



CHANDLER POLICE DEPARTMENT

General Offense Report

GO# CH 2018-81218

DUI

General Offense Information

CLOSED - CRIMINAL CITATION

Reported on: **Jul-04-2018 (Wed.) 21**

Occurred on: **Jul-04-2018 (Wed.) 21**

Approved on: **Jul-05-2018 (Thu.)** by: **4633 - DANIEL MCQUILLIN #S124**

Report submitted by: **9271 - ANDREW BRILL #696**

Org unit: **Patrol Team 2**

Address: **S AMBROSIA DR / W OCOTILLO RD**

Municipality: **CHANDLER** County: **MARICOPA**

District: **5** Beat: **13** Grid: **O12**

Felony/Misdemeanor: **MISDEMEANOR**

Gang involvement: **No**

Family violence: **No**

Offenses (Completed/Attempted)

Offense: # **1 5404-0 DUI - COMPLETED**

Location: **Highway/Road/Alley/Street/Sidewalk**

Offender suspected of using: **Not Applicable**

Bias: **None (No Bias)**

Related Event(s)

CP	81218
Arrest Booking	4971
TK	30460Z

Related Person(s)

1. Arrestee # 1 - KEIM, STEVEN MATTHEW

Sex: **Male**

Race: **White**

Year of birth: **1972**

Address: [REDACTED]
[REDACTED]
[REDACTED]

Phone Numbers

Cellular: [REDACTED]

Particulars

Place of birth: [REDACTED]

Occupation: [REDACTED]

Employer: [REDACTED]

Ethnicity: **White**

Height: **6'03** Weight: **300 lbs.**

Eye color: **BLUE**

Hair color: **BALD (For III Only)**



CHANDLER POLICE DEPARTMENT

General Offense Report

GO# CH 2018-81218

DUI

Charge Summary

Charge # 1

Offense date: **Jul-04-2018 (Wed.)**
Offense: **DUI LIQUOR/DRUGS/VAPORS**
Charge statute: **TR 28-1381A1**
Charge severity: **Misdemeanor**
Domestic Violence: **No**

Linkage factors

Resident status : [REDACTED]
Access to firearm : **No**
Armed with : **Unarmed**
Offense: **5404- 0 DUI - COMPLETED**
Arrest date: **Jul-04-2018 (Wed.)**
Arrest type: **Cite & Release (No Booking)**

Related Vehicle(s)

1. Involved #1 - CFY3428, AZ

License number: **CFY3428**
State of issue: **Arizona**
VIN #:
License type: **Truck**
Vehicle type: **PICKUP, VAN**
Make and model: **Ford F150 XLT**
Style: **PICKUP**
Year: **2018**
Color: **Black**
License number: **CFY3428**
State of issue: **Arizona**
License type: **Truck**
Towed: **No**

Insurance Information

Owner Information

Owner type: **PERSON**
Owner role: **Involved**



CHANDLER POLICE DEPARTMENT

General Offense Report

GO# CH 2018-81218

DUI

Related Text Page(s)

Document: Narrative

Author: 9271 - ANDREW BRILL #696

Related date/time: Jul-04-2018 (Wed.)

*** Pictures, audio, and/or video is available on <http://www.evidence.com>. Any breaks in recording were due to investigations, tactical, or privacy considerations.***

In regards to this case is should be noted:

I have been a Police Officer since March of 2015. I attended the Arizona Law Enforcement Academy were I completed 21 weeks of training. During that time, I completed basic DUI detection and Standardized Field Sobriety Tests. I became certified in Horizontal Gaze Nystagmus on 01/20/2017 and maintain a proficiency of at least 80%. I became a qualified Phlebotomist on 03/17/2017 after completing six weeks of classroom instruction at Phoenix College and a clinical externship at the Phoenix VA Hospital. On 03/15/2017 I completed Advanced Roadside Impaired Driving Enforcement course at GOHS. On 08/21/2017 I was certified as a Drug Recognition Expert by the International Association of Chiefs of Police. My IACP number is pending.

Synopsis:

On 07/04/2018 at 0047 hours Steven Keim was arrested for Driving Under the Influence in the area of S Ambrosia Dr / W Yellowstone Wy Chandler, AZ. This case is Closed- Criminal Citation.

Charges:

ARS 28-1381A1 - DUI Liquor/Drugs/Vapors

Narrative:

On 07/04/2018 hours at 0030 hours I was participating in DUI Saturation Patrol for the Fourth of July Holiday. I was in a blue unmarked Ford Explorer Police SUV. I was wearing my department issued uniform, clearly identifying me as a Police Officer. I was dispatched to assist Sergeant Dykstra in the area of S Ambrosia Dr / W Yellowstone Wy Chandler, AZ for a possibly impaired driver. I responded to the scene and Sgt Dykstra provided me with information on his traffic stop. Sgt Dykstra also completed a supplemental narrative to this report. Sgt Dykstra told me he could smell the odor of an intoxicating beverage coming from the vehicle and asked me to check for signs and symptoms of impairment.



CHANDLER POLICE DEPARTMENT

General Offense Report

GO# CH 2018-81218

DUI

Driver Contact:

I contacted the driver, identified as Steven Keim at his vehicle I introduced myself and asked where he was coming from, Steven told me he was "bouncing around" and came from a friend of his. He told me he had two beer between one to two hours prior and ate them with Pizza. Steven denied any medication or drug use. I asked Steven to step out of vehicle, which he did. I could smell the odor of an intoxicating beverage coming from Steven's breath and I observed Steven's eyes to be bloodshot and watery. I also noticed a slight slur to Steven's voice as he spoke to me. Once out of the vehicle, Steven told me he had a bad knee and could not participate in any tests.

Pre-Arrest Screening / Standardized Field Sobriety Tests:

HGN- Steven indicated he did not wear contact or glasses. I asked him to stand with his feet together, arms at his sides. I asked him to follow the tip of a ball point pen with his eyes only, which he stated he could do. During the test, Steven was unable to follow the stimulus without moving his head twice. I asked him to hold his head still using his fists. Once Steven was able to keep his head still I observed 6 of 6 clues. During the test, I observed a heavy sway as Steven followed the stimulus.

Walk and Turn- Steven refused to participate in this test because of a pre-existing knee injury.

One Leg Stand- Steven refused to participate in this test because of a pre-existing knee injury.

PBT- Steven refused to provide a preliminary breath sample

Arrest / Processing:

At approximately 0047 hours based on my observations and Steven's statements, I arrested him for DUI. I handcuffed Steven to the rear, providing two sets of cuffs to accommodate Steven's wide shoulders. I checked for fit and double locked the cuffs.

At approximately 0048 hours I read Steven his Miranda warnings from my department issued card. When asked if he understood his rights, Steven told me "Yes Sir."

