

1-29

First Appearance:	Continued:	Continued:	Continued:	Continued:
Continued:	Continued:	Continued:	Continued:	Continued:



**Arrest And Booking Report
Jacksonville Sheriff's Office
Jacksonville Florida**

ADULT

13CT002 838AD

Arresting Agency: **Jacksonville Sheriff's Office**

Day/Date/Time Arrested: **Saturday 1/12/2013 01:57**

Name: **LACHAPPELLE, KEITH MICHAEL**

Aliases:

Nickname(s):

Arrestee's Home Address: **5800 UNIVERSITY BLVD W Apt./Lot #: 515**

City: **JACKSONVILLE** State: **FLORIDA** Zip: **32216**

Taz: **367** Crossstreet:

DOB: **9/10/1987** Age: **25**

Height: **5' 9"** Weight (lbs): **220**

Race: **WHITE** Ethnicity: **HISPANIC ORIGIN** Sex: **Male**

Eye Color: **BROWN** Hair Color: **BROWN** Complexion: **FAIR / LIGHT** Build: **Medium**

ECD Usage: **NOT APPLICABLE**

RTR written related to this incident? **NO** RTR Incident Yr: RTR Incident #:

Is an Offense a hate crime? **NO** Is an Offense a dating violence crime? **NO** Required to register as a sex offender? **NO**

Suspect Invoke Miranda? **NO** Arrestee needs ADA Consideration? **NO** Arrestee Confessed? **NO** Miranda Rights Given? **YES**

Disability or Special Consideration:

Accommodations Requested:

Driver's License # **L214-513-87-330-0** State: **FLORIDA** Subject's Resident Type: **CITY**

Hm Phone # **(904)-000-0000** Bus. Phone # Phone Ext.

Cell Phone # Cell Phone Provider E-mail

Is Vagrant? **NO**

Subject's Residence Status: **RESIDENT** Armed With: **NOT APPLICABLE (NONE)**

Distinguishing Marks:

Employer: **NONE** Place of Birth: **JACKSONVILLE DUVAL FLORIDA UNITED STATES** Country of Citizenship: **UNITED STATES**

School Last Attended: **UNK**

Domestic Violence Involved: **NO** Children under 18 Present: **NO** If No is it Domestic Related: **NO**

US Citizen: **YES**

Day/Date/Time of Incident-From: **Saturday 1/12/2013 01:37**

Day/Date/Time of Incident-To: **Saturday 1/12/2013 01:57**

Incident Address: **7000 ATLANTIC BLVD** Apt./Lot #:

City: **JACKSONVILLE** State: **FLORIDA** Zip: **32211**

Taz: **640** Crossstreet:

Offense Location Type: **Highway / Roadway** Interviewed by: Interviewer ID:

Where Arrested: **7400 ATLANTIC BLVD** Apt./Lot #:

City: **JACKSONVILLE** State: **FLORIDA** Zip: **32211**

Taz: **640** Crossstreet:

Involved in Traffic Accident: **NO**

Injuries from Accident:

Is Incident Gang Related: **NO**

Is Arrestee a Gang member? **NO**

Statute or Ordinance Number(s): **#1**

Statute No: **316.193(1)(A)** Degree: **M1** UCR Code: **5400** Attempt Code: **Commit**

DUI - UNDER INFLUENCE OF ALCOHOL OR CHEMICAL SUBSTANCE; FACULTIES IMPAIRED 1/12/2013-02:51

Citation # 6577-XGR	SA#
Jso Control #	Warrant/Case #

Warrant Type: **Traffic Offense**

No. of Counts:

Route To: **ORIGINAL MISDEMEANOR**

Sub-Sector: **G3**

OC deployed prior to/during Arrest: **NO**

Arrest Made On: **OV**

JAN 12 2013

Sub-Sector: **E2**

ORIGINAL

ADLT LACHAPPELLE, KEITH MICHAEL

ARREST REPORT

Pg 1 of 4

Jail # 2013001104

ADLT

Jurisdiction: Jacksonville Sheriff's Office

CT. Location/Div.:

