

LAST: KELLY				FIRST: MATTHEW				MIDDLE: JOHN				<input type="checkbox"/> FELONY DUI <input checked="" type="checkbox"/> MISDEMEANOR DUI <input type="checkbox"/> DUI DRUGS <input type="checkbox"/> UNDERAGE DUI <input type="checkbox"/>					
RACE	SEX	WEIGHT	HEIGHT	EYES	HAIR	DATE OF BIRTH				SOCIAL SECURITY NUMBER							
W	M	150	509	BLU	BRO	1 7 4											
RESIDENTIAL ADDRESS:												RES. PHONE NUMBER					
EMPLOYER: KELLY MCCOY PLC						BUSINESS ADDRESS:						DR. # 2011-02240356					
DRIVER LICENSE #: D0101						STATE: AZ		FORCE USED: 30		SUPERVISOR #:		ALIAS:		DUI CITATION NUMBER: 14007015			
REGISTERED OWNER: SAME AS DRIVER						ADDRESS: (STREET, APT., CITY, STATE, ZIP)						ARREST NUMBER:					
VEH	LICENSE PLATE # CUALAW				YEAR: 12	STATE: AZ	VEHICLE MAKE: TOYT	STYLE: 4DSW	MODEL: SEQUOIA	YEAR: 2006	COLOR: GOLD		ARREST GRID:				
	DISPOSITION OF VEHICLE: <input checked="" type="checkbox"/> PARKED <input type="checkbox"/> TOWED				TOW / IMPOUND COMPANY:		LOCATION:				ARREST DATE: 12/28/11						
	TIME DRIVING ENDED: 2121				ARREST TIME: 2137												
LOCATION OF OCCURRENCE: 3RD ST AND PALM LANE						LOCATION OF ARREST: 1411 N 3RD ST											
MIRANDA WARNINGS GIVEN BY J. LAWLER #6474						LOCATION: 1600 E HIGHLAND				TIME: 2159		SUBJECT'S RESPONSE: YES					
IMPLIED CONSENT EXPLAINED BY J. LAWLER #6474						LOCATION: 1600 E HIGHLAND				TIME: 2159		SUBJECT'S RESPONSE: <input checked="" type="checkbox"/> SUBMITTED TO TESTS YES					
INTERVIEW CONDUCTED BY J. LAWLER #6474						LOCATION: 1600 E HIGHLAND				START TIME: 2211		<input type="checkbox"/> UNABLE TO CONDUCT INTERVIEW <input type="checkbox"/> SUBJECT REFUSED INTERVIEW					
WERE YOU OPERATING THE VEHICLE? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO																	
WHERE WERE YOU GOING? MY OFFICE							WHERE WERE YOU COMING FROM? A FRIEND'S OFFICER										
WHAT TIME DID YOU LEAVE? 45 MIN AGO.																	
WHAT TIME IS IT NOW? I HAVE NO IDEA						ACTUAL TIME: 1012 <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM		WHAT IS THE DATE TODAY? DEC 28TH				ACTUAL DATE: 12/28/11					
WHAT DAY OF THE WEEK IS IT? WEDNESDAY						ACTUAL DAY: Wednesday		WHAT HAVE YOU BEEN DRINKING? NOTHING									
HOW MUCH DID YOU DRINK? (NOT ASKED, D' DENIES DRINKING)							WHERE WERE YOU DRINKING? (NOT ASKED, D' DENIES DRINKING)										
WHAT TIME DID YOU START DRINKING? (NOT ASKED, D' DENIES DRINKING)							WHAT TIME DID YOU STOP DRINKING? (NOT ASKED, D' DENIES DRINKING)										
WERE YOU INVOLVED IN A COLLISION? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (IF YES, WHERE?)										THE TIME IS AT WHAT		<input type="checkbox"/> AM <input type="checkbox"/> PM					
HAVE YOU BEEN DRINKING SINCE THE COLLISION? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (ASK IN COLLISION SITUATION ONLY) (IF YES, WHAT AND HOW MUCH?) N/A																	
WHERE WERE YOU CONTACTED BY THE OFFICER? MY OFFICE																	
ARE YOU ILL? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (IF YES, DESCRIBE ILLNESS)							DO YOU HAVE A FEVER? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (IF YES, EXPLAIN)										
ARE YOU HURT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (IF YES, DESCRIBE)							DID YOU HIT YOUR HEAD? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (IF YES, DESCRIBE HOW INJURY OCCURRED)										
HAVE YOU BEEN TO <input type="checkbox"/> DOCTOR OR <input type="checkbox"/> DENTIST IN THE LAST TWO WEEKS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (IF YES, WHEN, AND WHAT WAS THE REASON FOR THE VISIT?)																	
NATURE OF ON GOING TREATMENT: N/A								HAVE YOU TAKEN ANY MEDICATION / DRUG IN THE PAST 24 HOURS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF YES, DATE TAKEN: 122811 TIME TAKEN: 615 <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM									
TYPE OF MEDICATION / DRUG (OR NAME):								DO YOU HAVE DIABETES? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		DO YOU TAKE INSULIN FOR ANY REASON? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (IF YES, WHY?)							
DO YOU HAVE ANY ALLERGIES? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (IF YES, WHAT ARE THEY?)																	
ARE YOUR ALLERGIES BOTHERING YOU NOW? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (IF YES, IN WHAT WAY?) N/A																	
DO YOU HAVE ANY PHYSICAL DISABILITIES? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (IF YES, DESCRIBE)										WHEN DID YOU LAST EAT? DATE: 122811 TIME: 100 <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM							
WHAT DID YOU EAT? A REALLY BAD RUBEN								HOW MUCH SLEEP HAVE YOU HAD IN THE LAST 24 HOURS? 6 HOURS									
DID YOU FEEL IMPAIRED IN ANY WAY WHILE DRIVING? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO																	
FOR THIS NEXT QUESTION I AM NOT ASKING YOU HOW MUCH YOU HAVE HAD TO DRINK. ON A SCALE OF ZERO TO TEN, ZERO BEING COMPLETELY SOBER AND TEN BEING COMPLETELY FALLING DOWN DRUNK. HOW WOULD YOU RATE YOURSELF AT THE TIME YOU WERE DRIVING? 0 1 2 3 4 5 6 7 8 9 10 (CIRCLE SUBJECT'S RESPONSE)																	

PUBLIC RECORDS  
Released pursuant to  
A.R.S. § 39-141, Et. Seq.  
To:

# SUBJECT INTERVIEW CONTINUED

DO YOU HAVE A PRIOR DUI CONVICTION? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	(IF "YES") IN WHAT STATE(S)?	DATE(S):
IS YOUR LICENSE SUSPENDED / REVOKED / CANCELED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		(IF "YES") HOW DO YOU KNOW?
IF SUSPENDED / REVOKED / CANCELED, IN WHAT STATE(S)?	HAB YOUR LICENSE BEEN SUSPENDED / REVOKED / CANCELED IN THE PAST? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF "YES", HAVE YOU PAID THE REINSTATEMENT FEE TO THE MOTOR VEHICLE DEPARTMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	

UNUSUAL COMMENTS / OBSERVATIONS OF SUBJECT:

INTERVIEW STOP TIME: 2214	DATE: 122811	WAS THERE ANY EVIDENCE OF INJURY / INJURY / DAMAGE? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (IF YES, EXPLAIN)
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## CHEMICAL TEST EVIDENCE

SUBJECT ADVISED OF RIGHT TO ARRANGE AND PAY FOR AN INDEPENDENT CHEMICAL TEST BY OFFICER J. LAWLER #6474		SUBJECT'S RESPONSE: ADVISED	BACA FORM COMPLETED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
TYPE OF TEST CONDUCTED <input type="checkbox"/> BREATH <input type="checkbox"/> URINE <input checked="" type="checkbox"/> BLOOD	"BACA" (BLOOD) SAMPLE TAKEN <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	WAS THERE ANY REASON TO BELIEVE THE INSTRUMENT WAS OPERATING INCORRECTLY? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (IF YES, EXPLAIN) N/A	
DRE CONDUCTED? BY OFFICER: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	SEARCH WARRANT OBTAINED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	COURT OF ISSUE: N/A	SEARCH WARRANT AFFIANT: N/A
BLOOD DRAW CONDUCTED? BY: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	TIME OF DRAW: Lawler, James J 2207 RIGHT A/C ETS	WITNESSED BY: Megillis, Michael D	
PAGE / MVD CHECK: No prior DUI's found	PRIOR DUI CONVICTION DATE(S):	DRIVER LICENSE CHECK RESULTS: Valid	OFFICER / CLERK'S SERIAL #: 5599

## IN COLLISION SITUATIONS COMPLETE THE FOLLOWING

☐ COLLISION REPORT COMPLETED

<input type="checkbox"/> FIRE DEPARTMENT	<input type="checkbox"/> TREATED AND RELEASED	<input type="checkbox"/> ADMITTED TO HOSPITAL	<input type="checkbox"/> SERIOUS INJURY	<input type="checkbox"/> FATALITY	<input type="checkbox"/> HIT AND RUN
<input type="checkbox"/> VICTIM'S RIGHTS INFORMATION PROVIDED TO VICTIM(S) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			<input type="checkbox"/> SUSPECT'S COURT DATE PROVIDED TO VICTIM(S)		

## OFFICER'S OBSERVATIONS OF SUBJECT'S PHYSICAL CONDITION

BY OFFICER J. LAWLER #6474

BREATH (ODOR OF INTOXICATING LIQUOR)	<input type="checkbox"/> APPARENTLY NONE	<input type="checkbox"/> FAINT	<input checked="" type="checkbox"/> MODERATE	<input type="checkbox"/> STRONG	Moderate
COLOR OF FACE	<input type="checkbox"/> APPARENTLY NORMAL	<input checked="" type="checkbox"/> FLUSHED	<input type="checkbox"/> PALE	<input type="checkbox"/> OTHER (DESCRIBE)	Flushed
EYES	<input type="checkbox"/> APPARENTLY NORMAL	<input checked="" type="checkbox"/> WATERY	<input checked="" type="checkbox"/> BLOODSHOT	<input type="checkbox"/> OTHER (DESCRIBE)	Watery & bloodshot
CLOTHING / FOOTWEAR	DESCRIBE:				POLO SHIRT, SLACKS
CLOTHING CONDITION	<input checked="" type="checkbox"/> CLEAN	<input type="checkbox"/> BLOODY	<input type="checkbox"/> URINE	<input type="checkbox"/> VOMIT	<input checked="" type="checkbox"/> ORDERLY
ATTITUDE	<input checked="" type="checkbox"/> POLITE	<input checked="" type="checkbox"/> COOPERATIVE	<input type="checkbox"/> UNCOOPERATIVE	<input type="checkbox"/> ANTAGONISTIC	<input type="checkbox"/> ARGUMENTATIVE
UNUSUAL ACTIONS	<input type="checkbox"/> PROFANITY	<input type="checkbox"/> BELCHING	<input type="checkbox"/> URINATING ON SELF	<input type="checkbox"/> HICCUPPING	<input checked="" type="checkbox"/> SLURRED SPEECH

## PHONE CALLS / ATTORNEY

DID THE SUBJECT REQUEST AN ATTORNEY AT ANY TIME? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF YES, TIME:		DOCUMENT THE REQUEST IN THE NARRATIVE (BE SPECIFIC)
ASK THE ARRESTED PERSON IF THEY WANT TO MAKE A PHONE CALL <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO TIME:		DID THE SUBJECT ASK AT ANY TIME TO MAKE A PHONE CALL <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
NUMBERS DIALED	TIME	OFFICER'S INITIALS
( ) -		
IF RESPONSE IS UNUSUAL, ENTER IT HERE (BE SPECIFIC): D' HAD UN LIMITED ACCESS TO PERSONAL PHONE		
( ) -		
( ) -		
( ) -		

## WITNESS SECTION

LAST NAME	FIRST NAME	M.I.	ORIGIN	SEX	D.O.B.	ADDRESS (INCLUDE ZIP CODE)	PHONE #
							H ( ) -
							W ( ) -
							H ( ) -
							W ( ) -
							H ( ) -
							W ( ) -

## VICTIM INFORMATION

LAST NAME	FIRST NAME	M.I.	ORIGIN	SEX	D.O.B.	ADDRESS (INCLUDE ZIP CODE)	PHONE #
							H ( ) -
							W ( ) -
							H ( ) -
							W ( ) -
							H ( ) -
							W ( ) -



ADOT

40-5807 R1206 www.azdot.gov

**Motor  
Vehicle  
Division**Mail Drop 533M  
Driver Responsibility  
Motor Vehicle Division  
PO Box 21 00  
Phoenix AZ 85001-2100**ADMIN PER SE/IMPLIED CONSENT AFFIDAVIT**LE or DR Case Number 2011-02240356Complaint Numbers Issued 14007015

Charges: ☒ ARS 28-1381 ☒ 28-1382 ☐ 28-1383 ☐ 4-244.33 ☐ 13-1201 ☐ Yes ☐ No While transporting hazardous material? (ARS 28-1 0 1)  
☐ 13-1204 ☐ Other Title 13, Chapter 11 charge: \_\_\_\_\_ ☐ Yes ☐ No While operating a commercial motor vehicle?

Driver Name (first, middle, last, suffix) <b>MATTHEW JOHN KELLY</b>	Date of Birth <b>74</b>	Driver License Number <b>D010</b>	Class <b>D</b>	State <b>AZ</b>
Address		City	State	Zip

On (date) 12/28/11, at (time) 2137, at (location) 1411 N 3RD ST

☐ I had probable cause to believe that the person named, caused or was cited for an accident resulting in death or serious physical injury while driving a motor vehicle. Citation Number \_\_\_\_\_ (If none issued, state probable cause on lines below)

☒ I had reasonable grounds to believe the person named was driving or in actual physical control of a motor vehicle while under the influence of intoxicating liquor and/or drugs, and I placed the named person under arrest therefor.

Among the facts leading to that belief were:

**SPEED, FAIL TO DRIVE IN ONE LANE, ABRUPT STOP, Odor of alcohol, BS/watery eyes, REFUSED ALL TESTS**

☒ The admonitions on the back of the original copy were read to the person. Officer Initials: \_\_\_\_\_  
☐ The admonitions were not read because the person was either unconscious or incapable of refusal.  
☒ The person submitted to ☐ breath ☒ blood tests and the results indicated an alcohol concentration of: \_\_\_\_\_ ☒ results not available  
☐ The person refused to take or did not complete the tests in the following manner:

☐ Yes ☒ No Did the person cause serious physical injury or death as defined in ARS 13-105 during this incident?

I certify, pursuant to ARS 28-1561, that the above is true and correct. I request that any hearing be held in Maricopa County.

Law Enforcement Officer (print name) <b>McGillis, Michael D Gardner, Eric</b>	Badge Number <b>5599 9067</b>	Signature	
Agency <b>Phoenix Police Department</b>	ORI Number <b>AZ0072300</b>	Station <b>T700</b>	
Agency Address <b>620 W. Washington Street</b>	City <b>Phoenix</b>	State <b>Az</b>	Zip <b>85003</b>
Test Operator (print name) <b>Lawler, James J</b>	Badge Number <b>6474</b>	Signature	

**ORDER OF SUSPENSION**

Date Served

**12/28/11**

Time Served

**2216**

Please see reverse side to request a Summary Review or Hearing.

