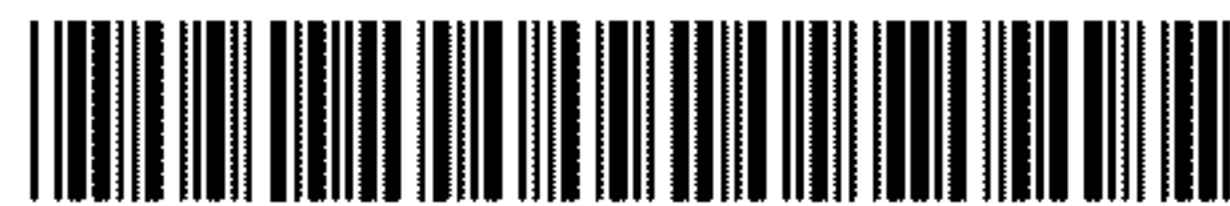


Date	Court Action, Orders, Entries		
	Count	Plea	
	A	<input type="checkbox"/> GG	<input type="checkbox"/> NG <input type="checkbox"/> NC
	B	<input type="checkbox"/> GG	<input type="checkbox"/> NG <input type="checkbox"/> NC
	C	<input type="checkbox"/> GG	<input type="checkbox"/> NG <input type="checkbox"/> NC
	D	<input type="checkbox"/> GG	<input type="checkbox"/> NG <input type="checkbox"/> NC
	E	<input type="checkbox"/> GG	<input type="checkbox"/> NG <input type="checkbox"/> NC
	F	<input type="checkbox"/> GG	<input type="checkbox"/> NG <input type="checkbox"/> NC
Finding on No Contest Plea			
	A	<input type="checkbox"/> GG	<input type="checkbox"/> NG <input type="checkbox"/> DISMISSED
	B	<input type="checkbox"/> GG	<input type="checkbox"/> NG <input type="checkbox"/> DISMISSED
	C	<input type="checkbox"/> GG	<input type="checkbox"/> NG <input type="checkbox"/> DISMISSED
	D	<input type="checkbox"/> GG	<input type="checkbox"/> NG <input type="checkbox"/> DISMISSED
	E	<input type="checkbox"/> GG	<input type="checkbox"/> NG <input type="checkbox"/> DISMISSED
	F	<input type="checkbox"/> GG	<input type="checkbox"/> NG <input type="checkbox"/> DISMISSED
MOTION FOR			
WAIVER OF TRIAL TIME FILED			
REQUEST FOR PRETRIAL HEARING FILED			
ENTRY			
	A	\$	BOND FORFEITED
	B	\$	BOND FORFEITED
	C	\$	BOND FORFEITED
	D	\$	BOND FORFEITED
	E	\$	BOND FORFEITED
	F	\$	BOND FORFEITED
BENCH WARRANT ORDERED: BOND SET AT \$			
TRIAL BY <input type="checkbox"/> COURT <input type="checkbox"/> JURY			
DEFT FOUND:			
	A	<input type="checkbox"/> GG	<input type="checkbox"/> NG <input type="checkbox"/> DISMISSED
	B	<input type="checkbox"/> GG	<input type="checkbox"/> NG <input type="checkbox"/> DISMISSED
	C	<input type="checkbox"/> GG	<input type="checkbox"/> NG <input type="checkbox"/> DISMISSED
	D	<input type="checkbox"/> GG	<input type="checkbox"/> NG <input type="checkbox"/> DISMISSED
	E	<input type="checkbox"/> GG	<input type="checkbox"/> NG <input type="checkbox"/> DISMISSED
	F	<input type="checkbox"/> GG	<input type="checkbox"/> NG <input type="checkbox"/> DISMISSED
DEFENDANT HAVING PLEADED OR CHANGE PLEA TO			
<input type="checkbox"/> GUILTY			
<input type="checkbox"/> NOT GUILTY AND FOUND GUILTY			
<input type="checkbox"/> NO CONTEST AND FOUND GUILTY			
THE COURT THEREFORE IMPOSES THE FOLLOWING SENTENCE			
FINE: COST:			
	A	\$	Y N <input type="checkbox"/> DISMISSED
	B	\$	Y N <input type="checkbox"/> DISMISSED
	C	\$	Y N <input type="checkbox"/> DISMISSED
	D	\$	Y N <input type="checkbox"/> DISMISSED
	E	\$	Y N <input type="checkbox"/> DISMISSED
	F	\$	Y N <input type="checkbox"/> DISMISSED
JAIL:			
SUSPENSION OF DRIVING			
RIGHTS:			
ENTRY MODIFYING SUSPENSION JUDGE			
NOTICE OF APPEAL			
ATTORNEY NAME AND			
ADDRESS			



24TRD02726

TICKET NO. OHP120115032920242319
NUMBER OF COUNTS 3

CLARK COUNTY
MUNICIPAL COURT OF
SPRINGFIELD, OHIO

THE STATE OF OHIO
THE CITY OF SPRINGFIELD

VS

JOSIAH SR LEWIS GILBERT
223 S WESTERN AVE
SPRINGFIELD OH 45506

D.O.B.: 1985-06-20
SSN :