Purge/Bond Type: **No Bond**

Bond Amount:

Date of Issue:

Date of Return:

Judge:

Disposition:

Disposition Date:

ROR

Blanket Bond:

VOP/FTA ONLY

Original Statute No: Degree: UCR Code: Attempt Code: **Commit**

Description:

Statute or Ordinance Number(s): #2

Statute No: **316.183(2)** Degree: **MV** UCR Code: **540A** Attempt Code: **Commit**

1/12/2013-02:51

UNLAWFUL SPEED; EXCEEDED MAXIMUM POSTED SPEED LIMIT

Citation # **A04B6LE**

SA#

Warrant Type: **Traffic Offense**

Jso Control #

Warrant/Case #

No. of Counts:

Jurisdiction:

CT. Location/Div.:

Purge/Bond Type:

Bond Amount:

Date of Issue:

Date of Return:

Judge:

Disposition:

Disposition Date:

Blanket Bond:

VOP/FTA ONLY

Original Statute No: Degree: UCR Code: Attempt Code: **Commit**

Description:

Statute or Ordinance Number(s): #3

Statute No: **322.34(2)(A)** Degree: **M2** UCR Code: **540A** Attempt Code: **Commit**

1/12/2013-02:51

KNOWINGLY OPERATE VEH WHILE DL SUSPEND/CANCEL/REVOKED - 1ST OFFENSE

Citation # **A04B6ME**

SA#

Warrant Type: **Traffic Offense**

Jso Control #

Warrant/Case #

No. of Counts:

Jurisdiction: Jacksonville Sheriff's Office

CT. Location/Div.:

Purge/Bond Type:

Bond Amount:

Date of Issue:

Date of Return:

Judge:

Disposition:

Disposition Date:

ROR

Blanket Bond:

VOP/FTA ONLY

Original Statute No: Degree: UCR Code: Attempt Code: **Commit**

Description:

Statute or Ordinance Number(s): #4

Statute No: **316.1936(2)** Degree: **MV** UCR Code: **540A** Attempt Code: **Commit**

1/12/2013-02:51

POSSESSION OF OPEN CONTAINER OF ALCOHOLIC BEVERAGE IN VEHICLE (DRIVER)

Citation # **A04B6NE**

SA#

Warrant Type: **Traffic Offense**

Iss Control #

Warrant/Case #

Jurisdiction: Jacksonville Sheriff's Office

No. of Counts:

Purge/Bond Type:

Bond Amount:

CT. Location/Div.:

Disposition:

Date of Issue:

Date of Return:

Judge:

Disposition Date:

Blanket Bond:

VOPI/FTA ONLY

Original Statute No: Degree: UCR Code: Attempt Code: **Commit**
Description:

ADDITIONAL INFORMATION 1

Reporting Officer: **S.W.BAI 5140**

On 01-12-13, at 0137, I was Southbound on University Blvd N. (400 Blk) when I observed the suspect's vehicle travelling at a high rate of speed. I estimated him to be about 20-25 miles over the speed limit (60 mph in 35 mph speed zone). The suspect was weaving slightly within his travel lane. The suspect then stopped at the red light at Atlantic Blvd and University Blvd North and proceeded to turn eastbound on Atlantic.

I then was able to get directly behind the suspect's vehicle and tracked him travelling 60 mph in a 40 mph speed zone at 7000 Atlantic Blvd on radar (G2S16818). I then made a traffic stop at 7400 Atlantic Blvd.

When I made contact with the suspect, I asked for his license and he handed me his Florida State ID card. He then advised that his license was suspended when I asked where his driver's license was. I could smell a moderate odor of an alcoholic beverage coming from his breath as he spoke to me. His face was flushed red. His eyes appeared to be bloodshot, glassy and watery. I asked him how many drinks he had and he stated, "4 beers." I observed an open beer in a paperbag that was near the center console/rear seat. I then went back to my patrol car and confirmed that his license was suspended. DHSMV records indicated:

02/14/2012 CANC-INDEF DL EXPIRED-F.S. 322.08 (6)
11/28/2011 FR-SUSP NON-JUDGEMENT SUSPENSION 722717396
FLORIDA AUTHORITIES ONLY-SEIZE FL TAG IF DRIVER IS OWNER OF VEHICLE

Based upon my observations of possible impairment, I asked for the suspect to step out of the car. I then informed him that I was going to conduct a DUI investigation and he stated that he understood. I then asked if he was willing to perform Field Sobriety Exercises and he agreed to do them.