☐ Pursuant to ARS 28-1321, your Arizona driver license/permit or nonresident driving privilege is suspended effective 15 days from Date Served. The suspension is for 12 months, or 2 years if there is a prior implied consent refusal, within the last 84 months, on your record. This order is final unless a hearing is requested in writing and received within 15 days from Date Served. This action is a result of your failure to successfully complete or refusal to submit to tests to determine alcohol concentration or drug content. This suspension will not end until all reinstatement requirements are met including completion of alcohol or drug screening.

☒ Pursuant to ARS 28-1385, your Arizona driver license/permit or nonresident driving privilege is suspended for not less than 90 consecutive days effective 15 days from Date Served. If a review of your driver record indicates that you have completed alcohol or drug screening and are eligible for a 60-day restricted driving permit, one will automatically be mailed to your address of record within 45 days from Date Served. This order is final unless a summary review or hearing is requested in writing and received within 15 days from Date Served. This suspension is a result of tests to which you submitted. This suspension will not end until all reinstatement requirements are met.

**SURRENDER OF ARIZONA DRIVER LICENSE**

Pursuant to ARS 28-1 321 and 28-1 385, the law enforcement officer must require the surrender of all Arizona driver licenses or permits in the person's possession. If no license or permit is attached, state reason: ☐ Lost ☐ Destroyed ☐ Nonresident ☐ Other: \_\_\_\_\_

**TEMPORARY DRIVER PERMIT**

This entire form will serve as a temporary driver permit that will expire 15 days from the Date Served. However, if you request a summary review or hearing, then this permit will remain valid until the summary review or hearing decision has been made. If your Arizona driver license/permit is currently suspended or revoked, this permit does not authorize you to operate a motor vehicle.

Sex <b>M</b>	Weight <b>150</b>	Height <b>509</b>	Eyes <b>BLU</b>	Hair <b>BRO</b>	Class <b>D</b>	Restrictions <b>A / Corrective Lenses</b>
Permit Not Issued Because					Licensee Signature <b>Served</b>	

Original - Motor Vehicle Division

Pink and Yellow - Licensee

Blue - Law Enforcement Agency



ADOT

40-5607 R1208 www.azdot.gov

**Motor  
Vehicle  
Division**Mail Drop 533M  
Driver Responsibility  
Motor Vehicle Division  
PO Box 21 00  
Phoenix AZ 85001-2100**ADMIN PER SE/IMPLIED CONSENT AFFIDAVIT**LE or DR Case Number 2011-02240356Complaint Numbers Issued 14007015Charges: ☒ ARS 28-1381 ☒ 28-1382 ☐ 28-1383 ☐ 4-244.33 ☐ 13-1201  
☐ 13-1204 ☐ Other Title 13, Chapter 11 charge: \_\_\_\_\_☐ Yes ☐ No While transporting hazardous material? (ARS 28-1 0 1)☐ Yes ☐ No While operating a commercial motor vehicle?

Driver Name (first, middle, last, suffix)	Date of Birth	Driver License Number	Class	State
MATTHEW JOHN KELLY	1/74	D0101	D	AZ
Address		City	State	Zip

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Law Enforcement Officer (print name)	Badge Number	Signature
Megill, Michael D Gardner, Eric	5599 9067	<u>[Signature]</u>
Agency	ORI Number	Station
Phoenix Police Department	AZ0072300	T700
Agency Address	City	State Zip
620 W. Washington Street	Phoenix	Az 85003
Test Operator (print name)	Badge Number	Signature
Lawler, James J	56474	<u>[Signature]</u>

**ORDER OF SUSPENSION**

Date Served

12/28/11

Time Served

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This entire form will serve as a temporary driver permit that will expire 15 days from the Date Served. However, if you request a summary review or hearing, then this permit will remain valid until the summary review or hearing decision has been made. If your Arizona driver license/permit is currently suspended or revoked, this permit does not authorize you to operate a motor vehicle.

Sex	Weight	Height	Eyes	Hair	Class	Restrictions
M	150	509	BLU	BRO	D	A / Corrective Lenses
Permit Not Issued Because					Licensee Signature	
					Served	

Original - Motor Vehicle Division

Pink and Yellow - Licensee

Blue - Law Enforcement Agency



DR# 2011-02240356

# City of Phoenix

## CONSENT FORM

Date: 12/28/11 Time: 2159 am / pm

Name of subject (printed): MATTHEW KELLY

I HAVE GRANTED PERMISSION FOR BLOOD SAMPLES TO  
BE TAKEN.

Signature of subject: ☒ [Signature]

### BLOOD COLLECTION REPORT

Subject's name: MATTHEW KELLY

Subject's address: \_\_\_\_\_

Date & time of arrest: 12/28/11 / 2137

Place of blood collection: 1600 E HIGHLAND

Date: 12/28/11 Time: 2201 am / pm

I HEREBY CERTIFY THAT I DREW BLOOD SAMPLES FROM  
THE ABOVE-NAMED PERSON.

Signed (specimen collector): [Signature]

Date: 12/28/11 Time: 2200 am / pm

I HEREBY CERTIFY THAT I HAVE WITNESSED THE ACTUAL  
WITHDRAWAL OF BLOOD FROM THE ABOVE SUBJECT BY  
THE PERSON WHOSE SIGNATURE APPEARS ABOVE.

Signed (witness): [Signature]

Date: 12/28/11 Time: 2200 am / pm



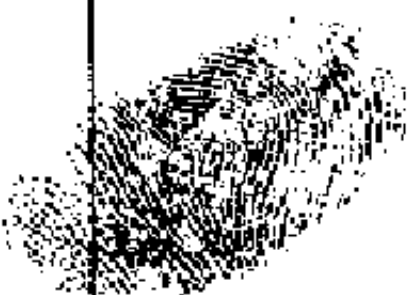
# DETAILS OF ARREST

SUBJECT'S NAME <b>KELLY, MATTHEW JOHN</b>		ORIGIN <b>W</b>	SEX <b>M</b>	D.O.B. <b>74</b>
FIELD SOBRIETY TEST WORKSHEET				DR. NUMBER <b>2011-02240356</b>
1. INSTRUCTIONS TO SUBJECT ARE PROVIDED AS GUIDELINES TO ENABLE THE OFFICER TO BE CONSISTENT IN ADMINISTERING EACH OF THE FST'S. 2. DOCUMENTATION AIDS ARE PROVIDED TO ASSIST THE OFFICER IN RECORDING THE BEHAVIOR AND ACTIONS OF A SUBJECT DURING THE FST'S.				
ASK SUBJECT: TO LIKE YOU TO PERFORM SOME PHYSICAL TESTS- IS THERE ANY REASON WHY YOU CANNOT PERFORM THE TESTS? <input type="checkbox"/> YES <input type="checkbox"/> NO (IF YES, ENTER RESPONSE. BE SPECIFIC.) <b>Refused All FST's</b>				
EXTERNAL CONDITIONS AT SCENE OF ARREST (CHECK ALL THAT APPLY)				
WEATHER: <input type="checkbox"/> CLEAR <input type="checkbox"/> CLOUDY <input type="checkbox"/> RAINING <input type="checkbox"/> WINDY <input type="checkbox"/> OTHER (EXPLAIN) _____ LIGHT CONDITIONS: <input type="checkbox"/> DAY TIME <input type="checkbox"/> NIGHT TIME <input type="checkbox"/> NO LIGHTS <input type="checkbox"/> STREET LIGHTS <input type="checkbox"/> VEHICLE LIGHTS <input type="checkbox"/> FLASHLIGHT <input type="checkbox"/> OTHER (EXPLAIN) _____ TYPE OF SURFACE USED FOR FIELD SOBRIETY TESTS: <input type="checkbox"/> LEVEL <input type="checkbox"/> CEMENT <input type="checkbox"/> DIRT <input type="checkbox"/> STREET <input type="checkbox"/> WET <input type="checkbox"/> DRY <input type="checkbox"/> PARKING LOT <input type="checkbox"/> UNEVEN <input type="checkbox"/> ASPHALT <input type="checkbox"/> GRAVEL <input type="checkbox"/> SIDEWALK <input type="checkbox"/> OTHER (EXPLAIN): _____ FOOTWEAR: _____				
<b>HORIZONTAL GAZE NYSTAGMUS</b>  QUESTIONS FOR SUBJECT: HAVE YOU HAD ANY HEAD OR EYE INJURIES? DO YOU WEAR CONTACT LENSES? (IF YES ENSURE THAT THEY ARE PROPERLY FITTED) <input type="checkbox"/> HARD <input type="checkbox"/> SOFT (IF SUBJECT IS WEARING EYE GLASSES, HAVE THEM REMOVED)  INSTRUCTIONS TO SUBJECT: (HOLDING STIMULUS 12" - 16" IN FRONT OF FACE SLIGHTLY ABOVE EYE LEVEL) CAN YOU SEE THE TIP OF THIS? WHAT I AM GOING TO DO IS MOVE THIS FROM SIDE TO SIDE. WHAT I WANT YOU TO DO IS FOLLOW THIS WITH YOUR EYES ONLY, KEEPING YOUR HEAD STILL. STAY FOCUSED ON THE ENTIRE TIME. DO YOU UNDERSTAND THE INSTRUCTIONS? DO YOU HAVE ANY QUESTIONS? <input type="checkbox"/> Equal in both eyes <input type="checkbox"/> Equal pupil size  <b>HGN CUES</b> <input type="checkbox"/> Left eye does not follow smoothly <input type="checkbox"/> Right eye does not follow smoothly <input type="checkbox"/> Distinct and sustained nystagmus at maximum deviation of the left eye <input type="checkbox"/> Distinct and sustained nystagmus at maximum deviation of the right eye <input type="checkbox"/> Onset of nystagmus prior to 45 degrees in left eye <input type="checkbox"/> Onset of nystagmus prior to 45 degrees in right eye  <b>VGN</b> <input type="checkbox"/> Vertical Gaze Nystagmus present <input type="checkbox"/> This FST not administered for subject's safety <input type="checkbox"/> This FST not administered for officer's safety  Time: _____ Name: _____ Serial #: _____ A certified NHTN technician	<b>WALK AND TURN</b>  INSTRUCTIONS TO SUBJECT: PLACE YOUR LEFT FOOT ON THE (IMAGINARY) LINE. NOW PLACE YOUR RIGHT FOOT ON THE LINE DIRECTLY IN FRONT OF YOUR LEFT FOOT TOUCHING HEEL TO TOE. PLACE YOUR ARMS DOWN AT YOUR SIDES.  MAINTAIN THAT POSITION WHILE I EXPLAIN THE REST OF THE INSTRUCTIONS. DO YOU UNDERSTAND? WHEN I TELL YOU TO BEGIN AND NOT BEFORE THEN TAKE 8 HEEL-TO-TOE STEPS DOWN THE (IMAGINARY) LINE. AFTER THE 8TH STEP LEAVE YOUR FRONT FOOT ON THE (IMAGINARY) LINE WITH THE OTHER FOOT TAKE SMALL STEPS AROUND AND TAKE 8 MORE HEEL-TO-TOE STEPS BACK DOWN THE LINE. KEEP YOUR ARMS DOWN TO YOUR SIDES. WATCH YOUR FEET AT ALL TIMES. AND COUNT YOUR STEPS ALOUD. ONCE YOU START DO NOT STOP UNTIL YOU HAVE COMPLETED THE TEST.  DO YOU UNDERSTAND THE INSTRUCTIONS? DO YOU HAVE ANY QUESTIONS?  <input type="checkbox"/> Cannot keep balance while listening to instructions <input type="checkbox"/> Starts before instructions are finished <input type="checkbox"/> Stops while walking to steady self <input type="checkbox"/> Does not touch heel to toe (Misses by at least 1/2 inch) <input type="checkbox"/> Loses balance while walking to steady self (That is steps off line) <input type="checkbox"/> Uses arms for balance (8" or more from side) <input type="checkbox"/> Improper turn <input type="checkbox"/> Incorrect number of steps <input type="checkbox"/> Cannot do test (Steps on line three or more times)  <input type="checkbox"/> This FST not administered for subject's safety <input type="checkbox"/> This FST not administered for officer's safety <input type="checkbox"/> Actual line used	<b>ONE LEG STAND</b>  INSTRUCTIONS TO SUBJECT: STAND WITH YOUR FEET TOGETHER AND YOUR ARMS DOWN AT YOUR SIDES. REMAIN IN THAT POSITION UNTIL I TELL YOU OTHERWISE. DO YOU UNDERSTAND?  WHEN I TELL YOU TO BEGIN AND NOT BEFORE THEN I WANT YOU TO RAISE ONE LEG OFF THE GROUND APPROXIMATELY 6" AND MAINTAIN THAT POSITION. KEEP BOTH LEGS STRAIGHT. POINT YOUR TOES FORWARD SO THAT YOUR FOOT IS PARALLEL TO THE GROUND. LOOK AT YOUR RAISED FOOT AND KEEP YOUR ARMS DOWN AT YOUR SIDES WHILE YOU COUNT ALOUD IN THE FOLLOWING MANNER, 1001-1002-1003 ... ETC. UNTIL I TELL YOU TO STOP.  DO YOU UNDERSTAND THE INSTRUCTIONS? DO YOU HAVE ANY QUESTIONS?  <input type="checkbox"/> Sways while balancing <input type="checkbox"/> Uses arms for balance (8" or more from side) <input type="checkbox"/> Hopping <input type="checkbox"/> Puts foot down <input type="checkbox"/> Cannot do test (Puts foot down three or more times)  <input type="checkbox"/> This FST not administered for subject's safety <input type="checkbox"/> This FST not administered for officer's safety  Subject counted to completion of the 30 second test	<b>RHOMBERG BALANCE</b>  INSTRUCTIONS TO SUBJECT: STAND WITH YOUR FEET TOGETHER AND YOUR ARMS DOWN TO YOUR SIDES. REMAIN IN THAT POSITION UNTIL I TELL YOU OTHERWISE. DO YOU UNDERSTAND?  WHEN I TELL YOU TO START AND NOT BEFORE THEN I WANT YOU TO TILT YOUR HEAD BACK SLIGHTLY AND CLOSE YOUR EYES. REMAIN IN THAT POSITION UNTIL I TELL YOU THE TEST IS COMPLETE.  DURING THE TEST I WANT YOU TO <input type="checkbox"/> RECITE THE ALPHABET <input type="checkbox"/> COUNT ALOUD BACKWARD FROM _____ TO _____ <input type="checkbox"/> ESTIMATE THE PASSAGE OF 30 SECONDS. ONCE YOU BELIEVE 30 SECONDS HAVE PASSED TILT YOUR HEAD FORWARD, OPEN YOUR EYES AND SAY STOP.  DO YOU UNDERSTAND THE INSTRUCTIONS? DO YOU HAVE ANY QUESTIONS?  _____ SECONDS WAS ESTIMATED AS 30 SECONDS  AFTER THE TEST ASK "HOW MUCH TIME WAS THAT?"  "HOW DID YOU ESTIMATE THAT?"  <input type="checkbox"/> Required additional instructions during testing <input type="checkbox"/> Opened eyes during test <input type="checkbox"/> Failed to keep feet together throughout <input type="checkbox"/> Failed to keep head tilted back <input type="checkbox"/> Used hand other than the one designated <input type="checkbox"/> Missed nose with fingertip (Record miss locations below) <input type="checkbox"/> Touched nose with other than fingertip (Record below) <input type="checkbox"/> Swayed front to back or side to side (Record below)  <input type="checkbox"/> This FST not administered for subject's safety <input type="checkbox"/> This FST not administered for officer's safety	<b>FINGER TO NOSE</b>  INSTRUCTIONS TO SUBJECT: STAND WITH YOUR FEET TOGETHER AND YOUR ARMS DOWN AT YOUR SIDES. REMAIN IN THAT POSITION UNTIL I TELL YOU OTHERWISE. DO YOU UNDERSTAND?  MAKE A FIST WITH BOTH HANDS AND POINT YOUR TWO INDEX FINGERS OUT STRAIGHT. (DEMONSTRATE FOR SUBJECT) NOW PLACE YOUR HANDS BACK DOWN AT YOUR SIDES AS THEY ARE WITH YOUR PALMS FACING FORWARD. (DEMONSTRATE FOR SUBJECT)  WHEN I TELL YOU TO START AND NOT BEFORE THEN WHAT I WANT YOU TO DO IS TILT YOUR HEAD BACK SLIGHTLY AND CLOSE YOUR EYES. USING THE FINGER I TELL YOU TOUCH THE VERY TIP OF YOUR FINGER TO THE VERY TIP OF YOUR NOSE. AFTER TOUCHING YOUR NOSE, RETURN YOUR HAND TO YOUR SIDE IMMEDIATELY.  DO YOU UNDERSTAND THE INSTRUCTIONS? DO YOU HAVE ANY QUESTIONS?  <input type="checkbox"/> Required additional instructions during testing <input type="checkbox"/> Opened eyes during test <input type="checkbox"/> Failed to keep feet together throughout <input type="checkbox"/> Failed to keep head tilted back <input type="checkbox"/> Used hand other than the one designated <input type="checkbox"/> Missed nose with fingertip (Record miss locations below) <input type="checkbox"/> Touched nose with other than fingertip (Record below) <input type="checkbox"/> Swayed front to back or side to side (Record below)  <input type="checkbox"/> This FST not administered for subject's safety <input type="checkbox"/> This FST not administered for officer's safety
<b>DOCUMENTATION</b> <div style="display: flex; justify-content: space-around;"> <div style="text-align: center;">               SIX INCHES           </div> <div style="text-align: center;">               DOCUMENTATION           </div> <div style="text-align: center;">               DOCUMENTATION           </div> </div>				
<b>WALK AND TURN TEST</b> 				
<b>FRONT TO BACK SWAY:</b> <input type="checkbox"/> NONE (0") <input type="checkbox"/> SLIGHT (1" - 2") <input type="checkbox"/> MODERATE (3" - 4") <input type="checkbox"/> HEAVY (5" +)  <b>SIDE TO SIDE SWAY:</b> <input type="checkbox"/> NONE (0") <input type="checkbox"/> SLIGHT (1" - 2") <input type="checkbox"/> MODERATE (3" - 4") <input type="checkbox"/> HEAVY (5" +)  <b>FRONT TO BACK SWAY:</b> <input type="checkbox"/> NONE (0") <input type="checkbox"/> SLIGHT (1" - 2") <input type="checkbox"/> MODERATE (3" - 4") <input type="checkbox"/> HEAVY (5" +)  <b>SIDE TO SIDE SWAY:</b> <input type="checkbox"/> NONE (0") <input type="checkbox"/> SLIGHT (1" - 2") <input type="checkbox"/> MODERATE (3" - 4") <input type="checkbox"/> HEAVY (5" +)  <b>FRONT TO BACK SWAY:</b> <input type="checkbox"/> NONE (0") <input type="checkbox"/> SLIGHT (1" - 2") <input type="checkbox"/> MODERATE (3" - 4") <input type="checkbox"/> HEAVY (5" +)  <b>SIDE TO SIDE SWAY:</b> <input type="checkbox"/> NONE (0") <input type="checkbox"/> SLIGHT (1" - 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# DETAILS OF ARREST