VIOLATION:

4510.14
4511.204
4511.43A

DATE OF ARRAIGNMENT: 2024-04-05 1100

ASSIGNMENT:

1
2
3
4
5
6
7

INSURED? NO
OL HELD ? NO

BOND POSTED – CASH SURETY
AMOUNT

TO DEFENDANT: SUMMONS YOU ARE SUMMONED AND ORDERED TO APPEAR

ON 04/05/2024 AT 1100 IN Clark Co Municipal Court

AT 50 E COLUMBIA ST, SPRINGFIELD, OH, 45501 .

CITY VILLAGE TOWNSHIP Springfield, Clark COUNTY, OHIO

PERSONAL APPEARANCE
REQUIRED :

Yes No

If you fail to appear at this time and place you may be arrested or your license may be cancelled.

TICKET# OHP120115032920242319

CASE #

NAME Josiah Lewis Gilbert

REFERENCE # 2H9F1Z1

STREET, CITY 223 S Western Ave, Springfield

COUNTY, STATE, ZIP OH, 45506

PHONE# (937) 521-0939 TEXT/PHONE NOTIFICATION APPROVED? YES NO

OPERATOR LICENSE / STATE ID#	None	BIRTH DATE	ISSUE DATE	STATE
SQ217616		06/20/1985	12/05/2022	OH

* If no OL/State ID: REQUIRED documentation attached: Yes

CLASS	EXPIRES	ENDORSEMENT(S)/RESTRICTION(S)	SS# (last 4 digits)
	06/20/2026	CDL MC Other	

SEX	HEIGHT	WEIGHT	EYES	HAIR	RACE	FINANCIAL RESPONSIBILITY PROOF?
M	6'1"	220	BRO	BLK	BNH	Yes No N/A

TO DEFENDANT: COMPLAINT ON Mar 29, 2024 AT 2131, YOU

Operated / Passenger / Parked / Walked at Passenger Motorcycle Bicycle Other :

Commercial DOT# >=26,001 lbs. <16 Pass. Bus >=16 Pass. Bus Haz. Mat.

VEHICLE: YEAR 1998 MAKE Toyota MODEL 4Door

COLOR Green, Dark LICENSE # JZS1506 STATE OH

UPON A PUBLIC HIGHWAY, NAMELY Clifton Avenue DIRECTION Northbound

AT/NEAR Rice Street (M.P)

IN THE City OF Springfield IN Clark

COUNTY #: 12 STATE OF OHIO AND COMMITTED THE FOLLOWING OFFENSE(S).

SPEED: MPH in MPH zone	ORC ORD T.P.
<input type="checkbox"/> Over limits <input type="checkbox"/> Unsafe for conditions <input type="checkbox"/> ACDA	
<input type="checkbox"/> Radar <input type="checkbox"/> Air <input type="checkbox"/> VASCAR <input type="checkbox"/> PACE <input type="checkbox"/> LASER	<input type="checkbox"/> Stationary <input type="checkbox"/> Moving
OVI: <input type="checkbox"/> Under the influence of alcohol/drug of abuse.	ORC ORD T.P.
<input type="checkbox"/> In physical control of vehicle.	
<input type="checkbox"/> Prohibited blood alcohol concentration. BAC	
<input type="checkbox"/> Blood <input type="checkbox"/> Breath <input type="checkbox"/> Urine <input type="checkbox"/> Refused	
Prior OVIs: # of prior OVIs Years of prior OVIs	
DRIVER LICENSE: None Not on person Revoked Suspended	ORC ORD T.P.
EXPIRED: < 6 months > 6 months Failure to Reinstate	4510.14
Suspension Type: Driving Under OVI Suspension	
SAFETY BELT: Failure to wear	ORC ORD T.P.
<input type="checkbox"/> Driver <input type="checkbox"/> Passenger <input type="checkbox"/> Child Restraint <input type="checkbox"/> Booster Seat	
OTHER OFFENSE: Prohibited Use of an Electronic Device (Adult)	ORC ORD T.P.
4511.204	
<input type="checkbox"/> DRIVER LICENSE HELD <input type="checkbox"/> VEHICLE SEIZED <input type="checkbox"/> JUVENILE TRAFFIC OFFENDER	
<input type="checkbox"/> DISTRACTED DRIVING PENALTY ENHANCEMENT APPLIES (REMARKS REQUIRED)	
PAVEMENT: Dry Wet Snow Ice # of Lanes 2	
VISIBILITY: Clear Cloudy Dusk Night Dawn	AVV
WEATHER: Rain Snow Fog No Adverse	Construction Zone
TRAFFIC: Heavy Moderate Light None	Workers Present
AREA: Business Freeway Industrial Residential Rural School	
CRASH: Yes No Almost Caused Non-Injury INJURY FATAL	
Crash Report #:	
REMARKS: see attached	
ACCOMPANYING CRIMINAL CHARGE(S): Yes No TOTAL # OFFENSES: 3	

This summon served personally on the defendant on Mar 29, 2024

The issuing/charging law enforcement officer states under the penalties of perjury and falsification that he/she has read the above complaint and that it is true.