Steven's vehicle was removed from the roadway by All City Towing. A vehicle report was completed by Motorist Assist Volunteer T. Bradshaw #V596



CHANDLER POLICE DEPARTMENT

General Offense Report

GO# CH 2018-81218

DUI

I transported Steven to the DUI Command Van which was parked at the Chandler Municipal Court located at 200 E Chicago St. I provided Steven his phone at his request while I completed paperwork.

At 0125 hours I read Admin Per Se to Steven from the provided form. Steven consented to the blood draw and at 0134 hours I drew two vials of blood from Steven's left arm with no observed or reported complications. I sealed the blood kit and it was later impounded into evidence. A lab request was completed and submitted.

At 0142 hours, Steven agreed to participate in a Post Miranda Interview. The interview was captured on my body worn camera and notes are available on the Influence Report Supplement.

At approximately 0155 hours, Steven was provided copies of all necessary paperwork and released to a waiting ride.

Conclusion:

On 07/04/2018 at 0021 hours, Sgt Dykstra conducted a traffic stop of on a black Ford F150 Raptor being driven by Steven Keim. Steven displayed signs and symptoms of impairment and admitted to drinking alcohol prior to driving. Steven was arrested for DUI, processed and released.

This case is closed- Criminal Citation.



CHANDLER POLICE DEPARTMENT

General Offense Report

GO# CH 2018-81218

DUI

Follow Up Report # CH 1

Follow Up Report # CH 1

Assignment Information

Assigned to: **3618 - ROBERT DYKSTRA #S98** Rank:
Capacity: **Supplemental** Org unit: **K9 Unit**
Assigned on: **Jul-04-2018 (Wed.) 1302** by: **3618 - ROBERT DYKSTRA #S98**
Report due on: **Jul-09-2018 (Mon.)**

Submission Information

Submitted on: **Jul-09-2018 (Mon.) 1240**
Approved on: **Jul-09-2018 (Mon.)** by: **3618 - ROBERT DYKSTRA #S98**

Follow Up Conclusion

Follow Up concluded: **Yes**

Narrative Text Report # 1

Document: **Narrative**
Author: **3618 - ROBERT DYKSTRA #S98**
Related date/time: **Jul-05-2018 (Thu.) 312**

***** AXON VIDEO RECORDING AVAILABLE *****

On July 04, 2018 at approximately the hour of 0012, I was traveling south bound on Dobson Road approaching the green light at the intersection of Germann Road. I observed a black Ford F150 crew cab pick up traveling east bound on Germann Road at a high rate of speed and it abruptly stopped for the red light at Dobson Road.

I proceeded through the intersection and slowed to 35 m.p.h. and watched the truck turn south bound onto Dobson Road but traveled at a slower speed. I turned into Chuparosa Park in order for the vehicle to pass, but I had to drive around a raised median in the park. By the time I reached the park's entrance/exit I observed the pick up truck was now traveling at a high rate of speed as it approached the intersection of Dobson Road and Queen Creek Road. The vehicle then stopped for the red light at the intersection where I was able to get behind the vehicle. I activated my body worn camera at this time and I observed the vehicle to have the license plate of Arizona CYF3428. I conducted a license inquiry and saw the license plate was valid and registered to San Tan Ford out of Gilbert, Arizona.

The light turned green and the vehicle proceeded south bound in the outside lane of Dobson Road. The vehicle turned west bound into the private drive across from Edgewater Way. I conducted to follow the vehicle as it drove



CHANDLER POLICE DEPARTMENT

General Offense Report

GO# CH 2018-81218

DUI

Follow Up Report # CH 1

into the business complex at 2701 W. Queen Creek Road. The vehicle parked in front of the Keystone Law Firm and Wealth Partner. The driver exited the vehicle and began walking toward the front of the business. I was able to see that he was a tall what male and he appeared to be talking on his cellular phone.

I turned off my body worn camera at this time and drove to the north side of Queen Creek Road to watch the truck. Once I arrived across the street, I observed the reverse lights activate on the truck and it began to travel the same direction in which it drove into the parking lot.

I drove to Dobson Road and went to the intersection of Edgewater Way to wait for the truck but I saw that it was already stopped at the light at Dobson Road and Price Road.

I drove up to the vehicle and the light turned green. The vehicle was in the inside lane of traffic and it proceeded south bound. I again activated my body worn camera and continued to follow the vehicle. I observed the vehicle drift into the outside lane of traffic and then back into the inside lane. The vehicle then drifted back toward the outside lane and began to drive on the lane divider. The vehicle drifted back into the inside lane.

As the vehicle continued south bound on Dobson Road it started to drift into the outside lane to share the lane with another vehicle. The other vehicle began to slow down and the pick up truck's right turn signal activated. The vehicle then moved into the outside lane of traffic. I continued to follow and went into the same lane. I was intending to conduct a traffic stop on the vehicle near the north gated entrance of Intel, but the truck's left turn signal activated and it changed lanes back into the inside lane of traffic.

I again followed the vehicle's traffic movement and it moved into the outside east bound turn lane to turn east onto Ocotillo Road. The traffic light was green and the vehicle conducted the turn. The vehicle made a wide turn nearly striking the curb. The vehicle continued east bound in the outside lane of traffic of Ocotillo Road.

The vehicle turned south bound onto Ambrosia Drive. I followed the vehicle and activated the emergency lights on my fully marked Chevrolet Tahoe. I observed the gates open to the community and the truck continued south on Ambrosia Drive, traveled though the gates and then turn east bound onto Yellowstone Way. The vehicle then yielded just west of [REDACTED]



CHANDLER POLICE DEPARTMENT

General Offense Report

GO# CH 2018-81218

DUI

Follow Up Report # CH 1

I approached the vehicle and the driver's door window opened. I was between the truck's bed and rear door when I was able to smell a strong odor of an alcoholic beverage. I was able to see the driver's eyes in the side view mirror and they were bloodshot and watery.

I contacted the driver and asked for his driver's license. He was looking through cards and he verbally identified himself to me as Steve Keim. He told me he was the director of security for the Arizona Cardinals and he works with Sean McKenzie. The only Officer Sean McKenzie I know was killed in an off duty vehicle collision and I believed he was referencing him.

I informed Steve as the reason for the traffic stop and he nodded his head in acknowledgment. I asked him how much he had to drink and he responded by saying "two beers". I asked him if he was diabetic and he answered in the negative. I was able to smell a strong odor of an alcoholic beverage emanation from his breath as he spoke and his speech was slurred. I asked if he had any firearms in the vehicle and he said, "No." I asked Steve to stay in the vehicle and I would return.

I returned to my patrol vehicle where I conducted a driver's license inquiry. I found his license to be valid and there were no warrants in the system. I requested a traffic officer to assist at my traffic stop and Officer Brill responded several minutes later. While I waited for Officer Brill to arrive I watched Steve stay seated in his truck and he was talking on his cellular telephone.

