDE: Cal, Quiet

CLOTHING: Short-sleeved Green T-shirt, White No shoes

MEDICAL CONDITIONS: None

MEDICATIONS: None

OTHER: Eyes: Very Red, Glazy

Dexterity: Slow, Inconsistent

Strong odor of unknown alcoholic beverage.

COMMENTS: 20 min. observation done by AIO Jung #1454

AIO requested the breath test.

D submitted to the breath test.

D completed the test correctly.

C/D read on camera.

QAP completed.

SUBJECT: Wendell, Treven Daniel CASE NUMBER: 19217D 16-004219

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) Wendell on camera

SUBJECT: weirder, J. Daniel CASE NUMBER: PR-177 16-004949

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? Yes I was driving

WHERE WERE YOU GOING? staying at the motel house and I was staying

WHAT STREET OR HIGHWAY WERE YOU ON? on a highway I don't know

DIRECTION OF TRAVEL? North WHERE DID YOU START? from place

WHAT TIME DID YOU START? 11:30 WHAT TIME IS IT NOW? 11:30

WHAT IS TODAY'S DATE? 10/10/16 WHAT DAY OF THE WEEK IS IT? Monday

WHAT COUNTY AND CITY ARE YOU IN NOW? West Valley City, Utah

WHEN DID YOU LAST EAT? at 11:00 WHAT DID YOU EAT? at a restaurant

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? nothing

HOW MUCH DO YOU WEIGH? 200 lbs HAVE YOU BEEN DRINKING? no WHAT? no

HOW MUCH? 100 lbs WHERE? at home WITH WHOM? no one

WHEN DID YOU HAVE YOUR FIRST DRINK? 7:00 AND YOUR LAST DRINK? 9:00

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? at a bar

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? no ARE YOU UNDER THE INFLUENCE? no

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? no HOW MUCH? no

WHAT? no WHERE? no WHEN? no

WHAT LINE OF WORK ARE YOU IN? no WHEN DID YOU LAST WORK? no

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? no WHAT? no

ARE YOU SICK OR INJURED? no WHAT'S WRONG? no

DO YOU LIMP? no DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? no

WERE YOU IN AN ACCIDENT TODAY? no

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? no WHEN? no

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? no WHO? no WHY? no

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? no WHAT? no WHEN? no

DO YOU HAVE:

✓ EPILEPSY? no

GLASS EYE? no

FALSE TEETH? no

EAR INFECTION? no

INNER EAR TROUBLE? no

DIABETES? no

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? no

DO YOU TAKE INSULIN? no IF SO, WHEN WAS YOUR LAST INJECTION? no

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? no WHERE? no

INTERVIEWER: John Doe