Tpr. N Bishop

Charging Law Enforcement Officer

Issuing Law Enforcement Officer SAME AS ABOVE

Issuing Officer: Verify Defendant's address. If different from License address, write current address in space provided.

OHP 0060 01/20 HP7 110-0060-00 [760-0807]

COURT RECORD

Court Code	Unit	Post	District
1220	0115	12	05

Docket # Page # Case #

Defendant's Attorney

Name / Address / Telephone

If Juvenile, Parents' Names:

Phone#:

Grade:

School:

DATE	COURT ACTION: ORDERS
	BAIL
	<input type="checkbox"/> No Bail - Defendant cited and released.
	<input type="checkbox"/> Bail in the amount of \$ set by Judge pursuant to bail schedule.
BOND AMOUNT	BOND TYPE
\$	Cash Personal 10% AAA/Insurance Bond
	Unsecured Surety O.I. Held Other

Depositor:

Name / Address / Telephone

Defendant released upon execution of Bail as noted: See Bond forms - received by

CONTINUANCE Requester:	New DATE
CONTINUANCE Reason:	
<input type="checkbox"/> Defendant Failed to Appear	
<input type="checkbox"/> Order Supplemental Summons to New Date	
<input type="checkbox"/> Order Operator's License Forfeiture <input type="checkbox"/> Bond Forfeiture	
<input type="checkbox"/> Order Warrant: Bond Amount \$	
<input type="checkbox"/> Summons Issued	Served DATE:
<input type="checkbox"/> Warrant Issued	Executed DATE:
	/ /

Judge/Magistrate

DATE

COURT ENTRY
Defendant present with/without Counsel. All rights pursuant to Criminal Rules 10 & 11, Traffic Rules 8 & 10 explained.

	COUNT				
	SPEED	OVI	LICENSE	SEATBELT	
Initial Plea					
Trial Date					
Finding					
Fine \$					
Costs \$					
Jailtime (Days)					
	SUSPENDED				
Fines \$					
Costs \$					
Jailtime (Days)					

ADDITIONAL ORDERS
<input type="checkbox"/> If OVI conviction: 72 hour program permitted in lieu of jail.
<input type="checkbox"/> Defendant's License is SUSPENDED for day(s)/month(s)/year(s), which shall commence on and end on
<input type="checkbox"/> Defendant is granted Limited Driving Privileges as follows, effective:
<input type="checkbox"/> Defendant to pay fines on Payment Program - see separate entry.
<input type="checkbox"/> If WAIVERED: MET Requirements of Waiver PAID Fines and Costs ACCEPTED Guilty Pleas(s)
<input type="checkbox"/> MADE Guilty Finding(s). Imposed Fines and Costs noted below.

FOR CLERK'S USE	COUNT				
	SPEED	OVI	LICENSE	SEATBELT	
Fines \$					
Costs - Local \$					
Costs - State \$					
TOTAL \$					
Receipt #(s)					

If WAIVERED: Guilty Pleas(s), Waiver(s) and Payments made: In Person By Mail

Receipt supplied to defendant: In Person Check is receipt By Mail via USPS First Class LETTER RATE mail to defendant's present address.

Financial Responsibility PROOF SHOWN

NO Financial Responsibility PROOF - Clerk to notify BMV

Financial Responsibility PROOF NOT APPLICABLE

Clerk/Violations Clerk/Deputy Clerk

DATE Abstract Mailed to BMV

DATE Mayor's Court Transfer/Notice of Appeal

Ticket Number: OHP120115032920242319

TO DEFENDANT: SUMMONS YOU ARE SUMMONED AND ORDERED TO APPEAR

ON 04/05/2024 AT 1100 IN Clark Co Municipal Court

AT 50 E COLUMBIA ST, SPRINGFIELD, OH, 45501 .

CITY VILLAGE TOWNSHIP Springfield, Clark COUNTY ,OHIO

PERSONAL APPEARANCE REQUIRED : Yes No If you fail to appear at this time and place you may be arrested or your license may be cancelled.