SUBJECT WAS:		<input type="checkbox"/> BOOKED	NAME (LAST, FIRST, M.I.)	ADDRESS:	PHONE #:	DATE:	TIME:
		<input checked="" type="checkbox"/> RELEASED TO	Dein Reyna	10-688			2245
C H A R G E S	CITATION NUMBERS	CODE	CHARGE DESCRIPTION				
	14007015 (1)	28-1381A1	DUI				
	14007015 (2)	28-1381A2	BAC over .08 within 2 hours of driving				
	14007015 (3)	28-1382A1	Extreme DUI With Alcohol Concentration of .15 or Greater				
	14007015 (4)	28-729.1	Fail to drive within one lane/unsafe lane change				

SUBJECT'S RIGHT  
INDEX FINGERPRINT



No prints on file to ID to  
A3149 1-3-12

ARRESTING OFFICER'S NAME/S AND SERIAL NUMBER/S:

Megillis, Michael D

5599

Gardner, Eric

9067

WAGON OFFICER'S NAME/S AND SERIAL NUMBER/S:

Gardner, Eric

9067

01 05 12



City of Phoenix

## ARIZONA TRAFFIC TICKET AND COMPLAINT

STATE OF ARIZONA  
MARICOPA COUNTY

COMPLAINT NO. 14007015		Report No. 2011-02240356		Acc <input type="checkbox"/>	Fatal <input type="checkbox"/>	Ser Phys Injury <input type="checkbox"/>	CMV <input type="checkbox"/>	HAZ MAT <input type="checkbox"/>	Grid
Driver License No		Susp / Rev / Canc <input type="checkbox"/>		State AZ	Class D		Endorsements M H N P T X D		Restriction A
DEFENDANT		First MATTHEW	Middle	JOHN		Last KELLY		Military	
Social Security No		Other ID Type / No		Sex M	Weight 180	Height 509	Eyes BLU	Hair BRO	Origin W
Residence Address		1633 W MANOR ST CHANDLER, AZ 85224		Zip 480	Country (if not U S)		Phone No 855-8467		
Business Name / Address		KELLY MCCOY PLC		Zip	Country (if not U S)		Phone No		
VEH	Year 2006	Make TOYT	Model 4DSW	Color GOLD	License Plate CUALAW	State AZ	Exp 12	VIN	

BICYCLE ☐ The undersigned certifies that the defendant named herein did commit the following

ON 12	Month	Day 28	Year 11	Time 9:21	At Location Radar/Laser	Direction SB	A/C Reading	Prior No Insurance Conviction W/I 3 Years	Prior DUI Conviction W/I 5 Years	Prior Drive on Susp Lic Conviction W/I 1 Year
-------	-------	--------	---------	-----------	-------------------------	--------------	-------------	---	----------------------------------	---

## LIST CRIMINAL CHARGE FIRST, IF APPLICABLE

1	in violation of	28-1381A1	<input checked="" type="checkbox"/> ARS <input type="checkbox"/> City Code	SPEED	Alleged 50	Lawful 35	<input type="checkbox"/> Civil Traffic (VT)
	as follows	DUI					<input checked="" type="checkbox"/> Criminal Traffic (CT)
	at location Intersection	3RD ST AND PALM LANE in Phoenix, Maricopa County, AZ					<input type="checkbox"/> Criminal (CR)
2	in violation of	28-1381A2	<input checked="" type="checkbox"/> ARS <input type="checkbox"/> City Code	SPEED	Alleged 50	Lawful 35	<input type="checkbox"/> Civil Traffic (VT)
	as follows	BAC over .08 within 2 hours of driving					<input checked="" type="checkbox"/> Criminal Traffic (CT)
	at location Intersection	3RD ST AND PALM LANE in Phoenix, Maricopa County, AZ					<input type="checkbox"/> Criminal (CR)
3	in violation of	28-1382A1	<input checked="" type="checkbox"/> ARS <input type="checkbox"/> City Code	SPEED	Alleged 50	Lawful 35	<input type="checkbox"/> Civil Traffic (VT)
	as follows	Extreme DUI With Alcohol Concentration of .15 or Greater					<input checked="" type="checkbox"/> Criminal Traffic (CT)
	at location Intersection	3RD ST AND PALM LANE in Phoenix, Maricopa County, AZ					<input type="checkbox"/> Criminal (CR)
4	in violation of	28-729.1	<input checked="" type="checkbox"/> ARS <input type="checkbox"/> City Code	SPEED	Alleged 50	Lawful 35	<input type="checkbox"/> Civil Traffic (VT)
	as follows	Fail to drive within one lane/unsafe lane change					<input checked="" type="checkbox"/> Criminal Traffic (CT)
	at location Intersection	3RD ST AND PALM LANE in Phoenix, Maricopa County, AZ					<input type="checkbox"/> Criminal (CR)
5	in violation of		<input type="checkbox"/> ARS <input type="checkbox"/> City Code	SPEED	Alleged	Lawful	<input type="checkbox"/> Civil Traffic (VT)
	as follows						<input type="checkbox"/> Criminal Traffic (CT)
	at location Intersection	in Phoenix, Maricopa County, AZ					<input type="checkbox"/> Criminal (CR)

You Must Appear At	<input checked="" type="checkbox"/> CITY OF PHOENIX MUNICIPAL COURT (0741) 300 West Washington Street Phoenix, AZ 85003 Phone (602) 262-6421	<input type="checkbox"/> MARICOPA COUNTY JUVENILE COURT CENTER 3125 West Durango Phoenix, AZ 85009 Phone (602) 506-4500	Bring One Parent
--------------------	--	---	------------------

Your Court Date Is:	Month 01	Day 06	Year 2012	Time 10:30	AM <input checked="" type="checkbox"/> PM <input type="checkbox"/>	Domestic Violence (DV) <input type="checkbox"/>	Victim/s? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Victim/s Notified? (All) <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	Booking No
---------------------	----------	--------	-----------	------------	--	---	---	---	------------

CRIMINAL ☒ Without admitting guilt, I promise to appear on the court date listed above.

CIVIL ☐ Without admitting responsibility, I acknowledge receipt of this complaint.

SIGNATURE

Fingerprint Card Submitted ☒ Yes ☐ No

Fingerprint

I hereby certify that I have reasonable grounds to believe and do believe that the person cited herein committed the offense described herein contrary to law, and by signature, has promised to appear if so signed, and I have served a copy of this complaint upon the defendant.

McGillis, Michael D

5599

Complainant(s)