The suspect performed field sobriety exercises and displayed multiple clues of impairment.

The suspect's Miranda rights were read and he stated that he understood. When asked if he has been drinking any alcoholic beverages, the suspect stated, "3-4 beers, a pitcher." I asked the suspect if he has taken any medication and he stated, "No." I observed eye tremors and his eye lids would not close during the FSE's so I asked if he had smoked marijuana and he stated, "No, I haven't taken any drugs."

The suspect stated, that on a scale of 0 to 10 he would be a "3-4." The suspect stated that he "might" blow over the legal limit.

Based upon my experience and training, the suspect appeared to be impaired while operating a motor vehicle. He was arrested and transported to the PTDF.

Transported By: **S.W.BAI #5140**

Arresting Officer(s) #1: **S.W.BAI #5140**


Div/Zone or Unit: OTHER DUI

Approving Supervisor: **M.R.MOSLEY #5133**

#2: #0

of Cases Cleared:

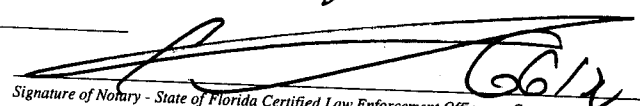
State of Florida, County of Duval

Arresting / Transporting Officer's Signature: 

Sworn to (or affirmed) and subscribed before me this 12 day of Jan, 2013, by

Personally Known or Pronounced Identification Type of Identification produced: CSMIA

Print, Type, or Stamp, Commissioned name of Notary Public

Signature of Notary - State of Florida Certified Law Enforcement Officer or Corrections Officer: 

ORIGINAL

ADLT LACHAPPELLE, KEITH MICHAEL

ARREST REPORT

Pg 3 of 4

Jail # 2013001104

ADLT

Investigative Time:

#1 Hours: 2 Minutes: 0 Cost Amount: \$96.48

Drug Activity: **USE**
Alcohol Related: **SUSPECT USING ALCOHOL**

Drug Type: **UNKNOWN**
Drug Related: **SUSPECT USING DRUGS**

Property: **#1** Weapon Seized: Amount of Money

Status: **NONE**
Property Type: **RECORDINGS (TAPES, CDs, CASSETTES)**

Property Taken by Arresting Officer: **Evidence**
Turned in at: **Property Room**

Firearm Type:
Drug Type:

Manufacturer:

Serial #

Quantity: **1.00**

Weight:

Unit of Measure:

Description: **DUI VIDEO**

Vehicle: **#1** Status: **SUSPECT**

Year: **2007** Type: **AUTOMOBILE** Make: **HONDA** Model: **ACCORD**

Year: **2013** State: **FLORIDA** Tag: **BSPU70**

Primary Color: **SILVER** Top Color:

Last Driver of Vehicle: **Arrestee** ,

Vehicle Released To: **NA** ,

Location Vehicle Towed to or Left at: **7400 ATLANTIC BLVD**

Jail Information (Back Door)

Date and Time Admitted: **1/12/2013 03:03**

Jail # **2013001104**

Juvenile/Court Clerk #

Triage Questions:

Involved in Traffic Accident: **NO** Injuries from Accident:
OC deployed prior to/during Arrest: **NO** Was a hobble restraint used on the arrestee? **NO**
Does the arrestee exhibit any signs of suicidal behavior or attempts? **NO** Does the arrested have any observable medical/mental health problems? **NO**
Has the arrestee shown any escape potential or violence propensity behaviors? **NO**
Is there any other information about the arrestee that jail personnel need to know? **NO**
If yes, what?