Officer Brill arrived and I briefed him on my observations. He contacted Steve and had him exit the vehicle. They walked to the sidewalk and I heard Steve consent to the Horizontal Gaze Nystagmus. I was now standing in front of my truck near the driver's side headlight and I observed Steve sway back and forth as Officer Brill conducted his gaze.

A few moments later Officer Brill advised Steve was under arrest and began to place him in handcuffs. I assisted in placing Steve in handcuffs and two sets of handcuffs were used in order to prevent any injury to Steve's shoulders since he is a large man. He asked for his cellular telephone as he was sitting in the backseat of Officer Brill's vehicle.

I retrieved his cellular phone from the front seat of the truck and gave it to Officer Brill. I was starting on a vehicle inventory and I observed the interior of the truck was very clean. I found a black duffel bag that contained clothing items and a bottle of Steve's prescription medication. I stopped conducting an inventory of the vehicle when I learned a police volunteer was there to conduct the tow.



CHANDLER POLICE DEPARTMENT

General Offense Report

GO# CH 2018-81218

DUI

Follow Up Report # CH 1

This concludes my involvement in this matter.



CHANDLER POLICE DEPARTMENT

General Offense Report

GO# CH 2018-81218

DUI

Clearance Information

Agency: **Chandler PD**

Cleared status: **Cleared By Arrest Or Criminal Citation - Not Applicable**

Cleared on: **Jul-04-2018 (Wed.)**

Cleared by Officer 1: **9271 - ANDREW BRILL #696**

Org Unit: **TM2 - Patrol Team 2**

Complainant/Victim notified: **No**



CHANDLER POLICE DEPARTMENT

General Offense Report

GO# CH 2018-81218

DUI

Related Property Report(s)

Report Information

Property Report #: 113091

Property case status: **SEIZED/EVIDENCE**

Submitted on: **Jul-04-2018 (Wed.)** by: **ANDREW BRILL #696**

Related:

Offense: **GO CH 2018- 81218**

Related items: **1**

Articles - Evidence

Status: **SEIZED/EVIDENCE**

Tag #: **CH113091- 1**

Article: **YBLOOD- Other Items**

Serial # 1: **UNKNOWN**

OAN:

Value: **\$0.00**

Color:

Description: **SEALED BLOOD KIT**

Recovered date: -

Recovered value: **\$0.00**

Flags: ***e**

Current Location: **PE RFG1/BLD**

Flags = d (disposed) x (x-reference) n (entered on NCIC) *e (evidence)



CHANDLER POLICE DEPARTMENT

General Offense Report

GO# CH 2018-81218

DUI

Related Attachment - DUI

Attachment Description:

Reference Number:

JUL 07 2018

CHANDLER POLICE DEPARTMENT INFLUENCE REPORT SUPPLEMENT

SUSPECT NAME: LAST, FIRST MIDDLE KEIM, STEVEN MATTHEW		DOB [REDACTED]	CONNECTING GO# N/A	COLLISION <input type="checkbox"/>	GENERAL OFFENSE # 18-81218
HEIGHT 603	WEIGHT (ASK) 300	HAIR BLD	EYES BLU	***ENTER REPORTING PARTIES, WITNESSES AND PASSENGERS INTO RMS REPORT***	
LOCATION OF STOP: 5 AMBROSIA DR / W OCOTILLO RD			LOCATION FIRST OBSERVED: <input type="checkbox"/> SAME AS STOP		
STOP DATE 7/4/18	STOP TIME 0021	ARREST DATE 7/4/18	ARREST TIME 0047	DATE BLOOD DRAWN 7/4/18	TIME BLOOD DRAWN 0134
LOCATION BLOOD DRAWN DUI CMD 200 E CHICAGO					
PHASE I - VEHICLE IN MOTION NHTSA DRIVING IMPAIRMENT CLUES					
PROBLEMS MAINTAINING LANE POSITION	SPEED AND BRAKING PROBLEMS	VIGILANCE PROBLEMS	JUDGEMENT PROBLEMS	POST STOP CLUES:	
<input type="checkbox"/> WEAVING <input type="checkbox"/> WEAVING ACROSS LANE LINE <input type="checkbox"/> DRIFTING <input type="checkbox"/> STRADDLING LANE LINE <input type="checkbox"/> SWERVING <input type="checkbox"/> ALMOST STRIKING OBJECT OR VEHICLE <input type="checkbox"/> TURNING WITH WIDE RADIUS <input type="checkbox"/> OTHER _____	<input type="checkbox"/> STOPPING TOO FAR FROM CURB OR AT AN INAPPROPRIATE ANGLE <input type="checkbox"/> STOPPING TOO SHORT OR BEYOND THE LIMIT LINE <input type="checkbox"/> JERKY OR ABRUPT STOPS <input type="checkbox"/> UNNECESSARY ACCELERATION OR DECELERATION <input type="checkbox"/> VARYING SPEED <input type="checkbox"/> 10 MPH OR MORE UNDER THE POSTED SPEED LIMIT SEE SGT DYKSTRA'S SUPPLEMENT FOR CLUES <input type="checkbox"/> OTHER _____	<input type="checkbox"/> DRIVING WITHOUT HEADLIGHTS AT NIGHT <input type="checkbox"/> FAILURE TO SIGNAL OR SIGNAL INCONSISTENT WITH ACTION <input type="checkbox"/> DRIVING IN OPPOSING LANES OR WRONG WAY ON ONE WAY <input type="checkbox"/> SLOW RESPONSE TO TRAFFIC SIGNALS <input type="checkbox"/> SLOW OR FAILURE TO RESPOND TO OFFICER'S SIGNALS <input type="checkbox"/> STOPPING IN LANE FOR NO APPARENT REASON <input type="checkbox"/> OTHER _____	<input type="checkbox"/> FOLLOWING TOO CLOSELY <input type="checkbox"/> IMPROPER OR UNSAFE LANE CHANGE <input type="checkbox"/> ILLEGAL OR IMPROPER TURN <input type="checkbox"/> DRIVING ON OTHER THAN DESIGNATED ROADWAY <input type="checkbox"/> STOPPING INAPPROPRIATELY IN RESPONSE TO OFFICER <input type="checkbox"/> INAPPROPRIATE OR UNUSUAL BEHAVIOR <input type="checkbox"/> APPEARING TO BE IMPAIRED <input type="checkbox"/> OTHER _____	<input type="checkbox"/> DIFFICULTY WITH VEHICLE CONTROLS <input type="checkbox"/> FUMBLING WITH DL OR REG <input type="checkbox"/> DIFFICULTY EXITING VEHICLE <input type="checkbox"/> REPEATING QUESTIONS OR COMMENTS <input type="checkbox"/> SWAYING UNSTEADY OR BALANCE ISSUES <input type="checkbox"/> LEANING ON VEHICLE OR OTHER OBJECT <input type="checkbox"/> SLURRED SPEECH <input type="checkbox"/> SLOW TO RESPOND TO OFFICER/OFFICER MUST REPEAT <input type="checkbox"/> PROVIDES INCORRECT INFORMATION/CHANGES ANSWERS	