TICKET# OHP120115032920242319 - A CASE #

NAME Josiah Lewis Gilbert REFERENCE # 2H9F1Z1

STREET,CITY 223 S Western Ave, Springfield

COUNTY, STATE, ZIP OH ,45506

PHONE# (937) 521-0939 TEXT/PHONE NOTIFICATION APPROVED? YES NO

OPERATOR LICENSE / STATE ID# None BIRTH DATE 06/20/1985 ISSUE DATE 12/05/2022 STATE OH

* If no OL/State ID: REQUIRED documentation attached: Yes

CLASS EXPIRES ENDORSEMENT(S)/RESTRICTION(S) SS# (last 4 digits) 06/20/2026 CDL MC Other

SEX HEIGHT WEIGHT EYES HAIR RACE FINANCIAL RESPONSIBILITY PROOF? M 6'1" 220 BRO BLK BNH Yes No N/A

TO DEFENDANT: COMPLAINT ON Mar 29, 2024 AT 2131 , YOU

Operated /Passenger /Parked /Walked at Passenger Motorcycle Bicycle Other :

Commercial DOT# >=26,001 lbs. <16 Pass. Bus >=16 Pass. Bus Haz. Mat.

VEHICLE: YEAR 1998 MAKE Toyota MODEL 4Door

COLOR Green, Dark LICENSE # JZS1506 STATE OH

UPON A PUBLIC HIGHWAY, NAMELY Clifton Avenue DIRECTION Northbound

AT/NEAR Rice Street (M.P)

IN THE City OF Springfield IN Clark

COUNTY #: 12 STATE OF OHIO AND COMMITTED THE FOLLOWING OFFENSE(S).

SPEED: MPH in MPH zone ORC ORD T.P. Over limits Unsafe for conditions ACDA Radar Air VASCAR PACE LASER Stationary Moving

OVI: Under the influence of alcohol/drug of abuse. In physical control of vehicle. Prohibited blood alcohol concentration. BAC Blood Breath Urine Refused

Prior OVIs: # of prior OVIs Years of prior OVIs

DRIVER LICENSE: None Not on person Revoked Suspended EXPIRED: < 6 months > 6 months Failure to Reinstate Suspension Type: ORC ORD T.P.

SAFETY BELT: Failure to wear Driver Passenger Child Restraint Booster Seat ORC ORD T.P.

OTHER OFFENSE: Failure To Stop/Yield At A Stop Sign ORC ORD T.P. 4511.43A

DRIVER LICENSE HELD VEHICLE SEIZED JUVENILE TRAFFIC OFFENDER DISTRACTED DRIVING PENALTY ENHANCEMENT APPLIES (REMARKS REQUIRED)

PAVEMENT: Dry Wet Snow Ice # of Lanes 2

VISIBILITY: Clear Cloudy Dusk Night Dawn AV

WEATHER: Rain Snow Fog No Adverse Construction Zone

TRAFFIC: Heavy Moderate Light None Workers Present

AREA: Business Freeway Industrial Residential Rural School

CRASH: Yes No Almost Caused Non-Injury INJURY FATAL

Crash Report #.

REMARKS: see attached

ACCOMPANYING CRIMINAL CHARGE(S): Yes No TOTAL # OFFENSES: 3

This summon served personally on the defendant on Mar 29, 2024

The issuing/charging law enforcement officer states under the penalties of perjury and falsification that he/she has read the above complaint and that it is true.

Tpr. N Bishop Charging Law Enforcement Officer

Issuing Law Enforcement Officer SAME AS ABOVE

Issuing Officer: Verify Defendant's address. If different from License address, write current address in space provided.

OHP 0060 01/20 HP7 110-0060-00 [760-0807] COURT RECORD

Docket # Page # Case #

Defendant's Attorney

Name / Address / Telephone

If Juvenile, Parents' Names:

Phone#:

Grade: School:

COURT ACTION: ORDERS BAIL No Bail - Defendant cited and released. Bail in the amount of \$ set by Judge pursuant to bail schedule.

BOND AMOUNT BOND TYPE \$ Cash Personal 10% AAA/Insurance Bond Unsecured Surety O.I. Held Other

Depositor: Name / Address / Telephone

Defendant released upon execution of Bail as noted: See Bond forms - received by

CONTINUANCE Requester: New DATE

CONTINUANCE Reason:

Defendant Failed to Appear

Order Supplemental Summons to New Date

Order Operator's License Forfeiture Bond Forfeiture

Order Warrant: Bond Amount \$

Summons Issued Served DATE:

Warrant Issued Executed DATE:

Judge/Magistrate DATE

COURT ENTRY

Defendant present with/without Counsel. All rights pursuant to Criminal Rules 10 & 11, Traffic Rules 8 & 10 explained.

COUNT SPEED OVI LICENSE SEATBELT Initial Plea Trial Date Finding Fine \$ Costs \$ Jailtime (Days) SUSPENDED Fines \$ Costs \$ Jailtime (Days)

ADDITIONAL ORDERS

If OVI conviction: 72 hour program permitted in lieu of jail.

Defendant's License is SUSPENDED for day(s)/month(s)/year(s), which shall commence on and end on

Defendant is granted Limited Driving Privileges as follows, effective:

Defendant to pay fines on Payment Program - see separate entry.

If WAIVERED: MET Requirements of Waiver PAID Fines and Costs ACCEPTED Guilty Pleas(s)

MADE Guilty Finding(s). Imposed Fines and Costs noted below.