12/28/11

Serial No

9067

Issued on

Date

Additional Complaints

Complaint #

Serial No

COURT

30-171 Rev 8/09



<input type="checkbox"/> Interpreter Required <input type="checkbox"/> Spanish <input type="checkbox"/> Other		<input type="checkbox"/> Attorney N O A		Ph #	
<b>ARRAIGNMENT CHARGE 1</b>	<b>ARRAIGNMENT CHARGE 2</b>	<b>ARRAIGNMENT CHARGE 3</b>	<b>ARRAIGNMENT CHARGE 4</b>	<b>ARRAIGNMENT CHARGE 5</b>	
<input type="checkbox"/> not responsible <input type="checkbox"/> responsible <input type="checkbox"/> not guilty <input type="checkbox"/> guilty <input type="checkbox"/> DDP/ <input type="checkbox"/> declined <input type="checkbox"/> no contest <input type="checkbox"/> dismiss WWO prejudice	<input type="checkbox"/> not responsible <input type="checkbox"/> responsible <input type="checkbox"/> not guilty <input type="checkbox"/> guilty <input type="checkbox"/> DDP/ <input type="checkbox"/> declined <input type="checkbox"/> no contest <input type="checkbox"/> dismiss WWO prejudice	<input type="checkbox"/> not responsible <input type="checkbox"/> responsible <input type="checkbox"/> not guilty <input type="checkbox"/> guilty <input type="checkbox"/> DDP/ <input type="checkbox"/> declined <input type="checkbox"/> no contest <input type="checkbox"/> dismiss WWO prejudice	<input type="checkbox"/> not responsible <input type="checkbox"/> responsible <input type="checkbox"/> not guilty <input type="checkbox"/> guilty <input type="checkbox"/> DDP/ <input type="checkbox"/> declined <input type="checkbox"/> no contest <input type="checkbox"/> dismiss WWO prejudice	<input type="checkbox"/> not responsible <input type="checkbox"/> responsible <input type="checkbox"/> not guilty <input type="checkbox"/> guilty <input type="checkbox"/> DDP/ <input type="checkbox"/> declined <input type="checkbox"/> no contest <input type="checkbox"/> dismiss WWO prejudice	<input type="checkbox"/> not responsible <input type="checkbox"/> responsible <input type="checkbox"/> not guilty <input type="checkbox"/> guilty <input type="checkbox"/> DDP/ <input type="checkbox"/> declined <input type="checkbox"/> no contest <input type="checkbox"/> dismiss WWO prejudice
By my signature below, I hereby waive my right to trial, enter a plea of guilty or responsible for the violation and consent to judgment imposing the prescribed fine or civil sanction.					
DEFENDANT SIGNATURE			Date		Judge's Initials
<b>SETTINGS</b>					
Date of Action	Chg #	Date set to	For	Ct Rm	Time
<b>JUDGMENTS AND ORDERS OF THE COURT</b>					
<input type="checkbox"/> COP <input type="checkbox"/> Civil Hearing/Trial held <input type="checkbox"/> not responsible <input type="checkbox"/> responsible <input type="checkbox"/> not guilty <input type="checkbox"/> guilty <input type="checkbox"/> dismiss WWO prejudice <input type="checkbox"/> default <input type="checkbox"/> no contest	<input type="checkbox"/> COP <input type="checkbox"/> Civil Hearing/Trial held <input type="checkbox"/> not responsible <input type="checkbox"/> responsible <input type="checkbox"/> not guilty <input type="checkbox"/> guilty <input type="checkbox"/> dismiss WWO prejudice <input type="checkbox"/> default <input type="checkbox"/> no contest	<input type="checkbox"/> COP <input type="checkbox"/> Civil Hearing/Trial held <input type="checkbox"/> not responsible <input type="checkbox"/> responsible <input type="checkbox"/> not guilty <input type="checkbox"/> guilty <input type="checkbox"/> dismiss WWO prejudice <input type="checkbox"/> default <input type="checkbox"/> no contest	<input type="checkbox"/> COP <input type="checkbox"/> Civil Hearing/Trial held <input type="checkbox"/> not responsible <input type="checkbox"/> responsible <input type="checkbox"/> not guilty <input type="checkbox"/> guilty <input type="checkbox"/> dismiss WWO prejudice <input type="checkbox"/> default <input type="checkbox"/> no contest	<input type="checkbox"/> COP <input type="checkbox"/> Civil Hearing/Trial held <input type="checkbox"/> not responsible <input type="checkbox"/> responsible <input type="checkbox"/> not guilty <input type="checkbox"/> guilty <input type="checkbox"/> dismiss WWO prejudice <input type="checkbox"/> default <input type="checkbox"/> no contest	<input type="checkbox"/> COP <input type="checkbox"/> Civil Hearing/Trial held <input type="checkbox"/> not responsible <input type="checkbox"/> responsible <input type="checkbox"/> not guilty <input type="checkbox"/> guilty <input type="checkbox"/> dismiss WWO prejudice <input type="checkbox"/> default <input type="checkbox"/> no contest
<input type="checkbox"/> SEE LOG ENTRY FOR SENTENCE DETAILS					
<input type="checkbox"/> Fine/Sanction \$ <input type="checkbox"/> Suspend <input type="checkbox"/> Reduce <input type="checkbox"/> Only if requirements are met Suspend <input type="checkbox"/> Driving priv <input type="checkbox"/> Vehicle regis <input type="checkbox"/> Driving priv AND vehicle regis for _____ months	<input type="checkbox"/> Fine/Sanction \$ <input type="checkbox"/> Suspend <input type="checkbox"/> Reduce <input type="checkbox"/> Only if requirements are met Suspend <input type="checkbox"/> Driving priv <input type="checkbox"/> Vehicle regis <input type="checkbox"/> Driving priv AND vehicle regis for _____ months	<input type="checkbox"/> Fine/Sanction \$ <input type="checkbox"/> Suspend <input type="checkbox"/> Reduce <input type="checkbox"/> Only if requirements are met Suspend <input type="checkbox"/> Driving priv <input type="checkbox"/> Vehicle regis <input type="checkbox"/> Driving priv AND vehicle regis for _____ months	<input type="checkbox"/> Fine/Sanction \$ <input type="checkbox"/> Suspend <input type="checkbox"/> Reduce <input type="checkbox"/> Only if requirements are met Suspend <input type="checkbox"/> Driving priv <input type="checkbox"/> Vehicle regis <input type="checkbox"/> Driving priv AND vehicle regis for _____ months	<input type="checkbox"/> Fine/Sanction \$ <input type="checkbox"/> Suspend <input type="checkbox"/> Reduce <input type="checkbox"/> Only if requirements are met Suspend <input type="checkbox"/> Driving priv <input type="checkbox"/> Vehicle regis <input type="checkbox"/> Driving priv AND vehicle regis for _____ months	<input type="checkbox"/> Fine/Sanction \$ <input type="checkbox"/> Suspend <input type="checkbox"/> Reduce <input type="checkbox"/> Only if requirements are met Suspend <input type="checkbox"/> Driving priv <input type="checkbox"/> Vehicle regis <input type="checkbox"/> Driving priv AND vehicle regis for _____ months
<input type="checkbox"/> PAY \$ _____ <input type="checkbox"/> Today - pick up number at Lobby Info Booth <input type="checkbox"/> Report immediately to Windows 33-34 to arrange a payment plan					
<input type="checkbox"/> Or show proof of <input type="checkbox"/> Community Restitution Total hours _____ by _____ <input type="checkbox"/> Insurance by _____ <input type="checkbox"/> Registration by _____ <input type="checkbox"/> _____ by _____ <input type="checkbox"/> With proof, reduce fine amount to \$ _____ <input type="checkbox"/> DDP	<input type="checkbox"/> Or show proof of <input type="checkbox"/> Community Restitution Total hours _____ by _____ <input type="checkbox"/> Insurance by _____ <input type="checkbox"/> Registration by _____ <input type="checkbox"/> _____ by _____ <input type="checkbox"/> With proof, reduce fine amount to \$ _____ <input type="checkbox"/> DDP	<input type="checkbox"/> Or show proof of <input type="checkbox"/> Community Restitution Total hours _____ by _____ <input type="checkbox"/> Insurance by _____ <input type="checkbox"/> Registration by _____ <input type="checkbox"/> _____ by _____ <input type="checkbox"/> With proof, reduce fine amount to \$ _____ <input type="checkbox"/> DDP	<input type="checkbox"/> Or show proof of <input type="checkbox"/> Community Restitution Total hours _____ by _____ <input type="checkbox"/> Insurance by _____ <input type="checkbox"/> Registration by _____ <input type="checkbox"/> _____ by _____ <input type="checkbox"/> With proof, reduce fine amount to \$ _____ <input type="checkbox"/> DDP	<input type="checkbox"/> Or show proof of <input type="checkbox"/> Community Restitution Total hours _____ by _____ <input type="checkbox"/> Insurance by _____ <input type="checkbox"/> Registration by _____ <input type="checkbox"/> _____ by _____ <input type="checkbox"/> With proof, reduce fine amount to \$ _____ <input type="checkbox"/> DDP	<input type="checkbox"/> Or show proof of <input type="checkbox"/> Community Restitution Total hours _____ by _____ <input type="checkbox"/> Insurance by _____ <input type="checkbox"/> Registration by _____ <input type="checkbox"/> _____ by _____ <input type="checkbox"/> With proof, reduce fine amount to \$ _____ <input type="checkbox"/> DDP
COMMENTS Default <input type="checkbox"/> Stands <input type="checkbox"/> Set Aside	COMMENTS Default <input type="checkbox"/> Stands <input type="checkbox"/> Set Aside	COMMENTS Default <input type="checkbox"/> Stands <input type="checkbox"/> Set Aside	COMMENTS Default <input type="checkbox"/> Stands <input type="checkbox"/> Set Aside	COMMENTS Default <input type="checkbox"/> Stands <input type="checkbox"/> Set Aside	COMMENTS Default <input type="checkbox"/> Stands <input type="checkbox"/> Set Aside
Disposition Code	Disposition Code	Disposition Code	Disposition Code	Disposition Code	Disposition Code
Disposition Date	Disposition Date	Disposition Date	Disposition Date	Disposition Date	Disposition Date
Judge's Initials	Judge's Initials	Judge's Initials	Judge's Initials	Judge's Initials	Judge's Initials
<input type="checkbox"/> Bond/Deposit Amount \$ _____ <input type="checkbox"/> Bond Forfeited <input type="checkbox"/> Bond Exonerated <input type="checkbox"/> Fine(s) from bond/deposit Date/Initials _____					
<input type="checkbox"/> Appeal Bond Ordered Amount \$ _____ <input type="checkbox"/> Appeal Bond Forfeited <input type="checkbox"/> Appeal Bond Exonerated <input type="checkbox"/> Fine(s) from bond Date/Initials _____					



P.O. Box 4500  
Phoenix, Arizona 85030-4500  
(602) 262-6461

1 NADJA CUCAK, 022482  
Assistant City Prosecutor  
2 P.O. Box 4500  
Phoenix, Arizona 85030-4500  
3 (602) 262-6461/FAX (602) 534-9806  
Attorney for State

4  
5 IN THE MUNICIPAL COURT OF THE CITY OF PHOENIX  
6 COUNTY OF MARICOPA, STATE OF ARIZONA

7 STATE OF ARIZONA, )  
8 ) AMENDMENT TO  
Plaintiff, ) MISDEMEANOR COMPLAINT  
9 vs )  
10 ) No. 14007015  
MATTHEW JOHN KELLY, )  
10/21/1974, ) COUNT 05 ADDED  
11 Defendant. )

12 The undersigned being first duly sworn, complains on information and belief that  
13 defendant committed a misdemeanor in Phoenix, Maricopa County, Arizona, as follows.

14 COUNT 5

15 On or about December 28, 2011, the defendant had an alcohol concentration of 0.20 or more  
16 within two hours of driving or being in actual physical control of a vehicle, a Class 1 misdemeanor,  
17 in violation of Arizona Revised Statutes, Section 28-1382A2.

18 Subscribed and sworn to before me  
19 this 20 day of Jan, 2012

20 Cg  
Judge of the Municipal Court

PHOENIX CITY PROSECUTOR

By N. Althman  
NADJA CUCAK, 022482  
Assistant City Prosecutor

21  
22  
23  
24 COMPLAINT  
14007015



## COURT INFORMATION SUBMITTAL

DESCRIPTOR VALUES	DATA VALUES
1. AGENCY	PCP
2. COMPLAINT #	14007015
3. FIRST NAME	MATTHEW
4. MIDDLE	J.
5. LAST NAME	KELLY
6. SUFFIX	
7. ADDRESS	1633 W MANOR ST
8. CITY	CHANDLER
9. STATE	AZ
10. ZIP CODE	85224
11. SEX	M
12. WEIGHT	150
13. HEIGHT	5'09"
14. EYES	Blue
15. HAIR	BRO
16. ORIGIN	W
17. DOB	10/21/1974
18. COMPLAINT DATE	01/19/2012
19. DOV	12/28/2011
20. VR	VICTIM RIGHTS NOTICE PROVIDED
21. DR #	2011 02240356
22. BOOKING #	
23. OFF 1	05599
24. OFF 2	09067
25. OFF 3	06474
26. OFF 4	
27. SID #	
28. PCN #	
29. FE DESIGNATION	
30. DIV ELIGIBLE	

COUNT 05

1. A
2. 28-1382A2/1
3. 1
- 4.
- 5.

A certified copy of an official and original Phoenix Municipal Court electronic record.



A certified copy of an official and original Phoenix Municipal Court electronic record.









PHOENIX MUNICIPAL COURT

RECORD OF PROCEEDINGS

Booking \_\_\_\_\_ Complaint 14007015

Initial Appearance & Arraignment

- ☐ Ascertained true name and current address  
 Advised to notify court promptly of any change of address  
 Advised of charges and misdemeanor offense classifications  
 Advised of Rights: to counsel, CAA appointment, to remain silent, to be present at all proceedings, to jury trial as applicable  
 Advised FTA can result in arrest warrant

In-Custody

- ☐ Probable Cause exists per Rule 4 2(a)(4) Release Conditions determined per Rules 4 2 & 7 2  
☐ Probable Cause does not exist Immediate release ordered

Counsel

- ☐ CAA eligible and assigned per Rule 6 1  
☐ CAA declined ☐ Will hire private attorney ☐ Pro Per ☐ Other \_\_\_\_\_  
☐ NOA filed by private attorney  
☐ Waiver filed

Plea

- ☐ Not guilty, set to Pretrial Disposition Conference  
☐ Guilty, see judgment and/or sentence order

Date \_\_\_\_\_ Judge \_\_\_\_\_

Date	Staff	Action	Judge
1/6/12	TP	NOA FILED - SET PDCT 1/20/12 @ 10AM 507	
1/20/12		Δ mtc granted xt NoByp 2/28/12 10:00	Ce
1/20/12	VICTORIA G	Added Ct 5, Δ not present. needs Ce SCHEDULED to be arraigned. 2-29-12 507/10:00	Ce

Date Posted	Amount	Receipt #	Exonerated Fine from Bail Date / Initials	Exonerated Date / Initials	Forfeited Date / Initials	Division
JAN 20 2012		-				

Motions

Date Filed	Type	Moving Party	Granted	Disposition Denied	See Log	Ruling Date	Judge
1/20/12	Added Ct 5	TT	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1/20/12	Ce
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Language \_\_\_\_\_

Counsel Name Leslie LeMense Phone (480) 807-3187 FDR Sent \_\_\_\_\_ PCN \_\_\_\_\_

30-25 1D Rev 1/11

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A certified copy of an official and original Phoenix Municipal Court electronic record.

PHOENIX MUNICIPAL COURT 300 W. Washington St. Phoenix, AZ 85003-2103 602-262-6421 TTY/602-495-0733

## STATE OF ARIZONA

Matthew J. Kelly

10-21-74

Defendant (First MI Last)

DOB

## JUDGMENT &amp; SENTENCE ORDER

- ☐ Amended  
☐ Probation Violation  
☐ Remand Sentence

1. Court finding and judgment ☐ Defendant is in violation of term(s) \_\_\_\_\_ of probation imposed on \_\_\_\_\_

2. COMPLAINT #s

14007065

COUNT #s

01

02

03

04

05

3 VIOLATION CODES

281381A1

281381A2

281382A1

28129.1

281382A2

OFFENSE NAME, CLASS

DUI

M1

DUI

M1

ext DUI M1

Lane M

ext DUI M1

Defendant knowingly, voluntarily, and intelligently waives ☐ all pertinent rights, ☐ right to counsel, ☐ trial by jury.

Leslie Lemense

Defense Counsel's Name

Plea (Guilty, Responsible, Admit)

☒☐☐☒☒

Plea (No Contest)

☐☐☐☐☐

Submission

☐☐☐☐☐

Guilty/Responsible at Trial (Court/Jury)

☐☐☐☐☐

Default (Stands / Set Aside)

☐☐☐☐☐

Not Guilty/Not Responsible

☐☐☐☐☐

Dismissal (Without / With) Prejudice

☐☒☒☐☐DUI Dismissal ☐ factual ☒ legal

FINDINGS: Prior Convictions (order)

1 2 3

1 2 3

1 2 3

1 2 3

1 2 3

DUI ☐ 28-1382 BAC 20>, Drugs: ☐ Yes ☐ No ☐ Unknown, Offense was not of a dangerous or repetitive nature pursuant to ARS 13-604

DV Defendant and victim \_\_\_\_\_ have a relationship as defined in ARS 13-3601A

ICE Notice: ☐ A fine has been ordered and a federal authority or a 287(g) officer has presented sufficient evidence that the defendant is unlawfully in the U.S.☐ 4 All orders contained within this Judgment & Sentence Order are conditions of probation for these counts (See item 7)

Probation

☐☐☐☐☐☒ 5 IT IS ORDERED the defendant be confined for 45 days, with 0 days time served, with 0 days suspended upon successful completion of☐ Probation (item 7) ☒ SAS-Counseling (item 12) ☐ Community Restitution (item 13), Other \_\_\_\_\_ as follows

Jail Days / Concurrent

45

☒☐☐☐

45

☐☒ 6 IT IS ORDERED the defendant pay the following fines/sanctions, fees or restitution amounts

A Fine/Sanction+Surcharge

\$

948

\$

\$

\$

0

\$

948

B Concurrent

\$

948

\$

\$

\$

0

\$

948

C CAA Fee (Defense Attorney)

\$

\$

\$

\$

\$

D Jail (Mandatory 13-804.01)

\$

\$

\$

\$

\$

\$

1200

E Suspended

\$

\$

\$

\$

\$

F DUI Assessment (Prison Fund)

\$

\$

\$

\$

\$

\$

1000

G DUI Assessment (PSE Fund)

\$

\$

\$

\$

\$

\$

1000

H 28-1382 Assessment

\$

\$

\$

\$

\$

\$

250

I Other

\$

\$

\$

\$

\$

J Restitution Ordered

\$

\$

\$

\$

\$

\$

\$

K Restitution from Fine

\$

\$

\$

\$

\$

\$

\$

Amounts on lines A and J include any "Restitution from Fine" on line K. Additional Fees: Court Technology \$15 plus state surcharge, FARE \$7. Possible Fees: Time Payment \$20, FARE Delinquency \$35, Civil Default \$40, Criminal Non Compliance \$110, Collection Agency

DISTRIBUTION WHITE - COURT YELLOW - FED UNIT PINK - DEFENDANT

Page 1 of 2

30-188 1D Rev 8/10

A certified copy of an official and original Phoenix Municipal Court electronic record.