PHASE II - PERSONAL CONTACT					
DRIVER ASKED TO EXIT VEHICLE: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		DRIVER EXITED VEHICLE ON OWN: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
EYES:	<input type="checkbox"/> Normal	<input checked="" type="checkbox"/> Watery	<input checked="" type="checkbox"/> Bloodshot	<input type="checkbox"/> Dilated	<input type="checkbox"/> Constricted <input type="checkbox"/> Other
BREATH (ETOH):	<input type="checkbox"/> None	<input type="checkbox"/> Faint	<input checked="" type="checkbox"/> Moderate	<input type="checkbox"/> Strong	<input type="checkbox"/> Other
SPEECH:	<input type="checkbox"/> Normal	<input checked="" type="checkbox"/> Slurred	<input type="checkbox"/> Confused	<input type="checkbox"/> Incoherent	<input type="checkbox"/> Thick Tongue <input type="checkbox"/> Repetitive <input type="checkbox"/> Other
FACE:	<input checked="" type="checkbox"/> Normal	<input type="checkbox"/> Pale	<input type="checkbox"/> Flushed	<input type="checkbox"/> Suntanned	<input type="checkbox"/> Other
ATTITUDE:	<input checked="" type="checkbox"/> Polite	<input checked="" type="checkbox"/> Cooperative	<input type="checkbox"/> Indifferent	<input type="checkbox"/> Insulting	<input type="checkbox"/> Antagonistic <input type="checkbox"/> Argumentative <input type="checkbox"/> Mood Swings <input type="checkbox"/> Other
CLOTHING:	<input type="checkbox"/> Clean	<input type="checkbox"/> Disorderly	<input type="checkbox"/> Disarranged	<input type="checkbox"/> Bloody	<input type="checkbox"/> Torn <input type="checkbox"/> Vomit <input type="checkbox"/> Urine <input checked="" type="checkbox"/> Other DIRT
OTHER ACTIONS:	<input type="checkbox"/> Hiccups	<input type="checkbox"/> Profanity	<input type="checkbox"/> Belching	<input type="checkbox"/> Vomiting	<input type="checkbox"/> Crying <input type="checkbox"/> Laughing <input type="checkbox"/> Urinate On Self
<input type="checkbox"/> Sleeping	<input type="checkbox"/> Stuporous	<input type="checkbox"/> Combative	<input type="checkbox"/> Swaying	<input type="checkbox"/> Leaning	<input type="checkbox"/> Fumbling <input type="checkbox"/> Other

PHASE III - PREARREST SCREENING			
What time did you start drinking? 200 - 2300	What type? BEER	How Much? 2	What time did you have your last drink? N/A
What time did you last eat?	What did you last eat?		
Are you ill?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If so, how?	
Are you under a doctor's care?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Details: N/A	
Do you have any recent head injuries?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Details:	
Are you diabetic?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Details:	
Do you have any physical disabilities?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Details: KNEE	

STANDARDIZED FIELD SOBRIETY TESTS			
Officer Administering SFSTs: A. BRILL	Badge#	Emergency Lights in View of Suspect During SFSTs? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (describe)	
Suspect Has Obvious Physical Disabilities? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Describe: SCARS TO RIGHT KNEE			
Shoe Type Worn By Suspect: <input checked="" type="checkbox"/> Sneakers <input type="checkbox"/> Flat Sole <input type="checkbox"/> Boots <input type="checkbox"/> Flip Flops <input type="checkbox"/> High Heel <input type="checkbox"/> Other			
Shoes Removed Prior to SFSTs? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
SFST SURFACE: <input type="checkbox"/> Street <input checked="" type="checkbox"/> Sidewalk <input type="checkbox"/> Parking Lot <input checked="" type="checkbox"/> Concrete <input type="checkbox"/> Asphalt <input type="checkbox"/> Dirt <input type="checkbox"/> Gravel			
<input type="checkbox"/> Wet <input checked="" type="checkbox"/> Dry <input type="checkbox"/> Level <input type="checkbox"/> Other			
TRAFFIC CONDITIONS: <input checked="" type="checkbox"/> Light <input type="checkbox"/> Intermittent <input type="checkbox"/> Heavy			
LIGHTING: <input checked="" type="checkbox"/> Street Lights <input checked="" type="checkbox"/> Vehicle Lights <input checked="" type="checkbox"/> Flashlight <input type="checkbox"/> Building Lights			
<input type="checkbox"/> Natural <input type="checkbox"/> Other			
REPORT REVIEWED: DSN 24	REPORTING OFFICER/BADGE: A. BRILL	A696	DATE: 7/4/18 ENTRY CLERK ID

