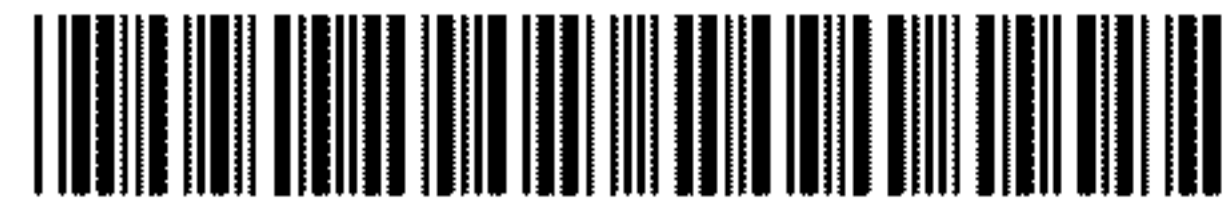


Date	Court Action, Orders, Entries		
	Count	Plea	
	A	<input type="checkbox"/> GG	<input type="checkbox"/> NG <input type="checkbox"/> NC
	B	<input type="checkbox"/> GG	<input type="checkbox"/> NG <input type="checkbox"/> NC
	C	<input type="checkbox"/> GG	<input type="checkbox"/> NG <input type="checkbox"/> 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			



24TRC09644

TICKET NO. OHP120417100720242050
NUMBER OF COUNTS 3

CLARK COUNTY
MUNICIPAL COURT OF
SPRINGFIELD, OHIO

THE STATE OF OHIO
THE CITY OF SPRINGFIELD

VS

BRANDEN T BROWN
1004 CLIFTON AVE. APT B
SPRINGFIELD OH 45505

D.O.B.: 1984-01-25
SSN :

VIOLATION:

4511.19A1A
4511.19A2
4510.14

DATE OF ARRAIGNMENT: 2024-10-11 1100

ASSIGNMENT:

1
2
3
4
5
6
7

INSURED? YES
OL HELD ? NO

BOND POSTED – CASH SURETY
AMOUNT

TO DEFENDANT: SUMMONS YOU ARE SUMMONED AND ORDERED TO APPEAR

ON 10/11/2024 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# OHP120417100720242050 CASE #

NAME Branden T Brown REFERENCE # 128D1UQ

STREET,CITY 1004 Clifton Ave. Apt B, Springfield

COUNTY, STATE, ZIP OH ,45505

PHONE# (937) 346-6265 TEXT/PHONE NOTIFICATION APPROVED? YES NO

OPERATOR LICENSE / STATE ID# None BIRTH DATE 01/25/1984 ISSUE DATE 06/08/2024 STATE OH

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

CLASS EXPIRES ENDORSEMENT(S)/RESTRICTION(S) SS# (last 4 digits)

01/25/2026 CDL MC Other

SEX HEIGHT WEIGHT EYES HAIR RACE FINANCIAL RESPONSIBILITY PROOF?

M 6'0" 190 BRO BLK BNH Yes No N/A

TO DEFENDANT: COMPLAINT ON Oct 07, 2024 AT 2014 , 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 2007 MAKE Chevrolet MODEL 4Door

COLOR Black LICENSE # KHF2173 STATE OH

UPON A PUBLIC HIGHWAY, NAMELY East Street DIRECTION Northbound

AT/NEAR Grand Avenue (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 ORC ORD T.P. 4511.19A1A 4511.19A2

Prior OVIs: # of prior OVIs 1 09 Years of prior OVIs

DRIVER LICENSE: None Not on person Revoked Suspended EXPIRED: < 6 months > 6 months Failure to Reinstate Suspension Type:Driving Under OVI Suspension ORC ORD T.P. 4510.14

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

OTHER OFFENSE: ORC ORD T.P.

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 OVI STATEMENT

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

This summon served personally on the defendant on Oct 07, 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. C PIATT

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	0417	12	05

Docket # Page # Case #

Defendant's Attorney Name / Address / Telephone

If Juvenile, Parents' Names:

Phone#:

Grade: School:

DATE 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: OHP120417100720242050



OHIO DEPARTMENT OF PUBLIC SAFETY
OHIO STATE HIGHWAY PATROL

IMPAIRED DRIVER REPORT

NAME Branden Thomas Brown	ARREST OHP120417100720242050
VEHICLE CONDITION Fair	
VEHICLE DISPOSITION Secured on scene- Grand Ave / Linden Ave.	