**PAYMENT INSTRUCTIONS. Full payment is required on the day you are sentenced. You can pay as follows:****Internet** Pay anytime with Visa and MasterCard debit or credit cards at <http://www.azcourtpay.com>**Mail** Send a check or money order (no cash) to Phoenix Municipal Court, P.O. Box 25650, Phoenix, AZ 85002-5650. Print your full name, date of birth and complaint number on check/money order.**Telephone** Call 602-256-3281 between 8:00 a.m. and 4:30 p.m. Monday through Friday, excluding Holidays to pay with American Express, Discover, Mastercard and Visa debit or credit cards (Debit/hard of hearing call 602-495-0733).**In Person.** Go to Phoenix Municipal Court at 300 W. Washington Street in Phoenix, AZ between 8:00 a.m. and 4:30 p.m. Monday through Friday, excluding Holidays to pay with Cash, Money Order, Cashier's Check, or with American Express, Discover, Mastercard and Visa debit or credit cards. Personal checks will be accepted with a valid driver's license and bank guarantee card.**Warning** If you fail to comply with your payment directives you will be ordered to appear before a judge. If you fail to appear the court will immediately notify Credit Bureaus, the Department of Revenue to hold tax refunds, the Motor Vehicle Department to hold vehicle registrations, and Collection Agencies to take action. In addition, if your case is a criminal matter a warrant will be issued for your immediate arrest.**NOTICE OF RIGHT TO APPEAL - CRIMINAL**

This notice explains your rights and responsibilities regarding filing an appeal to Superior Court from an order or final judgment. If you appeal, you are called the "Appellant." You have a constitutional right to have a lawyer represent you during the appeal stage of your case. This means that (a) you have the right to hire a private lawyer, and (b) in certain situations, you may be eligible for a court-appointed attorney to represent you. Normally, if you had a court-appointed attorney for the trial, you will continue to have a court-appointed attorney for the appeal. If you are appealing a case where the trial court sentence included jail time or probation, and you cannot afford to hire a private attorney, you can request that the Court appoint an attorney to represent you. You will be required to fill out a financial statement, which is subject to a credit check. Depending on your income and financial situation, (1) an attorney may be appointed at no cost to you, (2) your request may be declined, or (3) you may have an attorney appointed with the requirement that you pay a portion of the cost of the attorney's services as determined by the Court. The procedure to apply for a court-appointed attorney is set forth in Rules of Criminal Procedure, Rule 6.

There are two separate stages to the appeal process. The first stage begins in this Court, the second stage takes place in the Maricopa County Superior Court. Remember, you must complete all steps at both stages, or you risk having your appeal dismissed. This notice does not set forth all the rules on criminal appeals. To read the rules in their entirety, you may review the Superior Court Rules of Appellate Procedure - Criminal (as revised effective June 1, 2003), and Superior Court Local Rules - Maricopa County at the library. It is recommended that you keep a copy of all of your documents and receipts during the appeal.

**STAGE ONE - THE PHOENIX MUNICIPAL COURT**

**A THE NOTICE OF APPEAL** To appeal, you must file a "Notice of Appeal" with the Phoenix Municipal Court Appeals Clerk within 14 calendar days from the date of the final order or final judgment. If you do not file a Notice of Appeal within these 14 days, you lose your right to appeal. Within the time to file your appeal, you must also file an original and one copy of the "designation of the record." This is your list of the recorded dialog and marked exhibits in the court record that you want to include in the appeal.

**B THE RECORD** On or before the 14-day deadline to file your Notice of Appeal, you must also arrange to pay for a copy of the record of proceedings made at your hearing. This record will be filed with your appeal at Superior Court. If the proceedings are under one hour in total length, a copy of the audio recording will be made. However, if your trial was over one hour in total length, a written transcript will be required. The clerk will explain which type of record is required, and acceptable methods of payment. You can purchase an additional copy for your personal use, or you may listen to the record at the Appeals Office. If you feel that the payment of the cost of the record will cause substantial hardship to you or your family, you may file a request with this Court to proceed as an indigent. This request includes a sworn financial questionnaire which you must complete and which may be subject to a credit check. If you fail to pay for the record or transcript, your appeal may be dismissed.

**C THE CONDITIONS OF RELEASE PENDING APPEAL** You cannot be forced to post an appeal bond in order to exercise your right to appeal. If you have been released on your own recognizance during the trial at the Phoenix Municipal Court, this will be your status during the appeal, unless this is changed by the Court after notice to you. If the Court required a bond during the trial stage, you may still be required to post this bond during the appeal to ensure your appearance at further court proceedings and to make sure you prosecute the appeal diligently.

**D THE WRITTEN APPEAL MEMORANDUM** The Appellant's Memorandum is your written "brief" or explanation of why you think that the Phoenix Municipal Court ruling was legally incorrect. The Memorandum should be typed or printed on 8.5" x 11" letter-sized white paper, double spaced, and should not exceed 15 pages in length, not counting any exhibits from your trial that you want to attach to the Memorandum. If you have paid for a copy of the record for your use in preparing the Appellant's Memorandum, the Court will notify you when your copy is available for pick up. If your trial was less than one hour in total length, your CD or tape will usually be ready within five business days. If a transcript must be ordered, it will be approximately 14 days before you are contacted by the Court. Review the record to identify where you think the Court was in error.

**E FILING THE APPELLANT'S MEMORANDUM WITHIN 60 CALENDAR DAYS** The Appellant's Memorandum must be filed with the Phoenix Municipal Court within 60 calendar days from the end of the original 14-day deadline to file the Notice of Appeal. You must file the original and one copy of the Memorandum with the Phoenix Municipal Court. The Prosecutor then has 30 days to file an "Appellee's Memorandum" (response).

**F WAIT FOR FURTHER INSTRUCTIONS** Once the Memorandum has been filed, you should await further instructions from the Superior Court as outlined in Stage Two below. To keep you informed, remember that the Phoenix Municipal Court must have your current mailing address at all times. Even if you hire an attorney, your address is still required for legal notifications.

**STAGE TWO - THE MARICOPA COUNTY SUPERIOR COURT**

**G NOTIFICATION FROM THE SUPERIOR COURT** If you have completed all of the requirements of the first stage, your case moves to Maricopa County Superior Court where an appeals judge will review your case. About 60 days after you file your Memorandum, you will receive a notice from the Superior Court. This notice will assign a Superior Court case number to be referenced in all further correspondence.

**H SUPERIOR COURT ACTION ON THE APPEAL** If you have completed all of these steps, you will receive a ruling from the Superior Court. The Superior Court has the right to "affirm" (let stand) the Municipal Court ruling, to overrule the Municipal Court, to modify some of the Municipal Court decision, or, if the record is not clear, to order a new trial in the Superior Court. If the final outcome of your case is that the ruling stands, or if your appeal is dismissed for any reason, the Court may apply any bond, deposit, or payments already made to any sanctions or fees owed. The Phoenix Municipal Court will notify you regarding any further action necessary to conclude your case after the ruling from Superior Court.

**RETURN OF EXHIBITS**

After a judgment has become final and nonappealable, a person who files a request under penalty of perjury setting forth ownership of or lawful entitlement to the possession of an exhibit may obtain an ex parte order permitting its withdrawal. If you want your evidence returned to you, an "Order of Release of Evidence" form is available at the Phoenix Municipal Court Appeals Office, 3rd floor. Once you complete and submit the form a court date will be set and a judge will decide whether the evidence may be released. Unclaimed evidence will be destroyed.

**NOTICE OF RIGHT TO SET ASIDE JUDGMENT A.R.S. 13-907**

Setting aside judgment of convicted person on discharge, making of application for release from disabilities, exceptions

**A** Except as provided in subsection B of this section, every person convicted of a criminal offense may, upon fulfillment of the conditions of probation or sentence and discharge by the court, apply to the judge, justice of the peace or magistrate who pronounced sentence or imposed probation or such judge, justice of the peace or magistrate's successor in office to have the judgment of guilt set aside. The convicted person shall be informed of this right at the time of discharge. The application to set aside the judgment may be made by the convicted person or by the convicted person's attorney or probation officer authorized in writing. If the judge, justice of the peace or magistrate grants the application, the judge, justice of the peace or magistrate shall set aside the judgment of guilt, dismiss the accusations or information and order that the person be released from all penalties and disabilities resulting from the conviction other than those imposed by the department of transportation pursuant to section 28-3304, 28-3306, 28-3307 or 28-3308, except that the conviction may be used as a conviction if such conviction would be admissible had it not been set aside and may be pleaded and proved in any subsequent prosecution of such person by the state or any of its subdivisions for any offense or used by the department of transportation in enforcing the provisions of section 28-3304, 28-3306, 28-3307 or 28-3308 as if the judgment of guilt had not been set aside.

This section does not apply to a person convicted of a criminal offense involving the infliction of serious physical injury, involving the use or exhibition of a deadly weapon or dangerous instrument, or which the person is required or ordered by the court to register pursuant to section 13-3821, for which there has been a finding of sexual motivation pursuant to section 13-118, in which the victim is a minor under fifteen years of age, in violation of section 28-3473, any local ordinance relating to stopping, standing or operation of a vehicle or title 28, chapter 3, except a violation of section 28-693 or any local ordinance relating to the same subject matter as section 28-693.

**NOTE** Pursuant to A.R.S. 13-907, an Application to Set Aside Judgment does not mean that the Municipal Court will destroy records of your arrest or conviction. The Municipal Court does not seal the Record of Conviction or arrest, restrict inspection of your record, nor respond to inquiries relating to your conviction as though the conviction never occurred. You may be required to disclose a conviction that has been set aside in applications for certain licenses. The Court cannot deny anyone the right to look at the court file or obtain a copy of the original citation, sentence or conviction. The Motor Vehicle Department has no authority to suppress convictions and suspensions from the driving record. The Motor Vehicle Department will not remove any points from your driving record and the information is obtainable by an insurance agency.



NAME: Matthew J. Kelly DOB 10-21-74 COMPLAINT# 140 07015

- ☐ 7. Defendant placed on **summary probation** under following conditions for \_\_\_\_\_ months starting today, or \_\_\_\_\_
- ☒ a Defendant shall at all times be a law-abiding citizen and immediately notify the Court, in writing, of any change of address or telephone number
- ☐ b Defendant not go to ordered Area(s) 1 2 3 4 5 6 10 12 13 20 21 22 23 24 (as defined on back)
- ☐ c Defendant shall not harm, threaten or harass \_\_\_\_\_
- ☐ d Probation shall terminate upon completion of all orders contained in Items 5 through 14
- ☐ e Other \_\_\_\_\_

**Probation be** ☐ revoked, ☐ unsuccessfully terminated, ☐ successfully terminated, ☐ reinstated, ☐ extended \_\_\_\_\_ months for restitution payment, ☐ concluded on \_\_\_\_\_ ☐ original sentencing orders remain in effect ☐ new sentencing orders contained in Items 4 through 15

- ☐ 8. Pay **restitution** to the following victim(s) through the Court. The Court shall forward payment as follows
- Victim #1 \$ \_\_\_\_\_ Name \_\_\_\_\_ Victim #2 \$ \_\_\_\_\_ Name \_\_\_\_\_

- ☒ 9. The amounts assessed under Item 6 of this Order are due and payable today and shall be paid as follows
- ☐ a Pay the total balance due today, or on \_\_\_\_\_, report to Information Booth (1st floor)
- ☒ b Report to Financial Screening today (1st floor) and comply with all requests/directives of the Financial Enforcement Officer (FEO) who will determine payment plan eligibility, or other alternatives. Or report by \_\_\_\_\_ Minimum payment today \$ \_\_\_\_\_
- ☐ c Apply \$ \_\_\_\_\_ of posted cash bail toward restitution/fees/fines/sanctions
- ☐ d 28-3473C \$ \_\_\_\_\_ fine reduced to \$ \_\_\_\_\_ with proof of payment of fines causing suspension in \_\_\_\_\_ days
- ☐ e 28-2532A: \$ \_\_\_\_\_ sanction reduced to \$ \_\_\_\_\_ with proof of current registration in \_\_\_\_\_ days
- ☐ f 28-4135C: \$ \_\_\_\_\_ sanction reduced to \$ \_\_\_\_\_ with proof of six month insurance policy in \_\_\_\_\_ days

- ☐ 10. Waive Motor Vehicle Department Driver License and Registration suspension for 28-4135C
- ☐ 11. Suspend ☐ driving privileges, ☐ vehicle registration, for \_\_\_\_\_ months
- ☒ 12. Report to Screening & Assessment Services (SAS) today (1st floor) and complete any treatment/counseling/education program(s) as directed by SAS, or report by \_\_\_\_\_ ☒ Complete MADD Victim Impact Panel
- Pay \$25 SAS Initial Assessment/Monitoring Fee, or ☒ \$75 SAS Reassessment/Monitoring Fee, ☒ SAS Fee waived
- ☐ 13. Complete \_\_\_\_\_ hours of **community restitution** at any non-profit organization, ☐ at \_\_\_\_\_ by the Sentence Review Hearing date (Item 15)
- ☐ \$ \_\_\_\_\_ to be suspended upon completion of community restitution

- ☐ 14. \_\_\_\_\_
- ☐ 15. Appear at a **Sentence Review Hearing** on \_\_\_\_\_ at \_\_\_\_\_ a m /p m in Courtroom \_\_\_\_\_ to provide proof of ☐ current vehicle registration, ☐ valid driver's license, ☐ six month vehicle insurance policy, ☐ liability insurance at the time of the violation, ☐ restitution payments made by insurance companies, ☐ counseling completion, ☐ MADD Victim Impact Panel completion, ☐ community restitution completion, ☐ \_\_\_\_\_

Payments shall be made to Phoenix Municipal Court, 300 W. Washington St., Phoenix, Arizona 85003. Defendant shall immediately notify the Court, in writing, of any change of address or telephone number. In the event that any payment is required as a condition of probation and is not paid, or is paid after the payment date, defendant is ordered to report to the Court in person within 10 days after the payment date and every 30 days thereafter until delinquent payments are paid. If placed on probation, all sentence requirements must be completed no less than 90 days before the end of probation unless otherwise specified. Failure to comply with sentence requirements will result in additional processing fees, Contempt of Court Order and/or an arrest warrant and/or civil default. Collection costs will be added to balances referred to collection agencies. The victim(s), if any, received an opportunity to address the Court and/or victim statements have been reviewed by the Court prior to sentencing.