6937

REV 03/2016



CHANDLER POLICE DEPARTMENT

General Offense Report

GO# CH 2018-81218

DUI

PAGE 2

GENERAL OFFENSE # 18-81218

MIRANDA - You have the right to remain silent. - Anything you say can and will be used against you in a court of law. - You have the right to the presence of an attorney, before and during questioning. - If you cannot afford an attorney, you have the right to have an attorney appointed before questioning at no cost to you. Do you understand these rights? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Officer: 696 Time: 0048		AVISO MIRANDA - Usted tiene el derecho de guardar silencio. - Cualquier cosa que diga puede usarse en su contra en los tribunales de justicia. - Usted tiene el derecho a tener un abogado presente antes y durante las preguntas, si usted lo desea. - Si usted no tiene los fondos para pagar un abogado, usted tiene el derecho a que el tribunal le nombre uno para que le asista antes de comenzar con las preguntas. Comprende usted estos derechos? <input checked="" type="checkbox"/> Si <input type="checkbox"/> No Officer: _____ Time: _____	
Interviewing Officer: _____		Start Date/Time: 0142	
Location: <input type="checkbox"/> Main <input type="checkbox"/> West <input type="checkbox"/> South <input checked="" type="checkbox"/> DUI Van <input type="checkbox"/> Other		<input type="checkbox"/> Spanish	
Have you taken any medication or drugs in the last 24 hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If so, what? For what purpose? 4BP	
Are you ill? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If so, how?			
Are you suffering from any head injuries? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Do you have any physical disabilities? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If so, how do they affect you? Leg Issues			
Are you a diabetic? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Are you taking insulin? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Details:	
Are you under a physician's care? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, why?			
When did you last eat? 1800		What did you eat last? NACHOS	
How much sleep last night? 4.5 HRS		Sleep (nap) today? NO	
Are you tired? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		When did you wake up today?	
How long were you driving the vehicle before stopped/accident? 20 mins		Where were you going? Home	
Where were you coming from? CHOP STEAK HOUSE		What time did you leave there? 2 mins before 12	
Could you feel the effects of alcohol/drugs in any way when you were stopped/in accident? NO			
Where have you been drinking? CHOP HOUSE / BLANCO TACO		With whom were you drinking? SELF	
What have you been drinking? BEER		Type: IPA	
Quantity: MORE THAN 12 OZ		Time you started drinking: 1600	
Time you finished: RIGHT BEFORE		Total # of drinks you had in the last hour before you were stopped/in accident? 2	
Did the liquor/drugs affect your driving to some slight degree? DON'T THINK SO			
Are there any mechanical defects with your vehicle? NO		Describe:	
Were you less able to control your vehicle because of the consumption of alcohol/drugs? NO. FINE			
(APC Case) How long had you been stopped before police arrived?			
(APC Case) Did you consume any alcohol/drugs after you stopped (or in the accident)?		Were you driving? <input type="checkbox"/> Yes <input type="checkbox"/> No	
On a scale of 1 to 10, 1 being sober and 10 being completely intoxicated, how would you rate your ability to drive the vehicle at the time you were stopped/in accident? 3			
Suspect's explanation of driving behavior: NONE			
Do you feel more sober or less sober now than at the time you were stopped? FEEL FINE			
Suspect's explanation of his performance on field sobriety tests: N/A			
Do you have any prior DUI arrests/convictions? 1a6 CONVICTION		Suspect's explanation of driver's license status: WACID	
Unusual comments by suspect:			
AGGRAVATED DUI			
If license is suspended, ask suspect "Did you know your license was suspended/revoked?" <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, suspect's response: _____			
How did you find out your license was suspended/revoked? _____		How long at current address? _____	
<input type="checkbox"/> Admin Per Se Suspension (28-1321/28-1385) <input type="checkbox"/> 2 or more Prior Convictions within 84 months <input type="checkbox"/> Passenger under 15 years of age <input type="checkbox"/> Ignition Interlock Device Requirement			
RELEASE/BOOKING			
Audio/Video documentation? <input type="checkbox"/> Digital Audio Recording <input type="checkbox"/> Video Recording <input type="checkbox"/> Body Camera Recording			
Suspect requests phone calls? <input type="checkbox"/> Yes <input type="checkbox"/> No		Start Time of Calls: _____ End Time of Calls: _____	
Booked <input type="checkbox"/> Yes <input type="checkbox"/> No Cite and release? <input type="checkbox"/> Yes <input type="checkbox"/> No Released To/Time: _____			

CPD Form 32-37

REV 03/2016



CHANDLER POLICE DEPARTMENT

General Offense Report

GO# CH 2018-81218



DUI

PAGE 3

GENERAL OFFENSE # 18-81218

CHANDLER POLICE DEPARTMENT FIELD SOBRIETY TEST WORKSHEET

OFFICER: Do not continue any of the tests until suspect indicates understanding of the instructions. Only answer questions or repeat the part not understood during the test.

<p>1 HORIZONTAL GAZE NYSTAGMUS Instructions to Suspect:</p> <p>(Officer: Have suspect remove glasses and hat if worn.)</p> <p><input checked="" type="checkbox"/> Are you wearing contacts? <input type="checkbox"/> Hard <input type="checkbox"/> Soft <input type="checkbox"/> No <input checked="" type="checkbox"/> Do you have any eye problems?</p> <p>I would like to check your eyes. Do not move your head and follow the stimulus with your eyes only. Follow the stimulus with your eyes until I tell you to stop.</p> <p><input checked="" type="checkbox"/> Do you understand? <input checked="" type="checkbox"/> Any reason you cannot do this?</p> <p><input type="checkbox"/> Equal Pupils <input checked="" type="checkbox"/> Equal Tracking</p> <p>Validated Clues:</p> <p><input checked="" type="checkbox"/> Left eye - Lack of Smooth Pursuit. <input checked="" type="checkbox"/> Right eye - Lack of Smooth Pursuit. <input checked="" type="checkbox"/> Left eye - Distinct and Sustained Nystagmus at Maximum Deviation. <input checked="" type="checkbox"/> Right eye - Distinct and Sustained Nystagmus at Maximum Deviation. <input checked="" type="checkbox"/> Left eye - Onset of Nystagmus Prior to 45 Degrees. <input checked="" type="checkbox"/> Right eye - Onset of Nystagmus Prior to 45 Degrees.</p> <p><input type="checkbox"/> Vertical Nystagmus</p> <p>Time: <u>0039</u> Badge Number: <u>696</u></p> <p>Sway:</p> <table border="0"> <tr> <td>Front-to-Back</td> <td>Side-to-Side</td> </tr> <tr> <td><input type="checkbox"/> None</td> <td><input type="checkbox"/> None</td> </tr> <tr> <td><input type="checkbox"/> Slight</td> <td><input type="checkbox"/> Slight</td> </tr> <tr> <td><input checked="" type="checkbox"/> Moderate</td> <td><input checked="" type="checkbox"/> Moderate</td> </tr> <tr> <td><input type="checkbox"/> Heavy</td> <td><input type="checkbox"/> Heavy</td> </tr> </table> <p><input type="checkbox"/> REFUSED</p>	Front-to-Back	Side-to-Side	<input type="checkbox"/> None	<input type="checkbox"/> None	<input type="checkbox"/> Slight	<input type="checkbox"/> Slight	<input checked="" type="checkbox"/> Moderate	<input checked="" type="checkbox"/> Moderate	<input type="checkbox"/> Heavy	<input type="checkbox"/> Heavy	<p>2 WALK AND TURN Instructions to Suspect:</p> <p>(Officer: If a suitable line such as a parking lot, is available it must be used.)</p> <p>Place your left foot on the (imaginary) line, then place your right foot in front of it touching your heel to your toe. Keep your arms at your side and remain in that position while I explain the rest of the instructions. Do you understand?</p> <p>(Officer: When the suspect assumes this position, continue with the instructions.)</p> <p>When I tell you to begin, take 9 heel-to-toe steps down the (imaginary) line, turn around and take 9 heel-to-toe steps back to where you started, staying on the (imaginary) line. When you turn, you must turn so that your lead foot remains on the (imaginary) line and your other foot takes a series of short steps to turn. Watch your feet, keep your hands at your sides, count out loud and don't stop walking until you finish both sets of 9 steps.</p> <p>(Officer: Demonstrate Walking Stage)</p> <p><input type="checkbox"/> Do you understand? <input type="checkbox"/> Any reason you cannot do this?</p> <p>Validated Clues:</p> <p>A <input type="checkbox"/> Cannot keep balance while listening to instructions. B <input type="checkbox"/> Starts before instructions are finished. C <input type="checkbox"/> Stops while walking to steady self. D <input type="checkbox"/> Does not touch heel-to-toe (More than 1/2 inch). E <input type="checkbox"/> Loses balance while walking (steps off line). F <input type="checkbox"/> Uses arms for balance. (More than 6 inches) G <input type="checkbox"/> Incorrect number of steps. H <input type="checkbox"/> Improper turn. *Use letters above next to step to indicate clues observed.</p>  <p><input type="checkbox"/> REFUSED</p>	<p>3 ONE LEG STAND Instructions to Suspect:</p> <p>(Officer: You must demonstrate and must count several counts for clarification. Do not continue until the suspect indicates that he understands.)</p> <p>Stand with your feet together and your arms down at your sides. When I tell you to, I want you to raise one foot six inches off the ground and keep that foot parallel to the ground. Keep your eyes on your raised foot and count out loud in the following manner: 1001, 1002, 1003 and so on until I tell you to stop.</p> <p>(Officer: Time for 30 seconds.)</p> <p><input type="checkbox"/> Do you understand? <input type="checkbox"/> Any reason you cannot do this?</p> <p>Validated Clues:</p> <p>A <input type="checkbox"/> Sways while balancing. B <input type="checkbox"/> Uses arms to balance. (More than 6 inches) C <input type="checkbox"/> Hopping. D <input type="checkbox"/> Puts foot down.</p> <p>Foot Used: <input type="checkbox"/> Right <input type="checkbox"/> Left</p> <p>1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30</p>  <p>X = Missed O = Said Twice / = Foot Down</p> <p>Sway:</p> <table border="0"> <tr> <td>Front-to-Back</td> <td>Side-to-Side</td> </tr> <tr> <td><input type="checkbox"/> None</td> <td><input type="checkbox"/> None</td> </tr> <tr> <td><input type="checkbox"/> Slight</td> <td><input type="checkbox"/> Slight</td> </tr> <tr> <td><input type="checkbox"/> Moderate</td> <td><input type="checkbox"/> Moderate</td> </tr> <tr> <td><input type="checkbox"/> Heavy</td> <td><input type="checkbox"/> Heavy</td> </tr> </table> <p><input type="checkbox"/> REFUSED</p>	Front-to-Back	Side-to-Side	<input type="checkbox"/> None	<input type="checkbox"/> None	<input type="checkbox"/> Slight	<input type="checkbox"/> Slight	<input type="checkbox"/> Moderate	<input type="checkbox"/> Moderate	<input type="checkbox"/> Heavy	<input type="checkbox"/> Heavy
Front-to-Back	Side-to-Side																					
<input type="checkbox"/> None	<input type="checkbox"/> None																					
<input type="checkbox"/> Slight	<input type="checkbox"/> Slight																					
<input checked="" type="checkbox"/> Moderate	<input checked="" type="checkbox"/> Moderate																					
<input type="checkbox"/> Heavy	<input type="checkbox"/> Heavy																					
Front-to-Back	Side-to-Side																					
<input type="checkbox"/> None	<input type="checkbox"/> None																					
<input type="checkbox"/> Slight	<input type="checkbox"/> Slight																					
<input type="checkbox"/> Moderate	<input type="checkbox"/> Moderate																					
<input type="checkbox"/> Heavy	<input type="checkbox"/> Heavy																					
<p>7 PRELIMINARY BREATH TEST (Add PBT Info to General Offense)</p> <p><input type="checkbox"/> Direct (Straw) <input type="checkbox"/> Passive (Ambient) <input type="checkbox"/> Manual Capture</p> <p>Results: _____</p> <p>Time: _____</p> <p>Operator _____ Badge # _____</p> <p>Temperature: _____</p> <p>PBT Serial #: _____</p> <p><input type="checkbox"/> REFUSED</p>																						