Judge/Magistrate DATE

FOR CLERK'S USE COUNT SPEED OVI LICENSE SEATBELT Fines \$ Costs - Local \$ Costs - State \$ TOTAL \$ Receipt #(s)

If WAIVERED: Guilty Pleas(s), Waiver(s) and Payments made: In Person By Mail

Receipt supplied to defendant: In Person Check is receipt By Mail via USPS First Class LETTER RATE mail to defendant's present address.

Financial Responsibility PROOF SHOWN

NO Financial Responsibility PROOF - Clerk to notify BMV

Financial Responsibility PROOF NOT APPLICABLE

Clerk/Violations Clerk/Deputy Clerk

DATE Abstract Mailed to BMV DATE Mayor's Court Transfer/Notice of Appeal

Ticket Number: OHP120115032920242319



OHIO DEPARTMENT OF PUBLIC SAFETY
OHIO STATE HIGHWAY PATROL

IMPAIRED DRIVER REPORT

NAME Josiah L Gilbert Sr.	ARREST OHP120115032920242316
VEHICLE CONDITION Poor	
VEHICLE DISPOSITION Towed	

CLOTHING DESCRIPTION AND CONDITION

HAT OR CAP Brown hat and ski mask	
JACKET OR COAT Zipped hooded jacket	
SHIRT OR DRESS T shirt	
PANTS OR SKIRT Jeans	
SHOES Laced athletic shoes	HEELS N/A
ODOR OF ALCOHOLIC BEVERAGE N/A	
SPEECH Slow, slurred	
EVIDENCE OF DRUG USE (PUPIL SIZE) Dilated	

DIVIDED ATTENTION SKILLS

RIGHT EYE	HORIZONTAL / VERTICAL GAZE NYSTAGMUS	LEFT EYE																				
<input checked="" type="checkbox"/>	DISTINCT NYSTAGMUS AT MAXIMUM DEVIATION	<input checked="" type="checkbox"/>																				
<input checked="" type="checkbox"/>	LACK OF SMOOTH PURSUIT	<input checked="" type="checkbox"/>																				
<input type="checkbox"/>	ONSET OF NYSTAGMUS BEFORE 45°	<input type="checkbox"/>																				
<input type="checkbox"/>	PRESENCE OF VERTICAL NYSTAGMUS	<input type="checkbox"/>																				
<table border="1"><thead><tr><th>WALK AND TURN</th><th>ONE LEG STAND</th></tr></thead><tbody><tr><td><input type="checkbox"/> Moves feet to keep balance while listening to instructions</td><td><input type="checkbox"/> Sways while balancing (during count)</td></tr><tr><td><input checked="" type="checkbox"/> Starts before instructions completed</td><td><input type="checkbox"/> Raises arm 6" for balance</td></tr><tr><td><input checked="" type="checkbox"/> Stops while walking to steady self</td><td><input type="checkbox"/> Hops</td></tr><tr><td><input checked="" type="checkbox"/> Does not touch heel to toe</td><td><input type="checkbox"/> Puts foot down</td></tr><tr><td><input checked="" type="checkbox"/> Raises arms 6" for balance</td><td><input checked="" type="checkbox"/> Cannot do test (document reason for not completing) refused</td></tr><tr><td><input checked="" type="checkbox"/> Steps off line while walking</td><td></td></tr><tr><td><input checked="" type="checkbox"/> Turns incorrectly or loses balance while turning</td><td></td></tr><tr><td><input checked="" type="checkbox"/> Incorrect number of steps</td><td></td></tr><tr><td><input type="checkbox"/> Cannot do test (document reason for not completing)</td><td></td></tr></tbody></table>			WALK AND TURN	ONE LEG STAND	<input type="checkbox"/> Moves feet to keep balance while listening to instructions	<input type="checkbox"/> Sways while balancing (during count)	<input checked="" type="checkbox"/> Starts before instructions completed	<input type="checkbox"/> Raises arm 6" for balance	<input checked="" type="checkbox"/> Stops while walking to steady self	<input type="checkbox"/> Hops	<input checked="" type="checkbox"/> Does not touch heel to toe	<input type="checkbox"/> Puts foot down	<input checked="" type="checkbox"/> Raises arms 6" for balance	<input checked="" type="checkbox"/> Cannot do test (document reason for not completing) refused	<input checked="" type="checkbox"/> Steps off line while walking		<input checked="" type="checkbox"/> Turns incorrectly or loses balance while turning		<input checked="" type="checkbox"/> Incorrect number of steps		<input type="checkbox"/> Cannot do test (document reason for not completing)	
WALK AND TURN	ONE LEG STAND																					
<input type="checkbox"/> Moves feet to keep balance while listening to instructions	<input type="checkbox"/> Sways while balancing (during count)																					
<input checked="" type="checkbox"/> Starts before instructions completed	<input type="checkbox"/> Raises arm 6" for balance																					
<input checked="" type="checkbox"/> Stops while walking to steady self	<input type="checkbox"/> Hops																					
<input checked="" type="checkbox"/> Does not touch heel to toe	<input type="checkbox"/> Puts foot down																					
<input checked="" type="checkbox"/> Raises arms 6" for balance	<input checked="" type="checkbox"/> Cannot do test (document reason for not completing) refused																					
<input checked="" type="checkbox"/> Steps off line while walking																						
<input checked="" type="checkbox"/> Turns incorrectly or loses balance while turning																						
<input checked="" type="checkbox"/> Incorrect number of steps																						
<input type="checkbox"/> Cannot do test (document reason for not completing)																						
OTHER SKILL EVALUATIONS Poor fine motor skills, mood swings																						
AUDIO / VIDEO RECORDING <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		STORAGE MEDIA REFERENCE #																				
OFFICER'S NAME Trooper N. Bishop		UNIT 0115																				
		POST 12																				
		DATE 3/29/24																				