CLOTHING DESCRIPTION AND CONDITION

HAT OR CAP Baseball hat	
JACKET OR COAT None	
SHIRT OR DRESS Dark colored sweatshirt	
PANTS OR SKIRT Tan shorts	
SHOES Athletic shoes	HEELS None
ODOR OF ALCOHOLIC BEVERAGE Strong odor of an alcoholic beverage	
SPEECH Slurred	
EVIDENCE OF DRUG USE (PUPIL SIZE) Bloodshot/Glassy	

DIVIDED ATTENTION SKILLS

RIGHT EYE	HORIZONTAL / VERTICAL GAZE NYSTAGMUS	LEFT EYE																				
<input type="checkbox"/>	DISTINCT NYSTAGMUS AT MAXIMUM DEVIATION	<input type="checkbox"/>																				
<input type="checkbox"/>	LACK OF SMOOTH PURSUIT	<input 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 type="checkbox"/> Starts before instructions completed</td><td><input type="checkbox"/> Raises arm 6" for balance</td></tr><tr><td><input type="checkbox"/> Stops while walking to steady self</td><td><input type="checkbox"/> Hops</td></tr><tr><td><input type="checkbox"/> Does not touch heel to toe</td><td><input type="checkbox"/> Puts foot down</td></tr><tr><td><input 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 type="checkbox"/> Steps off line while walking</td><td>PBT RESULT</td></tr><tr><td><input type="checkbox"/> Turns incorrectly or loses balance while turning</td><td><input type="checkbox"/> P <input type="checkbox"/> W <input type="checkbox"/> F Percent N/A</td></tr><tr><td><input type="checkbox"/> Incorrect number of steps</td><td></td></tr><tr><td><input checked="" type="checkbox"/> Cannot do test (document reason for not completing) REFUSED</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 type="checkbox"/> Starts before instructions completed	<input type="checkbox"/> Raises arm 6" for balance	<input type="checkbox"/> Stops while walking to steady self	<input type="checkbox"/> Hops	<input type="checkbox"/> Does not touch heel to toe	<input type="checkbox"/> Puts foot down	<input type="checkbox"/> Raises arms 6" for balance	<input checked="" type="checkbox"/> Cannot do test (document reason for not completing) REFUSED	<input type="checkbox"/> Steps off line while walking	PBT RESULT	<input type="checkbox"/> Turns incorrectly or loses balance while turning	<input type="checkbox"/> P <input type="checkbox"/> W <input type="checkbox"/> F Percent N/A	<input type="checkbox"/> Incorrect number of steps		<input checked="" type="checkbox"/> Cannot do test (document reason for not completing) REFUSED	
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<input checked="" type="checkbox"/> Cannot do test (document reason for not completing) REFUSED																						
OTHER SKILL EVALUATIONS																						
AUDIO / VIDEO RECORDING <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																						
STORAGE MEDIA REFERENCE #																						
OFFICER'S NAME Trooper C. Piatt	UNIT 0417	POST 12 DATE 10/7/24																				

STATEMENT OF FACTS

On October 7, 2024, at approximately 2014 hours, I was following behind a 2007 dark-colored Chevy traveling northbound on East Street near Grand Avenue in the city of Springfield, Clark County, Ohio. I ran the vehicle registration "KHF2173" through LEADS, and the query returned the registered owner, Branden Thomas Brown's driver's license, was suspended. Due to the excessively dark window tint, I was unable to observe any characteristic of the operator. I initiated a traffic stop.