CPD Form 32-37

SFST'S LISTED ON THIS PAGE HAVE BEEN VALIDATED BY NHTSA

REV 03/2016



CHANDLER POLICE DEPARTMENT

General Offense Report

GO# CH 2018-81218

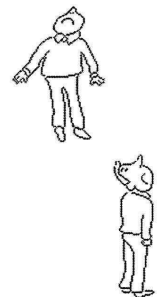
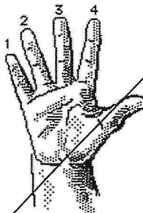

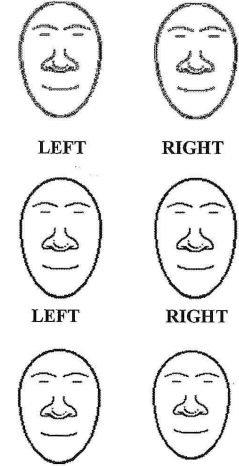
DUI

PAGE 4

GENERAL OFFENSE # 18-81218

Transport Officer# <u>A. Brull #1696</u> Transport to <input type="checkbox"/> Main <input type="checkbox"/> West <input type="checkbox"/> South <input checked="" type="checkbox"/> DUI Van <u>200 W CHICAGO</u> <small>(LOCATION)</small> Evidence in Vehicle? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes Explain)	MOTOR VEHICLE COLLISION Did the impaired driver commit a moving violation that was the major contributing factor in the collision? <input type="checkbox"/> Yes <input type="checkbox"/> No (If No, this section is complete) <input type="checkbox"/> Unknown (Explain in narrative) What was the moving violation? Approximate number of flares utilized: _____ Photos taken? <input type="checkbox"/> Yes <input type="checkbox"/> No Any other expenses by this Department? <input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, Describe in Narrative): Time of Collision? Approximate time from collision until police or fire arrival?
--	--

OFFICER: Do not continue any of the tests until suspect indicates understanding of the instructions. Only answer questions or repeat the part not understood during the test.