STATEMENT OF FACTS

On Friday, March 29, 2024 at approximately 2131 hours I was patrolling southbound on Clifton Avenue near Prarie Avenue, in the City of Springfield. I was patrolling in a fully marked patrol car wearing the uniform of the day when I observed a dark colored Toyota at the stop sign on Prarie Avenue stopped well past the marked stopped bar. When the driver started to pull onto Clifton Avenue he had his cell phone in his right hand and the inside of his vehicle was illuminated. I made a u-turn and the driver turned northbound on Clifton Avenue. I caught up to the vehicle and activated my blue emergency lights to conduct a traffic stop. The vehicle turned right onto Rice Street before coming to a stop on the side of the road. I approached the vehicle on the drivers side and made contact with the driver, Josiah Gilbert Sr. Gilbert had his back window rolled down and I had to ask him to roll his front window down. Gilbert stated "what was the reason for pulling me over." Gilbert's speech was slow and his movements were lathergic. Gilbert was actively trying to make a phone call and I told him to end his phone call so we could continue with the traffic stop. Gilbert's eyes were bloodshot and glossy and his eyelids were droopy. Gilbert's pupils were dilated and his speech was raspy. Gilbert had visible burn marks on his lips. I advised Gilbert that I had him stopped because he was actively on his telephone while his vehicle was in motion. Gilbert stated that "I just was holding it, I was trying to call my wife to see where she was at." I asked Gilbert where he was coming from and he stated the gas station. I asked Gilbert for his id and he stated "he doesn't have a license." Gilbert's movements were slow and his was lathergic. I asked Gilbert if he had consumed any alcohol and he stated "no." During my interaction with Gilbert a moderate odor of burnt marijuana was emitting from the vehicle. Due to Gilbert showing multiple signs of impairment, I had him exit the vehicle. When I asked Gilbert to exit the vehicle he asked "what's the reason." I advised Gilbert that I'd be conducting field sobriety tests. I asked Gilbert if he had any knives on his person and he stated "I got a medical marijuana card." While walking to my vehicle I had asked Gilbert the last time he smoked. Gilbert stated that "I had smoked, that was way earlier when I got off work." An odor of burnt marijuana was emitting from his person and his breath. Gilbert was unsteady on his feet and he had a sway about his person. A consensual pat down was conduct. I asked Gilbert if he had ever been arrested for OVI and he stated "I got a couple." Gilbert stated that he had marijuana in his pocket. I had Gilbert take off his hat, mask and glasses to perform the tests.

The first test I conducted was the Horizontal Gaze Nystagmus test. I asked Gilbert if he had contacts in and he stated no. I asked Gilbert if he had any injuries and he stated he "was shot and has a broken toe." Gilbert's glasses were removed for this test. Gilbert's eyes tracked equally and his pupils were dilated but equal in size. Vertical Nystagmus was not present. The first clue I observed was the Lack of Smooth Pursuit, which was present in both eyes. The second clue I observed was Distinct and Sustained Nystagmus at Maximum Deviation, which was present in both eyes. During the test a total of four (4) of six (6) clues were observed. Vertical Nystagmus was not present.

The second test I conducted was the Walk and Turn. I placed Gilbert in the instruction position while I demonstrated and explained the test. I advised Gilbert to stay in the position until I told him to begin the test and he stated he understood. During this part of the test Gilbert moved his feet to keep his balance and began the test before being instructed to do so. Gilbert stated that he understood the test and had no questions about the test. During the test Gilbert showed the following clue: steps off line, incorrect number of steps, improper turn, stops walking, and doesn't touch heel to toe. During the test Gilbert showed seven (7) of eight (8) possible clues.