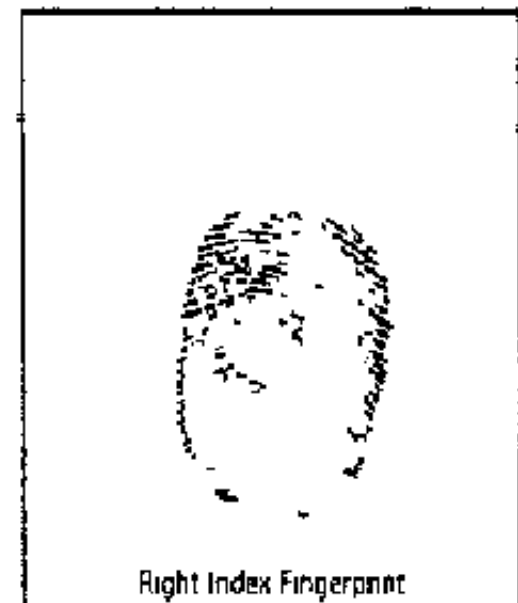
Date 5/9/12 Judge Ces Courtroom 507 \* Bailiff [Signature] Interpreter \_\_\_\_\_

\*This Court (Bailiff) certifies defendant's fingerprint was affixed at time of sentencing in open court

I hereby acknowledge receipt of this order and understand any violation may result in additional processing fees and/or an arrest warrant and my being held in jail pending further proceedings. I understand a plea of guilty, no contest, responsible, or probation violation admission has no appeal rights. For other judgments, I understand my right to appeal ends 14 calendar days after today's date. I understand Payment, Appeal, Set Aside Judgment, Domestic Violence Warnings, Travel Restrictions and Post-Violation Relief instructions are on the back of this order. I affirm the address below is accurate and understand all correspondence will be mailed there.

Defendant's Signature [Signature] Mailing Address 1633 W. Manor Street Apt# \_\_\_\_\_

City Chandler State AZ Zip 85224 Telephone 48-853-8467



DISTRIBUTION WHITE - COURT YELLOW - FEO UNIT PINK - DEFENDANT

Page 2 of 2

30-188 2D Rev 1/10

A certified copy of an official and original Phoenix Municipal Court electronic record.

A certified copy of an official and original Phoenix Municipal Court electronic record.



**DOMESTIC VIOLENCE CONVICTION WARNINGS**

You have been convicted of a crime that is considered domestic violence according to A.R.S. 13-3601 A, based on the nature of the crime and your relationship to the victim. If the crime involves the use or attempted use of physical force or the threatened use of a deadly weapon, you are prohibited by federal law from possessing a firearm or ammunition. This prohibition is permanent unless the conviction is set aside pursuant to A.R.S. 13-907. A conviction may not be set aside if the criminal offense involved the infliction of serious physical injury or the use or exhibition of a deadly weapon or dangerous instrument or if the victim is under fifteen years of age. A conviction is not automatically set aside upon request. Any decision is within the discretion of the judge. The mandatory minimum sentencing requirement for a domestic violence conviction is a counseling program. Additionally, if you are convicted of a second offense, you may be placed on supervised probation with a term of jail as a condition of that probation. A third or subsequent charge may be filed as a felony and a conviction for that offense will result in a term of incarceration.

**TRAVEL RESTRICTIONS (Applies if Item #7b "Defendant not go to circled Areas" is checked)**

- 1 Areas 2, 3, 4, 5, 6, 10, 12, 13, 20, 21, 22, 23, 24 as defined below
- 2 7th St (east sidewalk) to 32nd St (west sidewalk), from Madison St (north sidewalk) to Papago/I-10 Freeway. Includes all other Area 2 addresses and adjacent property
- 3 16th St (east sidewalk) to Interstate 17, from Northern Ave (south sidewalk) to Cactus Rd (north sidewalk). Includes all other Area 3 addresses and adjacent property
- 4 43rd Ave (west sidewalk) to Interstate 17 (east side), from Thomas Rd (south sidewalk) to Dunlap Ave (north sidewalk). Includes sidewalks, 27th Ave addresses and adjacent property
- 5 32nd St (east sidewalk) to Cave Creek Rd (west sidewalk), from Greenway Rd (south sidewalk) to Bell Rd (north sidewalk). Includes all other Area 5 addresses and adjacent property
- 6 Washington St (south sidewalk) to Roosevelt St (north sidewalk), from 59th Ave (west sidewalk) to 56th St (east sidewalk). Includes all other Area 6 addresses and adjacent property
- 10 24th St from McDowell Rd (north sidewalk) to Buckeye Rd (south sidewalk). Includes sidewalks or other areas with a 24th St address and any adjacent property
- 12 7th St (west sidewalk) to 16th St (east sidewalk), from Bethany Home Rd (north sidewalk) to Papago/I-10 Freeway
- 13 Washington St to Durango St (south sidewalk), from 43rd Ave (west sidewalk) to 7th Ave (east sidewalk)
- 20 3rd Ave (west sidewalk) to 7th St (east sidewalk), from Buchanan St (south sidewalk) to Fillmore St (north sidewalk). Includes all other Area 20 addresses and adjacent property
- 21 Papago/I-10 freeway to McDowell Rd (north sidewalk), from 7th Ave (east sidewalk) to 19th Ave (west sidewalk)
- 22 Central Ave (east sidewalk) to Black Canyon/I-17 Freeway, from Greenway Rd (south sidewalk) to Union Hills Rd (north sidewalk)
- 23 19th Ave (east sidewalk) to 59th Ave (west sidewalk) from Van Buren St (south sidewalk) to Encanto Blvd (north sidewalk)
- 24 19th Ave (east sidewalk) to 59th Ave (west sidewalk), from Encanto Blvd (south sidewalk) to Indian School Rd (north sidewalk)

**RIGHT TO POST-CONVICTION RELIEF**

You also have a right to petition the Phoenix Municipal Court for post-conviction relief. Rule 32, Rules of Criminal Procedure, 17 A.R.S. In order to exercise your post-conviction relief right, you must file a Notice of Post-Conviction Relief within 90 days of the entry of judgment and sentence if you do not file, or do not have the right to file, a Notice of Appeal. If you do appeal, the time you have to file a Notice of Post-Conviction Relief is extended to within 30 days of the order and mandate affirming the judgment and sentence on direct appeal. If you do not timely file a Notice of Post-Conviction Relief, you may never have another opportunity to have any errors made in your case corrected by another court. To file for post-conviction relief, get a copy of the Notice of Post-Conviction Relief form, either from the clerk of the court or jail, fill it out and file or send it to the clerk of the Phoenix Municipal Court. The notice must be received by the court within 90 days after you were sentenced or within 30 days of the order and mandate affirming the judgment and sentence on direct appeal.

**ADDITIONAL RIGHTS THAT MAY APPLY TO POST-CONVICTION RELIEF & APPEAL PROCEDURES**

You have the right to have an attorney represent you. If you are determined to be indigent, then you may be entitled to have an attorney appointed by the court to represent you in CRIMINAL cases only. You must fill out a request to proceed as an indigent which includes a sworn financial questionnaire. Not all criminal cases are eligible for court appointed counsel. You are required by law to pay the cost of your transcript or tape. If you feel that the payment of these costs will cause substantial hardship to yourself or family, you may file a request with this court to proceed as an indigent. This request includes a sworn financial questionnaire that you must complete.





PHOENIX MUNICIPAL COURT 300 W. Washington St. Phoenix, AZ 85003-2103 602-262-6421 TTY/602-495-0733

STATE OF ARIZONA

Plaintiff

COMPLAINT NO

DUI

GUILTY/NO CONTEST  
PLEA PROCEEDING

(DOV 1-1-09 to Present)

Matthew J. Kelly 1024-74

Defendant (FIRST, MI, LAST)

DOB

Defendant appears personally and expresses a desire to plead guilty or no contest to the charges indicated and I find the following facts

- 1 Defendant understands the nature of the charges to be driving or in actual physical control of a vehicle, a class 1 misdemeanor
- ☒ while under the influence of intoxicating liquor/toxic vapors/drugs
  - ☒ with an alcohol concentration of .08 or more ( .10 or more prior to September 1, 2001)
  - ☐ while any illegal drug or its metabolite is in the defendant's body
  - ☐ with an alcohol concentration of .04 percent or more in a commercial vehicle
  - ☒ with an alcohol concentration of .15 or more ( .18 prior to April 4, 2001 at 1:00 p.m.)
  - ☒ with an alcohol concentration of .20 or more (September 19, 2007)
- 2 Defendant appears ☐ with counsel ☐ without counsel, (waiver of counsel with file) and understands the following
- 3 Defendant entered into a ☐ plea agreement and consents to its terms ☐ plea to the court
- 4 The maximum penalty for each offense is 6 months jail, 5 years probation, \$2,500 fine + surcharges, and fees as outlined in minimum penalties below

ARS	offense	84 mos	bac	jail days	susp days	consec days	fine+84% +\$20 prob	effective abate fee	3-12-04 prison fee	8-11-05 pse fee	9-21-06 comm rest hrs	9-19-07 license suspend	mvd interlock
28-1381-A1/A2	1st	0.08	10	90	60	30	\$480	n/a	\$500	\$500	90 days	12 mos	12 mos
28-1381-A1/A2	2nd	0.08	90	60	30	\$940	n/a	\$1,250	\$1,250	30	12 mos	12 mos	12 mos
28-1381-A3	1st	drug	10	90	60	30	\$480	n/a	\$500	\$500	90 days	12 mos	12 mos
28-1381-A3	2nd	drug	90	60	30	\$940	n/a	\$1,250	\$1,250	30	12 mos	12 mos	12 mos
28-1382-A1	1st	0.15	30	0	60	\$480	\$250	\$1,000	\$1,000	90 days	12 mos	12 mos	12 mos
28-1382-A1	2nd	0.15	120	0	60	\$940	\$250	\$1,250	\$1,250	30	12 mos	12 mos	12 mos
28-1382-A2	1st	0.20	45	0	45	\$940	\$250	\$1,000	\$1,000	90 days	12 mos	18 mos	18 mos
28-1382-A2	2nd	0.20	180	0	90	\$1,860	\$250	\$1,250	\$1,250	30	12 mos	24 mos	24 mos

- 5 Court has inquired as to the defendant's probation or parole status
- 6 Defendant advised of the following: If you are not a citizen of the United States, pleading guilty or no contest to a crime may affect your immigration status. Admitting guilt may result in deportation even if the charge is later dismissed. Your plea or admission of guilt could result in your deportation or removal, could prevent you from ever being able to get legal status in the United States, or could prevent you from becoming a United States citizen.
- 7 Defendant understands that the following constitutional rights are given up by pleading guilty or no contest:
- a Right to plead not guilty and require the State to prove guilt beyond a reasonable doubt,
  - b Right to a trial by jury,
  - c Right to assistance of an attorney at all stages of the proceeding, including appeal. In some cases, the defendant may be eligible for a court-appointed attorney at a reduced cost or at no cost, if the defendant cannot afford one,
  - d Right to confront witnesses against the defendant and cross-examine them as to the truthfulness of their testimony,
  - e Right to present evidence in the defendant's own behalf and to have the court compel the defendant's witnesses to appear and testify without cost to the defendant,
  - f Right to remain silent, not to incriminate oneself, and to be presumed innocent unless/ or until proven guilty beyond a reasonable doubt,
  - g Right to a direct appeal
- 8 Defendant wishes to give up these constitutional rights after having been advised of them
- 9 There exists a basis in fact for believing the defendant is guilty of the charges indicated
- 10 The plea is voluntary and not the result of force or threat, or promises other than those contained in the plea agreement
- 11 Defendant may file a Rule 32 Petition for post-conviction relief and if denied may file a petition for review

On the basis of these findings, I conclude defendant knowingly, voluntarily, intelligently pleads ☒ guilty ☐ no contest to the above charges, and I accept this plea

Date

5/9/12

Judge

Cef

I certify that the judge personally advised me of the nature of the charges, range of penalties, and my constitutional rights as indicated above. I understand the constitutional rights which I give up by entering this plea, and I desire to plead guilty or no contest as indicated above. I desire to proceed without an attorney or if represented, my attorney's signature appears below

Defendant

X

Def Counsel/Bar No

#018461

Interpreter

30-246 3D Rev 6/09

A certified copy of an official and original Phoenix Municipal Court electronic record.

A certified copy of an official and original Phoenix Municipal Court electronic record.

.. \* \* \* PUBLIC \* \* \* PHOENIX POLICE DEPARTMENT REPORT \* \* RECORD \* \*  
ORIGINAL PAGE NUMBER: 1 DR NUMBER: 2011 02240356

REPORT DATE: 20111228 TIME: 2230

TYPE OF REPORT: DUI

OFFENSE: 390D

PROSECUTION DESIRED: YES

SUSPECT[S]: CLD

BOOKING VICTIM NOTIFIED: NO

LOCATION: 001411 N 3RD STREET

BEAT: 0724 GRID: BC28A

DATE/TIME OF OCCURRENCE: WED 122811 2121

REPORTING OFFICER[S]: JAMES LAWLER  
MICHAEL MCGILLIS

6474  
5599

UNIT: T36

PREMISES: STREET/ROADWAY/ALLEY VEHICLE

OFFENSE INVOLVED: BIAS - NONE(NO BIAS)

PARTY-CREW: NO

PHOTOGRAPHS TAKEN: NO BY:

SCENE PROCESSED FOR LATENTS: NO BY:

LATENTS SUBMITTED TO CRIME LAB: NO

REPORT DISPOSITION: FIELD CLEARED BY ARREST

OVER AGE 18: YES

\*\*\*\* SUSPECT INFORMATION \*\*\*\*

ARRESTED PERSON-01: \*\*\* SENT TO PROSECUTOR OFFICE \*\*\*  
NAME: KELLY, MATTHEW JOHN

SPEAKING: ENGLISH

SUSPECTED OF USING: ALCOHOL

RACE: W SEX: M AGE: 37 DOB: 1974 HT: 509 WT: 150  
HAIR: BRO EYES: BLU SSN:  
LEVEL OF FORCE : RESTRAINT, JOINT LOCKS, PRESSURE PTS, OR CUFFS

ARREST:

DATE: 122811 TIME: 2137 DAY: WED GRID: KK99  
LOC: 001411 N 3RD STREET PHOENIX AZ  
CLD PRINTS: YES COURT-DATE: 010612 TIME: 1030  
CLD NO: 000014007015 STATUTE: ARS 28-1381A1 CLASS: 1M

\*\*\* PROPERTY/EVIDENCE \*\*\*

RECOVERY LOCATION: 000000

2011 02240356

Continued.