<p>4 ROMBERG MODIFIED Instructions to Suspect:</p> <p>(Officer: This position should be maintained for 30 seconds. You may require the suspect to recite the alphabet and/or backward count during the test.)</p> <p>Stand with your feet together and your arms down to your sides. When I tell you to, close your eyes, tilt your head back, then (count backwards OR say alphabet) aloud, and then open your eyes when you get done.</p> <p><input type="checkbox"/> Do you understand? <input type="checkbox"/> Any reason you cannot do this?</p> <p>Indicators: A <input type="checkbox"/> Required additional instructions prior to test. B <input type="checkbox"/> Required additional instructions during test. C <input type="checkbox"/> Opened eyes during test. D <input type="checkbox"/> Failed to keep feet together throughout. E <input type="checkbox"/> Failed to keep head tilted back. F <input type="checkbox"/> Swayed front-to-back or side-to-side. G <input type="checkbox"/> Error in alphabet/count.</p> <p>30 29 28 27 26 25 24 23 22 21 20 19 18 17 16 15 14 13 12 11 10 9 8 7 6 5 4 3 2 1 0</p>  <p>X = Missed O = Said Twice / = Opened Eyes</p> <p>Sway: Front-to-Back <input type="checkbox"/> None <input type="checkbox"/> Slight <input type="checkbox"/> Moderate <input type="checkbox"/> Heavy Side-to-Side <input type="checkbox"/> None <input type="checkbox"/> Slight <input type="checkbox"/> Moderate <input type="checkbox"/> Heavy</p> <p><input type="checkbox"/> REFUSED</p>	<p>5 FINGER COUNT Instructions to Suspect:</p> <p>Stand with your feet together and your arms down at your sides. When I tell you, on the hand I indicate, count out loud while touching the proper finger with your thumb starting with the little finger.</p> <p>You must count exactly this way: 1-2-3-4-4-3-2-1.</p> <p><input type="checkbox"/> Do you understand? <input type="checkbox"/> Any reason you cannot do this?</p> <p>Indicators: A <input type="checkbox"/> Required additional instructions prior to test. B <input type="checkbox"/> Required additional instructions during test. C <input type="checkbox"/> Used hand other than one designated. D <input type="checkbox"/> Missed touching all proper fingers. E <input type="checkbox"/> Counted incorrectly. F <input type="checkbox"/> Swayed from front-to-back or side-to-side.</p>   <p>Sway: Front-to-Back <input type="checkbox"/> None <input type="checkbox"/> Slight <input type="checkbox"/> Moderate <input type="checkbox"/> Heavy Side-to-Side <input type="checkbox"/> None <input type="checkbox"/> Slight <input type="checkbox"/> Moderate <input type="checkbox"/> Heavy</p> <p><input type="checkbox"/> REFUSED</p>	<p>6 FINGERTO NOSE Instructions to Suspect:</p> <p>Stand with your feet together and your arms down at your sides. Close your hands and point your index fingers down, palms forward. When I tell you, I would like you to close your eyes and tilt your head back. Using the finger I tell you, bring your finger up and touch the tip of your nose with the tip of your finger. Then return your arm back to your side without opening your eyes.</p> <p><input type="checkbox"/> Do you understand? <input type="checkbox"/> Any reason you cannot do this?</p> <p>Indicators: A <input type="checkbox"/> Required additional instructions prior to test. B <input type="checkbox"/> Required additional instructions during test. C <input type="checkbox"/> Opened eyes during test. D <input type="checkbox"/> Failed to keep heels together throughout test. E <input type="checkbox"/> Used hand other than the one designated. F <input type="checkbox"/> Missed nose with fingertip. G <input type="checkbox"/> Touched nose with other than fingertip. H <input type="checkbox"/> Swayed front-to-back or side-to-side. I <input type="checkbox"/> Failed to keep head tilted back throughout.</p>  <p>LEFT RIGHT LEFT RIGHT RIGHT LEFT</p> <p>Sway: Front-to-Back <input type="checkbox"/> None <input type="checkbox"/> Slight <input type="checkbox"/> Moderate <input type="checkbox"/> Heavy Side-to-Side <input type="checkbox"/> None <input type="checkbox"/> Slight <input type="checkbox"/> Moderate <input type="checkbox"/> Heavy</p> <p><input type="checkbox"/> REFUSED</p>
---	--	---

CPD Form 52.37

REV 03/2016



CHANDLER POLICE DEPARTMENT

General Offense Report

GO# CH 2018-81218

DUI

Related Attachment - Phlebotomist Statement

Attachment Description:

Reference Number:

General Offense # 18-81218

CHANDLER POLICE DEPARTMENT PHLEBOTOMY BLOOD DRAW REPORT/ RIGHT TO INDEPENDENT TEST

SUSPECT NAME: <u>STEVEN KEM</u>			DATE OF BIRTH: <u>[REDACTED] 7/2</u>		
REQUESTING AGENCY: <input checked="" type="checkbox"/> CHANDLER P.D. <input type="checkbox"/> OTHER: _____					
OFC# <u>696</u>	OFFICER NAME (PRINT) <u>A. BIRCC</u>		PATIENT/SUSPECT'S CONSENT TO BLOOD TEST: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		
PHLEB ID# <u>696</u>	PHLEBOTOMIST <u>A. BIRCC</u>		AGENCY <input type="checkbox"/> Chandler P.D. <input type="checkbox"/> Other: _____		
FIRST DRAW	DATE <u>7/4/18</u>	TIME (24 HR) <u>054</u>	DRAWN FROM BODY PART <input checked="" type="checkbox"/> RA <input type="checkbox"/> LA <input type="checkbox"/> RH <input type="checkbox"/> LH	SPECIAL EQUIPMENT: <u>21 GA BFLY</u>	BLOOD KIT EXP. (MO/YR) <u>10/2019</u>
SECOND DRAW	DATE	TIME (24 HR)	DRAWN FROM BODY PART <input type="checkbox"/> RA <input type="checkbox"/> LA <input type="checkbox"/> RH <input type="checkbox"/> LH	SPECIAL EQUIPMENT:	BLOOD KIT EXP. (MO/YR)
THIRD DRAW	DATE	TIME (24 HR)	DRAWN FROM BODY PART <input type="checkbox"/> RA <input type="checkbox"/> LA <input type="checkbox"/> RH <input type="checkbox"/> LH	SPECIAL EQUIPMENT:	BLOOD KIT EXP. (MO/YR)
Draw Purpose: <input checked="" type="checkbox"/> Impaired Driver <input type="checkbox"/> Source Draw <input type="checkbox"/> Criminal Investigations Bureau					
Cooperative: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Search Warrant: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Prescription Medications: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Aspirin or Steroid Use: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Location of Draw: <input type="checkbox"/> CPD Holding Areas <input checked="" type="checkbox"/> DUI Van <input type="checkbox"/> Field <input type="checkbox"/> Other _____					
Surface Used: <input checked="" type="checkbox"/> Phlebotomy Chair <input type="checkbox"/> Restraint Chair <input type="checkbox"/> Desk Top <input type="checkbox"/> Other _____					
Hand Disinfectant: <input checked="" type="checkbox"/> Waterless Sanitizer <input type="checkbox"/> Soap & Water <input type="checkbox"/> Other _____					
Protective Equipment: <input checked="" type="checkbox"/> Gloves <input type="checkbox"/> Lab Coat <input type="checkbox"/> Other _____					
Surface Disinfectant: <input type="checkbox"/> Quaternary Ammonium <input type="checkbox"/> 10% Bleach Solution <input type="checkbox"/> Other _____					
Disinfectant Application: <input type="checkbox"/> Before <input checked="" type="checkbox"/> After Phlebotomy Draw					
Venipuncture Antiseptic: <input checked="" type="checkbox"/> Benzalkonium Chloride <input type="checkbox"/> Iodine <input type="checkbox"/> Other _____					
Blood Tubes: <input checked="" type="checkbox"/> Inverted 10 Times To Mix Anti Coagulant					
Blood Kit Sealed By: <input type="checkbox"/> Arresting Officer <input checked="" type="checkbox"/> Phlebotomist					
Unsuccessful Attempts: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, explain:			Additional Comments/Observations:		
<u>NO OBSERVED / REPORTED</u>			<u>COMPLICATIONS</u>		

Witness Signature _____ ID Number: _____

Phlebotomist Signature [Signature] ID Number: 696

I understand that I have the right to an independent test or tests by physician or other qualified person of my own choosing at my own expense, to determine the alcohol or drug content of my blood. An independent test is separate from the test(s) chosen by the law enforcement officer. I understand that if I am released by the officer and I want an independent test, I must obtain the test or tests on my own. If I am not released, I will be given a reasonable opportunity to make arrangements for an independent test, at my own expense, at the jail facility I will be booked into. I understand that a portion of the law enforcement blood sample will be available for my independent testing.