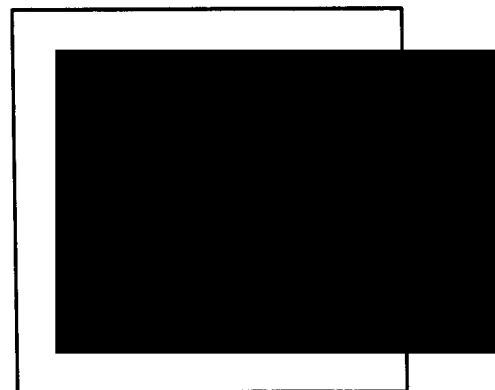
Part II of Arrest And Booking Report:

Arrestee Personal Information: How Long in Jax?

JMHS

Verification By: _____

Chemical Test Data			
Specimen:	Breath	Urine	None
Blood		Unable	
Analysis Results:			Refused:
1st .085 g/210L	TIME: 0292		Blood: <i>NA</i>
2nd .081 g/210L	TIME: 0295		Urine: <i>NA</i>
3rd 0.012 g/210L	TIME: 0247		Breath:
Breath Test Instrument	Machine # 80-061779		
Type: Intoxlyte 8000	Operator Name and I.D.# <i>GG132</i> Date: 1/12/13		



Right Thumb Print

FLORIDA DEPARTMENT OF LAW ENFORCEMENT
ALCOHOL TESTING PROGRAM
BREATH ALCOHOL TEST AFFIDAVIT

Instrument Type: Intoxilyzer 8000
Instrument Registered To: JACKSONVILLE SO
Instrument Serial Number: 80-001279 Software: 8100.27
Date of Test: 01/12/2013

Date of Last Agency Inspection: 12/28/2012

Observation Period Began: 02:20

Subject's Name: KEITH M LACHAPELLE

DOB: 09/10/1987 Sex: M

The subject was observed for at least twenty-minutes prior to the administration of the breath test to ensure that the subject did not take anything orally and did not regurgitate.

Results:

Test	g/210L	Time
Diagnostics Check	OK	02:40
Air Blank	0.000	02:41
Control Test	0.080	02:41
Air Blank	0.000	02:41
Subject Sample #1	0.085	02:42
Air Blank	0.000	02:42
Air Blank	0.000	02:44
Subject Sample #2	0.081	02:45
Air Blank	0.000	02:45
Control Test	0.080	02:46
Air Blank	0.000	02:46
Diagnostics Check	OK	02:46

Cylinder Lot: 23411080A2
Exp: 10/01/2013

State of Florida, County of Duval

Personally appeared before me the undersigned authority, who (A) is personally known to me or () produced _____ as identification, and who after being placed under oath, states:

I C J SMITH, hold a valid Breath Test Operator permit issued by the Florida Department of Law Enforcement, I administered the above breath test to the subject named above in accordance with Chapter 11D-8, Florida Administrative Code, and this form is a true and accurate report of that breath test.

Breath Test Operator: [Signature]

Signature

Date: 1/12/12

Sworn to (or affirmed) before me this 12 day of January, 2013

Signature of Notary Public-State of Florida [Signature]

Printed Name of Notary Public-State of Florida J. Oliver 67704

Note: Pursuant to section 117.10, Florida Statutes, law enforcement officers, correctional officers, traffic accident investigation officers and traffic infraction enforcement officers are notaries public when engaged in the performance of official duties. In accordance with section 316.1934(5), F.S., this completed form is admissible without further authentication and is presumptive proof of the results herein. To be used in accordance with Section 316.1934(5), F.S., and in administrative proceedings pursuant to 322.2615, F.S.

OFFICE OF THE SHERIFF
CONSOLIDATED CITY OF JACKSONVILLE
DEPARTMENT OF CORRECTIONS
MOTOR VEHICLE OPERATOR
CONSTITUTIONAL RIGHTS AND IMPLIED CONSENT

This form will be read to the suspect in the order dictated by this form.

SUBJECT'S NAME: Keith Michael LaChapelle
OFFENSE DATE: 11/12/13 JAIL NUMBER: 201300104 CCR NUMBER: 26655

After the defendant has been lawfully arrested, read the following statement(s) to him/her (Place an "X" or check mark on appropriate line or lines)

1. I am now requesting that you submit to a lawful test of your **BREATH** for the purpose of determining its alcohol content.
2. 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.