PHOENIX RECORDS  
Released pursuant to  
A.R.S. § 31-201, Et. Seq.  
1/10

.. ' \*\* PUBLIC \*\*

PHOENIX POLICE DEPARTMENT REPORT

\*\* RECORD \*\*

ORIGINAL

PAGE NUMBER: 2

DR NUMBER: 2011 02240356

DATE: 000000

SEARCH WARRANT INVOLVED:

0001 PKG 001 CODE:CI AP01  
LAB/FIELD:N ITEM: PSPECIM BRAND: MODEL: BLOOD COLOR:  
DUI:YES POLICE BLOOD-DRAW:YES  
DESCRIPTION: ONE BLOOD KIT CONTAINING TWOW VIALS OF BLOOD FROM  
API MATTHEW KELLY  
TEST FOR ALCOHOL CONCENTRATION

\*\*\*\* NARRATIVE \*\*\*\*

SERIAL NUMBER: 6474

SEE RELATED ALCOHOL INFLUENCE REPORT FOR FURTHER INFORMATION

VICTIM RECEIVED RIGHTS INFORMATION: NO

MAIL-IN SUPPLEMENT: NO

INVOICES: 4079099

DR ENTERED BY : 6474 DR FINALIZED BY : 6474

END OF REPORT

DR NO: 2011 02240356

\*\* PUBLIC \*\*

PHOENIX POLICE DEPARTMENT REPORT

\*\* RECORD \*\*

ORIGINAL

PAGE NUMBER: 3

DR NUMBER: 2011 02240356

.. ' \*\* PUBLIC \*\*

PHOENIX POLICE DEPARTMENT REPORT

\*\* RECORD \*\*

ORIGINAL

PAGE NUMBER: 4

DR NUMBER: 2011 02240356

\*\*\*\*\* PHLEBOTOMY BLOOD DRAW REPORT \*\*\*\*\*

ITEM NO: 0001

AP01

CONSENT DRAW: YES WARRANT: NO WARRANT #:  
COURT OF ISSUE: ISSUING JUDGE:

TIME SERVED: 0000

MEDICAL QUESTIONS

MEDICAL PROBLEMS: NO

ALLERGIES: NO

INFECTIOUS DISEASES: NO

MEDICATIONS/BLOOD THINNERS: NO

I.V. DRUG USE: NO

TYPE OF NON-ALCOHOL SITE CLEANER USED: POVIDONE-IODINE

===== BLOOD DRAW DETAILS =====

DATE: 111228 TIME(24 HOUR): 2207

PHYSICAL ADDRESS WHERE BLOOD DRAWN: 1610 E HIGHLAND

EQUIPMENT USED: ETS

KIT/TUBES LOT NO.: 11565

EXPIRATION DATE OF VIALS(MM/YY): 0113

BLOOD DRAWN FROM: RIGHT ANTECUBITAL FOSS

COOPERATIVE: YES RESTRAINT USED: NO

RESTRAINT TYPE:

SUPERVISOR NAME/SERIAL NO:

BLOOD CLOTTED AT SITE: BETWEEN 1-3 MINUTES



\*\* PUBLIC \*\*

PHOENIX POLICE DEPARTMENT REPORT

\*\* RECORD \*\*

SUPPLEMENT

PAGE NUMBER: 1

DR NUMBER: 2011 02240356 1

REPORT DATE: 20111228 TIME: 2230

TYPE OF REPORT: DUI

OFFENSE: 390D

PROSECUTION DESIRED: YES

SUSPECT[S]: CLD

BOOKING VICTIM NOTIFIED: NO

LOCATION: 001411 N 3RD STREET

BEAT: 0724 GRID: BC28A

DATE/TIME OF OCCURRENCE: WED 122811 2121

REPORTING OFFICER[S]: JAMES LAWLER  
MICHAEL MCGILLIS

6474 UNIT: T36  
5599

PREMISES: STREET/ROADWAY/ALLEY VEHICLE

OFFENSE INVOLVED: BIAS - NONE(NO BIAS)

PHOTOGRAPHS TAKEN: NO BY:

SCENE PROCESSED FOR LATENTS: NO BY:

LATENTS SUBMITTED TO CRIME LAB: NO

REPORT DISPOSITION: FIELD CLEARED BY ARREST

OVER AGE 18: YES

=====  
= \*\*\* REQUEST FOR LAB ANALYSIS \*\*\* =  
=

CURRENT DR IS: 2011 02240356 001 BIOLOGICAL EVID (BLOOD, SEMEN, TISSUE):

NAM:

NAM:

LOCATION: 001411 N 3RD

ST

OFF:DUI

JAILED:

OFCR REQ OF ANALYSIS: LAWLER, JAMES  
(LAST, FIRST, MIDDLE) FIRM NAME USE BUS.

DATE OCC: 000000 TIME: 0000

DATE REQ: 122811 TIME: 2230

VIC:

DUI RELATED:

BUS:

INVOICE	ITEM #	SFX	TYPE	TYPE OF REQUEST
0004079099	0001		PSPECIM	BLOOD ALCOHOL

BLOOD DRAWN BY:  
LOC OF DRAWING:

1. DATE/TIME DRAW: 000000 / 0000  
2. DATE/TIME DRAW: 000000 / 0000

\*\*\*\* NARRATIVE \*\*\*\*

2011 02240356 1

Continued.

\*\* PUBLIC \*\*

PHOENIX POLICE DEPARTMENT REPORT

\*\* RECORD \*\*

SUPPLEMENT

PAGE NUMBER: 2

DR NUMBER: 2011 02240356

1

SERIAL NUMBER: 6474

TEST FOR ALCOHOL CONCENTRATION

VICTIM RECEIVED RIGHTS INFORMATION: NO

MAIL-IN SUPPLEMENT: NO

INVOICES:

DR ENTERED BY : 6474

DR FINALIZED BY : 6474

END OF REPORT

DR NO: 2011 02240356 001

\*\* PUBLIC \*\*

PHOENIX POLICE DEPARTMENT REPORT

\*\* RECORD \*\*

SUPPLEMENT

PAGE NUMBER: 1

DR NUMBER: 2011 02240356

2

REPORT DATE: 20111229 TIME: 0143

TYPE OF REPORT: DUI

OFFENSE: 390D

LOCATION: 001411 N 3RD STREET

BEAT: 0724 GRID: BC28A

DATE/TIME OF OCCURRENCE: WED 122811 2121

REPORTING OFFICER(S): ERIC GARDNER  
MICHAEL MCGILLIS

9067 UNIT: 72J  
5599

OFFENSE INVOLVED: BIAS - NONE(NO BIAS)

\*\*\*\* NARRATIVE \*\*\*\*

SERIAL NUMBER: 9067

ON 122811 AT APPROXIMATELY 2118 HOURS WHILE ON PATROL AS A SINGLE OFFICER UNIT WEARING CLASS D UNIFORM DRIVING A FULLY MARKED POLICE IMPALA, I WAS TRAVELING NORTHBOUND ON 3RD ST AND I HAD JUST PASSED PALM LN. AS I WAS TRAVELING NORTHBOUND, A SILVER IN COLOR TOYOTA SEQUOIA PASSED ME SOUTHBOUND AT A HIGH RATE OF SPEED IN THE NUMBER 1 LANE.

I TURNED AROUND TO ATTEMPT TO CATCH UP AND SEE IF I COULD GET A PACE ON THE SPEED AND RUN THE LICENSE PLATE.

AS WE APPROACHED E. MCDOWELL RD., I WAS APPROXIMATELY 25 YARDS BEHIND THE TOYOTA. THE TOYOTA THEN SWERVED QUICKLY INTO THE #2 LANE THEN QUICKLY BACK INTO THE #1 LANE CAUSING SOME DIRT TO FLY INTO THE AIR. THE LIGHT FOR NORTH AND SOUTH TRAFFIC AT THE INTERSECTION OF N. 3RD ST AND E. MCDOWELL RD WAS RED. AS THE TOYOTA APPROACHED THE RED LIGHT, JUST NORTH OF WHERE THE LEFT TURN LANE STARTS, THE TOYOTA MOVED INTO THE #1 NORTHBOUND LANE. APPROXIMATELY 1 FOOT OF THE TOYOTA WAS IN THE ONCOMING #1 TRAFFIC LANE. THE TOYOTA THEN MOVED BACK INTO THE #1 LANE AND STOPPED AT THE RED LIGHT. WHEN THE TOYOTA MADE ITS STOP, IT MADE A HARD STOP AS IF HE MISJUDGED WHERE THE CROSSWALK WAS LOCATED. I WAS ABLE TO NOW MAKE OUT THE LICENSE PLATE ON THE TOYOTA AS AZ PLATE CAU LAW.

WHILE WAITING FOR THE LIGHT TO TURN GREEN, ANOTHER VEHICLE HAD PULLED UP NEXT TO THE TOYOTA IN THE #2 LANE. WHEN THE LIGHT TURNED GREEN, THE TOYOTA AND THE OTHER VEHICLE IN THE #2 LANE STARTED TO MOVE SOUTH THROUGH THE INTERSECTION. AS THEY WERE ENTERING THE INTERSECTION, THE TOYOTA SWERVED TO THE RIGHT COMING WITHIN A FOOT OF SIDESWIPING THE VEHICLE TO ITS RIGHT. I THEN ACTIVATED MY OVERHEAD LIGHTS AND THE TOYOTA PULLED INTO THE PARKING LOT AT 1411 N. 3RD ST. THE TOYOTA PULLED INTO A PARKING SPACE IN FRONT OF THE BUILDING AND DID NOT STOP PRIOR TO THE PARKING CURB AND THE VEHICLE BUMPED THE CURB HARD CAUSING THE TOYOTA TO BOUNCE BACKWARDS OFF THE CURB.

I ADVISED DISPATCH OF MY TRAFFIC STOP AND ASKED FOR ANOTHER UNIT AS I BELIEVED THE DRIVER OF THE VEHICLE MAY BE IMPAIRED BASED ON THE DRIVING I HAD OBSERVED. OFFICER MCGILLIS #5599, WHO IS A DUI MOTOR OFFICER,

2011 02240356

2

Continued.

RESPONDED TO MY LOCATION.

I CONTACTED THE DRIVER API MATTHEW KELLY. I NOTICED THAT MATTHEW WAS CHEWING GUM. I ASKED MATTHEW HOW HE WAS DOING TONIGHT. HE SAID HE WAS FINE AND HE DIDNT SEEM TO WANT TO LOOK AT ME AS I SPOKE TO HIM. I ASKED HIM IF HE WAS HAVING ANY MEDICAL ISSUES TONIGHT THAT WOULD BE CAUSING HIM TO SWERVE OUT OF HIS LANE AS HE WAS DRIVING. HE DENIED HAVING ANY MEDICAL CONDITION. AS HE SPOKE, HIS SPEECH WAS SLOW AND SLURRED. AS HE WAS TELLING ME THAT HE WAS OK, HE LOOKED AT ME AND I COULD SEE THAT HIS EYES APPEARED TO BE BLOODSHOT AND WATERY. I ASKED MATTHEW FOR HIS LICENSE AND HIS PROOF OF INSURANCE. MATTHEW SLOWED OBTAINED HIS WALLET AND STARTED TO PULL HIS LICENSE OUT OF HIS WALLET. HE SEEMED TO BE HAVING A PROBLEM WITH COORDINATION AND REMOVING THE LICENSE FROM A POCKET INSIDE THE WALLET. HE REMOVED IT AND HANDED IT TO ME. I THEN ASKED FOR HIS INSURANCE AGAIN. HE THEN REACHED INTO HIS GLOVE BOX AND REMOVED A BUNCH OF PAPERS. HE PULLED OUT THE REGISTRATION AND ATTEMPTED TO FLIP THE FLAP COVERING THE REGISTRATION BUT HE WAS HAVING TROUBLE SEPARATING THE TOP FLAP FROM THE BOTTOM REGISTRATION. I TOLD HIM I DIDNT NEED HIS REGISTRATION, JUST HIS INSURANCE. HE TOLD ME HE WAS GETTING IT. I TOLD HIM THAT HE HAD THE REGISTRATION IN HIS HANDS, NOT HIS INSURANCE. THE NEXT PIECE OF PAPER ON HIS LAP WAS HIS CURRENT INSURANCE CARD. HE THEN HANDED ME THE CARD.

I ASKED MATTHEW IF HE HAD BEEN DRINKING TONIGHT. MATTHEW SAID HE HADNT. I ASKED IF HE HAD ANYTHING TO DRINK TONIGHT AT ALL AND HE SAID NO. I ASKED HIM WHERE WAS COMING FROM. HE SAID HE WAS GOING TO HIS OFFICE RIGHT HERE, INDICATING THE BUILDING IN FRONT OF HIS TOYOTA. I ASKED IF HE WORKED HERE AND HE SAID HE DID. I REPEATED MY QUESTION OF WHERE HE WAS COMING FROM. HE SAID HE WAS COMING FROM 2800 N. CENTRAL. I ASKED WHAT WAS THERE AND HE SAID HIS FRIENDS OFFICE. I ASKED IF HE HAD ANYTHING TO DRINK THERE AND HE SAID NO. DURING OUR CONVERSATION, HIS SPEECH WAS VERY SLOW AND SLURRED.

I THEN WENT TO MY PATROL CAR AND CONFIRMED THE LICENSE HE GAVE ME WAS THE SAME AS THE REGISTERED OWNER OF THE TOYOTA.

OFFICER MCGILLIS THEN SHOWED UP AND I EXPLAINED TO HIM THE DRIVING CUES AND BEHAVIOR I OBSERVED TO INDICATE TO ME THAT MATTHEW WAS IMPAIRED. AS I WAS TALKING TO OFFICER MCGILLIS, WE NOTICED THAT MATTHEW HAD STARTED SMOKING A CIGARETTE AS WE COULD SEE THE SMOKE EXITING THE DRIVERS SIDE AS THE LIGHT FROM MY SPOTLIGHT ILLUMINATED THE SMOKE.

OFFICER MCGILLIS THEN TOOK OVER THE INVESTIGATION. SEE HIS ORIGINAL REPORT AND AIR.

AFTER MATTHEW REFUSED TO DO ANY OF THE TESTS, OFFICER MCGILLIS PLACED MATTHEW UNDER ARREST FOR DRIVING UNDER THE INFLUENCE. I THEN TRANSPORTED MATTHEW WITHOUT INCIDENT TO 1610 E. HIGHLAND WHERE HE WAS PROCESSED FOR DUI.

VICTIM RECEIVED RIGHTS INFORMATION: NO

MAIL-IN SUPPLEMENT:

.. ' \*\* PUBLIC \*\*

PHOENIX POLICE DEPARTMENT REPORT

\*\* RECORD \*\*

SUPPLEMENT

PAGE NUMBER: 3

DR NUMBER: 2011 02240356 2

INVOICES:

DR ENTERED BY : 9067

DR FINALIZED BY : 9067

END OF REPORT

DR NO: 2011 02240356 002



\*\* PUBLIC \*\*

PHOENIX POLICE DEPARTMENT REPORT

\*\* RECORD \*\*

SUPPLEMENT

PAGE NUMBER: 1

DR NUMBER: 2011 02240356

3

REPORT DATE: 20120102 TIME: 0340

TYPE OF REPORT: DUI

OFFENSE: 390D

PROSECUTION DESIRED: YES

SUSPECT[S]: CLD

LOCATION: 001411 N 3RD STREET

BEAT: 0724 GRID: BC28A

DATE/TIME OF OCCURRENCE: WED 122811 2121

REPORTING OFFICER[S]: MICHAEL MCGILLIS

5599

UNIT: T36

PREMISES: STREET/ROADWAY/ALLEY  
PARKING LOT

VEHICLE

OFFENSE INVOLVED: BIAS - NONE(NO BIAS)

\*\*\*\* NARRATIVE \*\*\*\*

SERIAL NUMBER: 5599

ON 122811 AT 2121 HOURS, OFFICER GARDNER 9067 CONDUCTED A TRAFFIC STOP IN THE PARKING LOT, AT 1411 NORTH 3RD STREET, ON A 2006 GOLD FOUR DOOR TOYOTA SEQUOIA, ARIZONA PERSONALIZED PLATE CUALAW. THIS VEHICLE WAS FOUND TO BE OCCUPIED BY ONE WHITE MALE DRIVER, IDENTIFIED AS API MATTHEW JOHN KELLY DATE OF BIRTH .74 ARIZONA OLN NUMBER (IN POSSESSION). AT THE TIME OF THE TRAFFIC STOP, OFFICER GARDNER REQUESTED AN IMMEDIATE BACK-UP BELIEVING THE DRIVER OF THE VEHICLE, BY THE DRIVING OBSERVED, TO POTENTIALLY BE IMPAIRED.