Entiendo que tengo derecho a una prueba independiente o pruebas por el médico o otra persona calificada de mi elección por mi propia cuenta, para determinar el contenido de alcohol o drogas de mi sangre. Una prueba independiente está separada de la selección elegida por el oficial de la policía. Entiendo que si yo soy liberado por el oficial y quiero una prueba independiente, debo obtener la prueba o pruebas por mi cuenta. Si no estoy liberado, dará una oportunidad razonable de hacer arreglos para una prueba independiente, por mi propia cuenta, en las instalaciones de la cárcel en que reseré. Entiendo que una porción de la muestra de sangre aplicación de la ley estará disponible para mi prueba independiente si así lo solicita.

Arrestee's Signature [Signature] del/la Arrestado/a _____ Date/Fecha _____

If the suspect is to be booked, complete this section

I request an independent test/Solicito una prueba independiente _____ I do not want an independent test/no deseo una prueba independiente _____

If you refuse to sign it will be assumed that you do not want an independent test/Si usted se niega a firmar se asumirá que usted no desea una prueba independiente.

I hereby certify that I have read the suspect his/her right to an independent test or test(s) at his/her own expense. I further certify that I have witnessed his/her answers and signatures.

Advising Officer Name/Badge: _____ Date/Time: _____

Black Ink - Records

Blue Ink - Phlebotomist

Red Ink - Suspect

Revised 3/2016

FOR PD DRAWS ONLY



CHANDLER POLICE DEPARTMENT

General Offense Report

GO# CH 2018-81218

DUI

Related Attachment - Vehicle Tow Report

Attachment Description:

Reference Number:

CHANDLER POLICE DEPARTMENT
250 E CHICAGO STREET
CHANDLER, ARIZONA 85225-5525
(480) 782-4000



VEHICLE REPORT

30 DAY IMPOUND

ORIGINAL REPORT SUPPLEMENTAL REPORT

DATE/TIME REPORTED: MONTH 7 DAY 4 YEAR 2018 TIME 0021

INCIDENT TYPE: ABVEH COLLISION DUI EXTREME / AGGRAVATED DUI
 GTAR (CPD) GTAROA TRAFFIC OFFENSE OTHER

GO # 18-81218

LOCATION: AMBROSIA / YELLOWSTONE GRID: 012 CONNECTING OR# 7. BRADSHAW 1196
 OFFICER / BADGE

PERSON CODES: R/O = REGISTERED OWNER, D = DRIVER, R/P = REPORTING/RESPONSIBLE PARTY, L = LIEN HOLDER

PERSON CODE	NAME	Race-Sex	DOB	ADDRESS	PHONE
RO	SANTAN FORD			1429 E. MONTPELIER LOOP GILBERT AZ 85297	

OWNER NOTIFIED BY: TIME GTA CONFIRMED BY: NOTIFICATION LETTER SENT BY:

COLOR	MAKE	YEAR	STYLE	PLATE	STATE	EXPIRE	VIN
GRY	FORD	2018	12PU	CFY3428	AZ	3/15/19	

ROTATION/CONTRACT TOW
 VEHICLE LEFT PARKED/SECURED
 VEHICLE RELEASED TO RESPONSIBLE PARTY
 VEHICLE CONTENTS RELEASED

Person Code: X Waiver of liability: "I assume all responsibility for the vehicle and will not hold the City of Chandler responsible" (signature)

TOW CALLED 0103 TOW ARRIVED 0132

TOWING COMPANY: ALL CITY TOWING 1600 N. DELAWARE ADDRESS: CHANDLER CO AZ 480 9119722 PHONE: TOW DRIVER SIGNATURE: SCOTT ST

TIRE CONDITION	DAMAGE	ACCESSORIES
LF <input checked="" type="checkbox"/> LR <input checked="" type="checkbox"/> RF <input checked="" type="checkbox"/> RR <input checked="" type="checkbox"/> SPARE <input checked="" type="checkbox"/>	MINOR SCRATCHES	YES NO UNK <input checked="" type="checkbox"/> HUB CAPS # <input checked="" type="checkbox"/> MOTOR <input checked="" type="checkbox"/> STEREO <input checked="" type="checkbox"/> KEYS <input checked="" type="checkbox"/> CUSTOM WHEELS <input checked="" type="checkbox"/> JACK

ODOMETER: 3522

Notice of Impound: I have been given a copy of the Notice of Impound, explaining my rights and the process surrounding the vehicle's recovery. To request a hearing, call 480-782-4109. All vehicle releases are processed at 251 N Desert Breeze Blvd, Chandler 85226

Aviso de Incautación: He recibido una copia de la Notificación de Incautación, explicando mis derechos y el proceso para la recuperación del vehículo. Los vehículos son liberados con previa cita, en 251 N Desert Breeze Blvd, Chandler, 85226. Pida una cita al 480-782-4109.

DRIVER'S SIGNATURE: OFFICER SERVING IMPOUND NOTICE: IMPOUND RELEASE DATE:

Chain of Custody

Item Number	Print Name	Date	Time	Signature
From:				
To:				
From:				
To:				
Property Lot #				For Custodian Use Only:

INVENTORY: CFM BAG, CHARGER CORD, MISC PAPERS, SUNGLASSES, MISC CHANGE POLE IN BED, CHILD CAR SEAT

INVENTORY OFFICER / BADGE: T. BRADSHAW 1196

30 Day Impound: CPD Records (Original); Impound Unit (YELLOW); Registered Owner/ Driver (BLUE); Tow Driver/Company (GREEN)
 Evidence: CPD Records (Original); CPD Property (YELLOW); Registered Owner/ Driver (BLUE); Tow Driver/Company (GREEN)
 Standard: CPD Records (Original); Officer Copy (YELLOW); Registered Owner/ Driver (BLUE); Tow Driver/Company (GREEN)

#7379



CHANDLER POLICE DEPARTMENT

General Offense Report

GO# CH 2018-81218

DUI

***** END OF HARDCOPY *****