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 the 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 in any criminal proceeding.

I am willing to take approved chemical tests.

Suspect refuses to take approved chemical tests.

[Signature]
SUSPECT'S SIGNATURE
[Signature]
OFFICER'S SIGNATURE I.D. NUMBER 66157

SUSPECT'S SIGNATURE

OFFICER'S SIGNATURE I.D. NUMBER

GIVE THIS WARNING TO ANY SUBJECT DETAINED PRIOR TO ANY QUESTIONS. IDENTIFY YOURSELF PRIOR TO ANY QUESTIONING. IDENTIFY YOURSELF AND STATE: "I am required to warn you before you make any statement that you have the following constitutional rights."

1. You have the right to remain silent.
2. You have the right to the presence of a lawyer of your choice before you make any statement and during any questioning.
3. If you cannot afford a lawyer, you are entitled to the presence of a court appointed lawyer before you make any statement and during any questioning.
4. If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.
5. Any statement you make can and will be held against you in a court of law.

After the warning, ask the following questions and note the suspect's response.

1. Do you understand each of these rights I have explained to you? Yes No (Officer to check one)
2. With these rights in mind, do you wish to talk to us now? Yes No (Officer to check one)

I agree to answer questions.

Suspect does not wish to answer questions.

[Signature]
SUSPECT'S SIGNATURE
[Signature]
OFFICER'S SIGNATURE I.D. NUMBER 66150

SUSPECT'S SIGNATURE

OFFICER'S SIGNATURE I.D. NUMBER

(0220)

DATE: 11/12/13 NAME: Keith LaChapelle JAIL NUMBER: 2013000104
 Were you operating a vehicle? yes Where were you going? Denny's
 What street or highway were you on? Atlantic Blvd. Direction of travel? East
 Where did you start from? Memorial hospital What time did you start? 1:15 p.m.
 What time is it now? 2 Am. What city (county) are you in now? Jacksonville
 What is the date? 11/11/13 What day of the week is it? Saturday

INTERVIEWER TO FILL IN: Actual 0219 a.m. p.m.
 TIME 11/12/13 DAY Saturday Interviewer's Name _____

When did you last eat? 11 p.m. What did you eat? Cold cut Sandwich
 What were you doing during the last three hours? hospital, the Chevron and bought a 4 pack then went to Denny's
 Have you been drinking? yes What? beer How much? half a beer
 Where? Chevron Started? 1:45 a.m. p.m. Stopped? 1:50 a.m. p.m.
 Are you under the influence of an alcoholic beverage now? "no, I don't think so"
 What is your occupation? Military When did you last work? 3 weeks ago
 Do you have any physical defects? yes If so, what? appendix taken out
 Are you ill? NO If so, what's wrong? N/A
 Do you limp? NO Have you been injured lately? NO If so, what's wrong? N/A
 Were you involved in an accident today? NO Did you get a bump on the head? N/A
 Have you had any alcoholic beverages since the accident? N/A If so, what? N/A
 Where? N/A How much? N/A When? N/A
 Have you seen a doctor or dentist lately? yes If so, who? Conster When? 3 times a week
 What for? Counsel Are you taking tranquilizers, pills or medicines of any kind? no
 If so, what kind? N/A Last dose? N/A a.m. p.m. Do you have epilepsy? NO
 Diabetes? NO Do you take insulin? NO If so, last dose N/A
 Have you had any injections of any other drug recently? NO If so, what for? N/A
 What kind of drug? N/A Last dose? N/A a.m. p.m. When did you last sleep? last night
 How much sleep did you have? 8 hours

HANDWRITING SPECIMEN

Signature and/or anything he/she chooses.

Keith LaChapelle

Remarks and Observations: At 0217, a/c. Bai requested a breath test. Escorted subject to BAT room. Started my observation time at 0220. Read subject implied consent. Subject

CHEMICAL TEST DATA Specimen: BLOOD BREATH URINE REFUSED UNABLE

Analysis Results
 1st 005 g/210L 2nd 081 g/210L 3rd urine g/210L

Intoxilyzer 8000 800-cc-1779
 Serial # of Instrument.