I began to administer and explain the One Leg Stand to Gilbert and he stated he could no do the test because of his balance. Due to the totality of the circumstances, I placed Gilbert under arrest and advised him of his Constitutional Rights. Gilbert stated that he understood his rights. Gilbert was searched and placed in the rear of my patrol car. During the search of Gilbert's person a bag of Suboxine was located in his pocket. A tow truck was requested to the scene. After running a criminal history check on Gilbert it showed that he had three prior OVI's. Gilbert had 2 OVI convictions in 2019 and 1 conviction in 2021. Gilbert stated that he was currently fighting a felony OVI. Gilbert was transported to the Springfield Post where he was read the BMV 2255 which was witnessed by Cadet E. White U-1933. Due to this being a felony OVI, I requested a breath and urine test from Gilbert. Gilbert submitted to both tests. The results for the breath test were .000 g/210L. The urine test was packaged and sent to the OSP Crime Lab for analysis via USPS. Gilbert was issued a citation for OVI, Using his cell phone, Driving under OVI Suspension and stop sign violation. Gilbert was released from the post via HP-60 with a mandatory court appearance of April 5th.



OHIO DEPARTMENT OF PUBLIC SAFETY
BUREAU OF MOTOR VEHICLES

R:2030

REPORT OF LAW ENFORCEMENT OFFICER ADMINISTRATIVE LICENSE SUSPENSION /
NOTICE OF POSSIBLE CDL DISQUALIFICATION / IMMOBILIZATION / FORFEITURE

A. NAME JOSHUA L. GILBERT SR.		DRIVER LICENSE # SQ217616		CLASS ID	STATE OH
CURRENT STREET ADDRESS (AS VERIFIED BY OFFICER) 223 S. WESTERN AVE.					
CITY SPRINGFIELD		OHIO COUNTY OF RESIDENCE CLARK		STATE OH	ZIP CODE 45506
DATE OF BIRTH 6/20/1985	SOCIAL SECURITY # XXXX-XX-XXXX	4 DIGIT COURT CODE 1201		COUNTY OF VIOLATION CLARK	
DATE OF VIOLATION 3/29/24	TIME OF VIOLATION 2:31 PM	PLACE OF TEST POST 12		VIN 2T1BR18F6WC002743	
DATE OF REFUSAL OR TEST 3/29/24	TIME OF REFUSAL OR TEST 2:31 PM	YEAR 1998	MAKE TOYOTA	LICENSE PLATE # 3231506	TYPE PLATE PC
VEHICLE OWNER'S NAME JOSHUA L. GILBERT JR.		DATE OF BIRTH	STREET ADDRESS 223 S. WESTERN AVE.		
CITY SPRINGFIELD	STATE OH	ZIP CODE 45506			
VEHICLE STORED AT (STREET ADDRESS) BUCKER TOWING				CITY SPRINGFIELD	

B. Officer to Complete for All OVI / Physical Control Arrests:

Circle arrest type: ☒ OVI ☐ Physical Control

The driver:

- ☐ Refused to submit to test (s).
☐ Submitted to test (s). 0.000 % alcohol test result
☐ Circle test type for which results were reported:
Whole Blood, Breath, Urine, Blood Serum, or Blood Plasma
☐ Was placed under an Administrative License Suspension (R.C. 4511.191)
☐ License was seized
☒ Offender was provided a copy of this form at the time of arrest.

I requested the driver, by reading advice on the back, to submit to a chemical test (s) for alcohol and / or for the presence of any controlled substance or metabolite. My reasonable grounds for OVI / Physical Control arrest before test were: bloodshot glossy eyes, slurred speech, odor of burnt marshmallows, driver's

- ☐ Subject tested for controlled substance or metabolite. Circle test type for which controlled substance or metabolite results were reported: Urine, Whole Blood, Blood Serum, or Blood Plasma.
☐ Specify controlled substance and / or metabolite results:
☐ Subject tested positive for prohibited level of marijuana metabolite (specify amount) and was under the influence of alcohol and / or a drug of abuse.
☐ Alcohol, controlled substance or metabolite test result received on . Subject served with notice of Administrative License Suspension on .
☐ Reasonable means officer used to ensure offender submitted to a chemical test were:

C. Officer to Complete Applicable Vehicle Sanctions:

- ☐ License plate(s) seized
☐ Vehicle seized under R.C. 4511.195 (OVI)

- ☐ Vehicle seized under R.C. 4510.41 only (DUS or wrongful entrustment of a motor vehicle) If so, Do not mail this form to the BMV
☐ Vehicle subject to immobilization
☐ Vehicle subject to forfeiture

D. Officer to Complete if Offender is the holder of a commercial driver license or was Operating a Commercial Vehicle:

- ☐ Read and showed advice to offender (R.C. 4506.17)
☐ Refused to submit to test(s)
☐ Submitted to test(s) 0.000 % alcohol test result
(Circle One) Whole Blood, Breath, Urine, Blood Serum, or Blood Plasma
☐ Prohibited Alcohol Content without OVI charge

- ☐ Prohibited Alcohol Content with OVI charge
☐ Commercial vehicle per definition (R.C. 4506.01(D))
☐ 24-hour out-of-service order
☐ CDL to be disqualified
☐ CDL seized
☐ Hazardous material
☐ Operated a commercial vehicle under the influence of a controlled substance

E. The advice on the back of this form was read to me and I have received a copy of this form.

☒ DRIVER'S SIGNATURE ☐ REFUSED TO SIGN

F. Complete Below Only for an OVI / Physical Control ARREST:

We, the undersigned, certify that the advice prescribed by the General Assembly (under R.C. 4511.191 and R.C. 4511.192), was shown to the person under arrest and read to him or her in the presence of the arresting officer and one other person.