I ARRIVED AT THE STOP LOCATION, AT 2125 HOURS, WHERE I FOUND OFFICER GARDNER OUT WITH API MATTHEW. I WAS BRIEFED BY OFFICER GARDNER AS TO THE DRIVING OBSERVED. OFFICER GARDNER INITIALLY STATED THAT HE WAS TRAVELING NORTHBOUND ON 3RD STREET AND OBSERVED THE LISTED TOYOTA SEQUOIA IN THE SOUTHBOUND DIRECTION OF TRAVEL AT A HIGH RATE OF SPEED. HE ESTIMATED THE SPEED AT LEAST 50 MILES PER HOUR IN A POSTED 35 MILE PER HOUR ZONE.

HE STATED HE FIRST OBSERVED THE VEHICLE SOUTHBOUND ON 3RD STREET AROUND PALM LANE, WHICH IS NORTH OF MCDOWELL ROAD. OFFICER GARDNER ALSO DESCRIBED THE POSITION IN WHICH API MATTHEW POSITIONED HIS VEHICLE AT THE RED LIGHT AT MCDOWELL. OFFICER GARDNER HAD MADE A U-TURN AND PROCEEDED SOUTHBOUND AFTER THE VEHICLE. WHEN THE LIGHT CYCLED GREEN FOR SOUTHBOUND TRAFFIC, OFFICER GARDNER OBSERVED API MATTHEW FOUND TO DRIVE WITHIN ONE LANE OF TRAVEL AND DRIFTING OUTSIDE THE SOUTHBOUND NUMBER ONE LANE. AS THE TRAFFIC STOP WAS CONDUCTED, API MATTHEW PULLED INTO THE PARKING LOT AT 1411 NORTH 3RD STREET AND STRUCK THE CURB COMING TO AN ABRUPT STOP, AT WHICH TIME, OFFICER GARDNER REQUEST A BACK-UP. OFFICER GARDNER STATED THAT THE DRIVER WAS SEVERELY IMPAIRED BUT DENIED DRINKING. HE ADVISED ME THAT API MATTHEW HAD VERY THICK SLURRED SPEECH AND STATED THAT THIS IS HIS WORK ADDRESS.

I WALKED UP TO THE FRONT DRIVERS FRONT DOOR AND CONTACTED API MATTHEW WHO

2011 02240356

3

Continued.

WAS STILL SEATED BEHIND THE WHEEL. HE WAS SMOKING A CIGARETTE. OFFICER GARDNER STATED THAT INITIALLY API MATTHEW WAS NOT SMOKING BUT HAD JUST APPARENTLY LIT UP. I ASKED API MATTHEW TO EXIT THE VEHICLE AND PUT THE CIGARETTE OUT. I ASKED IF HE WAS CURRENTLY TAKING ANY TYPES OF MEDICATIONS. API MATTHEW WITH THICK SLURRED SPEECH STATED THAT HE WAS HEALTHY, NOT TAKING ANY MEDICATIONS AND WAS SIMPLY IN A HURRY TO GET TO HIS OFFICE. API MATTHEW, WHILE SPEAKING WITH ME, WAS EXHIBITING RED WATERY EYES, HEAVY FRONT TO BACK SIDE TO SIDE SWAY AND A STRONG ODOR OF ALCOHOL. HE WAS OBSERVED CHEWING SOMETHING IN HIS MOUTH WHICH APPEARED TO BE GUM SO I ASKED HIM TO SPIT IT OUT, AT WHICH TIME HE DID. I ASKED WHERE HE WAS COMING FROM. HE ADVISED ME, "2800 NORTH CENTRAL." HE STATED HE WAS WITH A FRIEND AT THEIR OFFICE AT A BUSINESS MEETING AND STATED HIS FRIEND'S NAME IS AYA MCLEAN. AGAIN, ASKED HIM IF HE WAS CURRENTLY ON ANY MEDICATION DUE TO HIS EXTREMELY POOR BALANCE. HE ENDED UP LEANING BACKWARDS INTO HIS VEHICLE AND THEN REMAINED LEANING UP AGAINST HIS VEHICLE FOR BALANCE DURING MY CONTACT. HE AGAIN ADVISED ME HE WAS NOT CURRENTLY TAKING ANY MEDICATIONS, THEREFORE, I ASKED HIM AGAIN IF HE CONSUMED ALCOHOL THROUGHOUT THE COURSE OF THE DAY OR EVENING. HE AGAIN DENIED DRINKING. HE ASKED ME WHY HE WAS STOPPED AND I EXPLAINED TO HIM THE DRIVING WHICH OFFICER GARDNER HAD OBSERVED. I ASKED HIM IF HE HAD ANY RECOLLECTION OF SPEEDING, FAILURE TO DRIVE WITHIN HIS LANE OR STRIKING THE PARKING CURB UPON ENTERING HIS PARKING LOT. HE REPLIED, "NO IDEA, MAYBE I WAS ON THE PHONE." I ASKED IF HE WAS WEARING CONTACTS. HE REPLIED, "NO."

I THEN ASKED API MATTHEW TO STAND AWAY FROM THE VEHICLE, IN FRONT OF ME WITH HIS FEET, HEELS AND TOES TOGETHER, ARMS DOWN TO HIS SIDE. AS I PREPARED TO CONDUCT A HGN TEST, API MATTHEW STATED, "I'M NOT DOING IT." I ADVISED API MATTHEW THAT IF HE HAD NOT CONSUMED ANY ALCOHOL, HE HAD NOTHING TO WORRY ABOUT. I TOLD HIM, I WAS SIMPLY GOING TO EVALUATE HIS ABILITY TO PERFORM ROAD SIDE TEST, MAKE SURE HE WAS OK TO BE DRIVING. I ADVISED API MATTHEW THAT MY ROAD SIDE TEST WERE VOLUNTARY AND THAT HE DID NOT HAVE TO CONDUCT THEM, HOWEVER, OFFICERS WOULD ONLY BE ABLE TO GO OFF OF DRIVING OBSERVED AND OUTWARDLY SIGNS. I EXPLAINED TO API MATTHEW THAT IT WAS QUITE OBVIOUS THAT HE WAS IMPAIRED BY THE ALCOHOL HE HAD CONSUMED. I EXPLAINED TO API MATTHEW THAT HIS WORDS THROUGHOUT MY ENTIRE CONTACT WERE SLOW, THICK AND SLURRED; SOME OF HIS WORDS SO SLURRED THAT ALL HIS WORDS AT TIMES WERE RUN TOGETHER. HIS EYES RED AND WATERY, HIS BALANCE EXTREMELY POOR THROUGHOUT MY ENTIRE CONTACT. AT TIMES HE HAD DIFFICULTY SIMPLY EVEN HOLDING HIS HEAD UP, WHICH IS COMMON WITH PEOPLE AT HIGH CONCENTRATION LEVELS TO HAVE WHAT'S CALLED, "BABY NECK," OR, "BOBBLE HEAD."

AT 2137 HOURS, I AGAIN ASKED API MATTHEW IF HE WOULD VOLUNTARILY DO ROAD SIDE TEST. HE REPLIED, "NO." I ADVISED API MATTHEW TO TURN AROUND, PLACING HIS HANDS BEHIND HIS BACK ADVISING HIM HE WAS UNDER ARREST FOR DUI. I REMOVED HIS PERSONAL BELONGINGS FROM HIS POCKETS AND SAW THAT HE HAD SOME PILLS IN HIS POCKET. HE ADVISED ME THE PILLS WERE FOR, "OR ' ' " IT WAS AN OVAL WHITE PILL WITH THE MARKINGS N947. HE ADVISED ME THAT THE NAME OF THE PILL WAS, " " I LATER LOOKED THIS UP AND THE PILL WAS IN FACT EXACTLY WHAT API MATTHEW EXPLAINED TO ME THAT IT IS FOR " " "

SUPPLEMENT

PAGE NUMBER: 3

DR NUMBER: 2011 02240356

3

THE VEHICLE WHICH AP1 MATTHEW WAS OPERATING WAS SECURED AT THE SOUTH LOCATION AND HE WAS TRANSPORTED TO A DUI VAN, LOCATED AT 16TH STREET AND HIGHLAND.

UPON ARRIVAL, HE WAS UNHANDCUFFED AND ENTERED THE DUI VAN, AT 2153 HOURS. AS AP1 MATTHEW SAT DOWN, OFFICER LAWLER ASKED HIM IMMEDIATELY IF HE WOULD LIKE TO PLACE ANY PHONE CALLS USING HIS PERSONAL CELL PHONE OR THE VAN PHONE, AP1 MATTHEW DECLINED ANY PHONE CALLS AT THIS TIME. WHILE INSIDE THE VAN, OFFICER LAWLER 6474 BEGAN BY OBTAINING PERTINENT INFORMATION REGARDING THIS INCIDENT. HE THEN BEGAN BY READING MIRANDA WARNINGS FOLLOWED BY THE ADMIN PER SE. AP1 MATTHEW CONSENTED TO THE BLOOD DRAW AND SIGNED THE CONSENT FORM PRIOR TO OFFICER LAWLER CONDUCTING THE BLOOD DRAW. WHILE INSIDE THE DUI VAN, AP1 MATTHEW'S SPEECH CONTINUED TO BE SLOW, THICK AND SLURRED, THE ODOR OF ALCOHOL WAS STRONGER INSIDE THE CONFINED VAN.

I OBSERVED THE BLOOD DRAW AT 2207 HOURS. OFFICER LAWLER WITHOUT INCIDENT DREW TWO VIALS OF BLOOD FROM AP1 MATTHEW'S RIGHT ANTECUBITAL FOSSA. THE BLOOD WAS PROPERLY INVERTED PRIOR TO BE LABELED AND THEN SECURED BACK INTO THE BLOOD KIT. OFFICER LAWLER EXPLAINED TO AP1 MATTHEW THAT ONE OF THE VIALS WOULD BE TESTED THROUGH THE PHOENIX CRIME LAB AND THOSE RESULTS WOULD BE AVAILABLE TO HIM WHEN HE WENT TO COURT ON JANUARY 6TH. HE WAS ALSO ADVISED THAT THE OTHER VIAL OF BLOOD WOULD BE RETAINED AT THE CRIME LAB FOR HIM, SHOULD HE OR HIS ATTORNEY WANT TO OBTAIN IT AND HAVE IT INDEPENDENTLY TESTED TO COMPARE THEIR RESULTS TO OUR RESULTS. AP1 MATTHEW WAS ALSO RIGHT TO ARRANGE FOR AND PAY FOR HIS OWN INDEPENDENT CHEMICAL TEST. AP1 MATTHEW CONDUCTED AN INTERVIEW STILL DENYING DRINKING ANY ALCOHOL.

HE WAS PHOTOGRAPHED, FINGERPRINTED AND ISSUED COMPLAINT NUMBER 14007015 FOR THE DUI RELATED OFFENSES AND FAILURE TO DRIVE IN ONE LANE OF TRAVEL. HE WAS NOT CHARGED WITH THE SPEED VIOLATION SIMPLY BECAUSE THE OFFICER WAS NOT ABLE TO CONDUCT A PACE HE SIMPLY VISUALLY ESTIMATED THE SPEEDING AS AP1 MATTHEW PASSED HIM IN THE OPPOSITE DIRECTION OF TRAVEL ALONG 3RD STREET. AP1 MATTHEW PLACED ONE PHONE CALL TO A FRIEND FOR A RIDE HOME. AFTER THE PROCESSING WAS COMPLETED, HE WAS PHOTOGRAPHED, FINGERPRINTED AND ISSUED COMPLAINT NUMBER 14007015 AND RELEASED TO HIS FRIEND'S SON, AT 2245 HOURS.

FOR FURTHER INFORMATION REGARDING THIS INCIDENT REFER TO THE ORIGINAL ALCOHOL INFLUENCE REPORT.

PAGE A4812/5599/010212/1225/1364/VW 1122837  
DICTATED ON 010212/0338/1

VICTIM RECEIVED RIGHTS INFORMATION: NO

MAIL-IN SUPPLEMENT:

INVOICES:

DR ENTERED BY : \*4812

DR FINALIZED BY : \*4812

2011 02240356

3

Continued.

.. ' ' \*\* PUBLIC \*\*

PHOENIX POLICE DEPARTMENT REPORT

\*\* RECORD \*\*

SUPPLEMENT

PAGE NUMBER: 4

DR NUMBER: 2011 02240356 3

END OF REPORT

DR NO: 2011 02240356 003

.. ' \*\* PUBLIC \*\*

PHOENIX POLICE DEPARTMENT REPORT

\*\* RECORD \*\*

SUPPLEMENT

PAGE NUMBER: 1

DR NUMBER: 2011 02240356 4

REPORT DATE: 20120111 TIME: 1209

TYPE OF REPORT: DUI

OFFENSE: 390D

PROSECUTION DESIRED: YES

SUSPECT[S]: CLD

BOOKING VICTIM NOTIFIED: NO

LOCATION: 001411 N 3RD STREET

BEAT: 0724 GRID: BC28A

DATE/TIME OF OCCURRENCE: WED 122811 2121

REPORTING OFFICER[S]: NATASHA IMADIYI

A5245 UNIT: C23

PREMISES: STREET/ROADWAY/ALLEY VEHICLE

OFFENSE INVOLVED: BIAS - NONE(NO BIAS)

PHOTOGRAPHS TAKEN: NO BY:

SCENE PROCESSED FOR LATENTS: NO BY:

LATENTS SUBMITTED TO CRIME LAB: NO

OVER AGE 18: YES

\*\*\*\* NARRATIVE \*\*\*\*

SERIAL NUMBER: A5245

ORIGINATING DR: 201102240356 001

THE FOLLOWING IS A SUMMARY OF THE LABORATORY EXAMINATION RESULTS.  
CONTACT THE LABORATORY BUREAU FOR THE OFFICIAL REPORT.

ANALYST: NATASHA IMADIYI(A5245)

SUBJECT: MATTHEW KELLY ITEM 4079099-0001 ALCOHOL RESULT: 0.25  
0 GRAMS PER 100ML

VICTIM RECEIVED RIGHTS INFORMATION: NO

MAIL-IN SUPPLEMENT: NO

INVOICES:

DR ENTERED BY : DRLIM DR FINALIZED BY : DRLIM

END OF REPORT

DR NO: 2011 02240356 004