If refused, why/how?

Operator's Signature/ID #: [Signature]

Office of the Sheriff
Jacksonville, Florida
Field Sobriety Report

Date / Day / Time of Arrest:
01-12-13 SAT 0157

Date / Day of SFSE's:
01-12-13 SAT

CCA #: *26655*

Arrest and Booking Report #: *2013001104*

Location of SFSE's:
740 ATLANTIC BLVD

Subject's Last Name: *LACHAPPELLE* First Name: *KEITH* Middle Initial: *MICHAEL*

Height: *5-9* Weight: *220* Age: *25*

Clothing: Orderly Disorderly Mussed Unzipped Inside Out Naked
 Urine Feces Vomit Other:

Clothing Description:

	Color
Hat / Cap	
Shirt/Dress	<i>White</i>
Jacket/Coat	
Pants/Skirt	<i>Blue</i>
Footwear	<i>Blue</i>

Statements Made by Driver (Drinking? - How much? - Where? etc):

Medications / Medical:

3-4 Beers

NONE

Miranda Rights Provided: YES NO From Card? YES NO

Medical Alert Jewelry: Yes No

Diabetic: Yes No Unk
Epileptic: Yes No Unk

Is the subject injured or hurt in any way that would prevent them from performing SFSE's? YES NO
If yes, what?

Subject's Education Level Obtained:
 None Elementary Unk
 High School College
How Far?

Officer's Observations (Check Words Describing Subject's Condition)

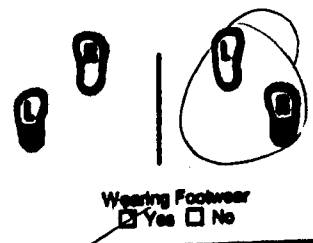
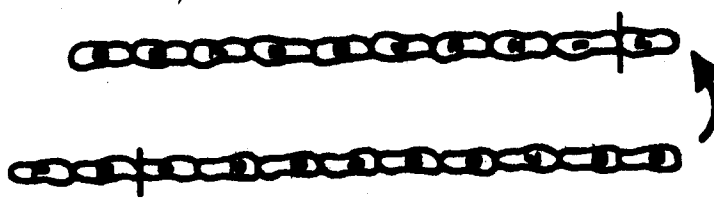
Breath	Odor of Alcoholic Beverage: <input type="checkbox"/> None <input type="checkbox"/> Faint <input checked="" type="checkbox"/> Moderate <input type="checkbox"/> Strong <input type="checkbox"/> Other:
Face	<input type="checkbox"/> Apparently Normal <input checked="" type="checkbox"/> Flushed <input type="checkbox"/> Pale <input type="checkbox"/> Other:
Eyes	<input type="checkbox"/> Apparently Normal <input checked="" type="checkbox"/> Watery / Glassy <input checked="" type="checkbox"/> Bloodshot / Red <input type="checkbox"/> Droopy Eyelids <input type="checkbox"/> Constricted Pupils <input type="checkbox"/> Dilated Pupils <input type="checkbox"/> Pupils Unequal <input type="checkbox"/> Artificial Eye <input type="checkbox"/> Defects <input type="checkbox"/> Other
Speech	<input checked="" type="checkbox"/> Apparently Normal <input type="checkbox"/> Slurred <input type="checkbox"/> Mumbling <input type="checkbox"/> Thick Tongued <input type="checkbox"/> Incoherent <input type="checkbox"/> Stuttering <input type="checkbox"/> Other:
Attitude	<input type="checkbox"/> Polite <input checked="" type="checkbox"/> Cooperative <input type="checkbox"/> Silent <input type="checkbox"/> Sleepy <input type="checkbox"/> Lethargic <input type="checkbox"/> Confused <input type="checkbox"/> Talkative <input type="checkbox"/> Carefree <input type="checkbox"/> Indifferent <input type="checkbox"/> Profane <input type="checkbox"/> Mood Swings <input type="checkbox"/> Cocky <input type="checkbox"/> Antagonistic <input type="checkbox"/> Combative <input type="checkbox"/> Sarcastic <input type="checkbox"/> Argumentative <input type="checkbox"/> Threatening <input type="checkbox"/> Other:
SFSE's	<input type="checkbox"/> Unable <input type="checkbox"/> Too Impaired <input type="checkbox"/> Refused If subject refused SFSE's, the subject was advised their refusal may be held against them at a later date. <input type="checkbox"/> YES <input type="checkbox"/> NO