X TR 71- B2-115
ARRESTING OFFICER'S SIGNATURE

OHIO STATE HIGHWAY PATROL OHO H P T Z
ENFORCEMENT AGENCY N.C.I.C. #

X Officer J. H. White 1933
WITNESS'S SIGNATURE

4201 GATWAY BLVD
OFFICER'S BUSINESS STREET ADDRESS
SPRINGFIELD OH 45502
CITY STATE ZIP CODE

COMPLETE BELOW ONLY ON OVI ARREST, PHYSICAL CONTROL ARREST, OR ARREST INVOLVING COMMERCIAL VEHICLE. AFFIDAVIT OF ARRESTING OFFICER:
STATE OF OHIO, COUNTY OF

I certify I arrested the person, having had reasonable grounds to believe the person was operating a vehicle upon a highway, or upon public or private property used by the public for vehicular travel or parking in the State of Ohio, under the influence of alcohol and / or drugs of abuse, in physical control of a vehicle while under the influence of alcohol and / or drugs of abuse, or with a prohibited concentration of alcohol in the whole blood, blood serum, blood plasma, breath, or urine. I advised the person in the prescribed manner of the consequences of a refusal or a test. The person either refused the test, or was under arrest for OVI and took the test and had a prohibited concentration of alcohol in the whole blood, blood serum, blood plasma, breath, or urine (all as described above). In the case of a commercial vehicle (if applicable) I had reasonable grounds to believe the person was driving a commercial motor vehicle in the State of Ohio in violation of section 4506.15 of the Ohio Revised Code. The information contained on this form is true to the best of my knowledge and belief.

X
ARRESTING OFFICER SIGNATURE

X
PEACE OFFICER SIGNATURE

Sworn to before me this _____ day of _____ 20____

X
NOTARY PUBLIC'S SIGNATURE

X
DEPUTY CLERK OF COURT'S SIGNATURE City of _____



Ohio Department of Health
Alcohol and Drug Testing
Subject Test Report

Subject Information

Revised 11-2017

TEST DATE	NAME	DATE OF BIRTH	AGE	SEX
03/29/2024	GILBERT, JOSIAH	06/20/1985	38	M
CURRENT STREET ADDRESS (As Verified by Officer)	CITY	STATE	ZIP CODE	RACE
223 S WESTERN AVE	SPRINGFIELD	OH	45506	B

Arrest Information

ARRESTING OFFICER	AGENCY	
BISHOP, NICKOLAS	SPRINGFIELD HIGHWAY PATROL	
TESTING OFFICER	AGENCY	ODH CERTIFICATION#
BISHOP, NICKOLAS	SPRINGFIELD HIGHWAY PATROL	23019
TIME FIRST OBSERVED	TIME OF TEST	
21:31	22:31	

Test Information

INSTRUMENT SERIAL #	TEST SITE #	DATE OF LAST CERTIFICATION	CERTIFICATION SOLUTION #
80-003934	SPRINGFIELD OSHP /1	03/19/2024	ODH-0030
CERTIFICATION BOTTLE #	TARGET VALUE	CERTIFICATION AVERAGE	CERTIFICATION STANDARD DEVIATION
1353	0.102 g/210L	0.1018	0.0004

Test	BrAC (g/210L)	Time
Air Blank	0.000	22:33
Diagnostic	VAC/OK	22:33
Air Blank	0.000	22:33
Dry Gas Control	0.101	22:34
Atmo Pressure	970 mBar	
Tank Pressure	979 PSI	
Air Blank	0.000	22:34
Subject Sample 1	0.000	22:35
Breath Volume	2.695 LITERS	
Sample Duration	5.000 SECONDS	
Sample Attempts	1	
Air Blank	0.000	22:35
Air Blank	0.000	22:38
Subject Sample 2	0.000	22:39
Breath Volume	3.015 LITERS	
Sample Duration	4.900 SECONDS	
Sample Attempts	1	
Air Blank	0.000	22:40
Dry Gas Control	0.101	22:40
Atmo Pressure	970 mBar	
Tank Pressure	975 PSI	
Air Blank	0.000	22:40

DRY GAS STANDARD

LOT # 27023100A3

TANK # 068

TARGET: 0.100 g/210L

EXPIRATION DATE: 11/05/2025

BrAC = 0.000 g/210L

SOFTWARE VERSION: 8149.13.03

W. N. Bishop
TESTING OFFICER'S SIGNATURE

03/29/2024

DATE