FIELD SOBRIETY REPORT

CCR# 26655

Officer's Given by: Name: S.W. BAI ID# 5740 Assignment: Patrol DUI FHP Other:
 Surface Conditions: Level Asphalt Concrete Other: Weather: Clear Lighting (Type): Headlights

Horizontal Gaze Nystagmus			Walk and Turn			One Leg Stand					
			Instruction Stage:			Wearing Footwear		Seconds	0-10	11-20	21-30
Wearing Glasses <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			1. Can Not Keep Balance: <input checked="" type="checkbox"/>			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Arms	✓	✓	✓
Wearing Contacts <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			2. Starts Too Soon: <input checked="" type="checkbox"/>					Hops			
Eye Problems <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			Walking Stage:			1 st 9 Steps		Sways	✓	✓	✓
Left Eye			3. Stops Walking			2 nd 9 Steps		Foot Down	✓	✓	
Yes No			4. Misses Heel to Toe			3		Total Clues Observed	3 Out of a Possible 4 Total clues		
Yes No			5. Steps Off Line			3					
Yes No			6. Uses Arms for Balance			✓ ✓					
Yes No			7. Actual Steps Taken			9 9					
Yes No			8. The Turn (Describe)			<u>Spin</u>					
Total Clues Observed			Total Clues Observed			7		Out of a Possible 8 Total Clues			
Vertical Gaze Nystagmus <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No											



Rhombus Balance		Rhombus Alphabet		Finger to Nose	
<input type="checkbox"/> Eyes do not remain closed	<input type="checkbox"/> Sways forward to backward / side to side	<input type="checkbox"/> Uses arms for balance	Timer _____ for 30 sec.	<input type="checkbox"/> Forgets to Remove Finger	<input type="checkbox"/> Misses Tip of Nose with Tip of Finger <u>1/6</u>
<input type="checkbox"/> Eyes do not remain closed	<input checked="" type="checkbox"/> Sways forward to backward / side to side	<input type="checkbox"/> Uses arms for balance		<input type="checkbox"/> Uses Wrong Hand	<input checked="" type="checkbox"/> Eyes do not remain closed
<input type="checkbox"/> Eyes do not remain closed	<input checked="" type="checkbox"/> Sways forward to backward / side to side	<input type="checkbox"/> Rhythmic		<input type="checkbox"/> Uses arms for balance	<input checked="" type="checkbox"/> Sways forward-backward / side to side
1. HGN:		2. Walk and Turn:		3. One Leg Stand:	
				<u>DID NOT COME</u>	
4. Rhombus Balance:		5. Rhombus Alphabet:		6. Finger to Nose:	
		<u>A B C D E F G H I J K L M N O P Q R S T U V W X Y Z</u>			
Did the subject indicate or state they understood the instructions prior to beginning the exercises? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Other:					
I, the Arresting Officer hereby request that the suspect be given an approved chemical test. I have observed the impairment of the subject's normal faculties. In the event that this subject's breath result is below .08%, I hereby request that he be administered an approved urine test.					
Officer's Signature: <u>[Signature]</u>		ID #: <u>5740</u>		Date: <u>01-12-13</u>	

Type of Line: 2" TAPE



Ronnie Fussell
Clerk of Circuit Court

ADD ON DOCKET

Date: January 12, 2013

Judge: Russell Healey

P/A: Tonya Patterson-Barge

Sdv by Adm

DUI

"ROR"

1/29/13 9AM #303 ATT.

unlawful speed

DWLS

poss open Alc const.