Upon passenger-side approach, I immediately detected a strong odor of an alcoholic beverage coming from within the vehicle. I explained the reason for the stop to the male operator, later identified as Branden Thomas Brown. I observed that Mr. Brown was not wearing his seatbelt. Mr. Brown expressed that he was headed home from the store. While talking with Mr. Brown, I observed that his speech was slurred as he was explaining that he was given "driving privileges" from the court. Mr. Brown's eyes were also bloodshot and glassy. Mr. Brown provided me with his Ohio identification card and insurance. I asked Mr. Brown how many alcoholic beverages he has consumed tonight, and he alleged he hadn't drank anything. I asked why the vehicle smelled like alcoholic beverages, and Mr. Brown had no explanation.

I requested that Mr. Brown turn the vehicle off. I requested Mr. Brown exit the vehicle. I requested that Mr. Brown walk back to the passenger side of my patrol car. A consensual pat-down was completed. As I was talking with Mr. Brown at my patrol car, the odor of an alcoholic beverage was still strong coming off his person. I asked Mr. Brown if he would be willing to complete the standardized field sobriety tests, and he stated "no." I then arrested Mr. Brown for OVI. Mr. Brown was handcuffed behind his back. The handcuffs were gap-checked and double-locked. I verbally advised Mr. Brown of his Miranda rights; when asked, Mr. Brown acknowledged and stated he understood his rights. A search incident to arrest was completed. I sat Mr. Brown in my patrol car. I then realized I had prior dealings with Mr. Brown on May 26, 2024, when I arrested him for OVI.

Mr. Brown got agitated because he was arrested. Mr. Brown's vehicle was secured on scene, and I transported Mr. Brown to the patrol post. While en route, Mr. Brown repeatedly made unwarranted comments expressing his thoughts on being arrested.

arrival, I read and showed the Ohio BMV Form 2255 to Mr. Brown, which was witnessed by Trooper D. Leugers. Mr. Brown refused the requested chemical breath test.

Mr. Brown was issued a citation for the following offenses:

- 4510.14- Driving under an OVI suspension
- 4511.19(A)(1)(a)- OVI- officer observation
- 4511.19(A)(2)- OVI - refusal with prior conviction within 20 years

Mr. Brown was provided copies of the required paperwork and given a mandatory court date of Friday, October 11, 2024, at 11:00 a.m. in the Clark County Municipal Court.

Mr. Brown was released to a friend via HP-60.



OHIO DEPARTMENT OF PUBLIC SAFETY
BUREAU OF MOTOR VEHICLES

Rec'd: 2038

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

A. NAME <u>Brandon Thomas Brown</u>		DRIVER LICENSE # <u>SE839302</u>		CLASS <u>TRU</u>	STATE <u>OH</u>
CURRENT STREET ADDRESS (AS VERIFIED BY OFFICER) <u>1004 Clifton Ave. Apt 2</u>					
CITY <u>Springfield</u>		OHIO COUNTY OF RESIDENCE <u>Clark</u>		STATE <u>OH</u>	ZIP CODE <u>45505</u>
DATE OF BIRTH <u>1-25-1984</u>	SOCIAL SECURITY # <u>1-2-2</u>	4 DIGIT COURT CODE <u>1270</u>		COUNTY OF VIOLATION <u>Clark</u>	
DATE OF VIOLATION <u>10 / 7 / 24</u>	TIME OF VIOLATION <u>2019</u> <input type="checkbox"/> AM <input type="checkbox"/> PM	PLACE OF TEST <u>173- KENSAAP</u>		VIN <u>2G1WB53K079276520</u>	
DATE OF REFUSAL OR TEST <u>10 / 7 / 24</u>	TIME OF REFUSAL OR TEST <u>2019</u> <input type="checkbox"/> AM <input type="checkbox"/> PM	YEAR <u>2007</u>	MAKE <u>Chevy</u>	LICENSE PLATE # <u>KH2773</u>	TYPE PLATE <u>Passenger</u> STATE <u>OH</u>
VEHICLE OWNER'S NAME <u>Same</u>		DATE OF BIRTH <u>Same</u>		STREET ADDRESS <u>Same</u>	
CITY <u>Same</u>		STATE <u>Same</u>		ZIP CODE <u>Same</u>	
VEHICLE STORED AT (STREET ADDRESS) <u>Secured on scene - Grand / Linden Ave.</u>					CITY <u>Springfield</u>

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 % 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: 4510.11, 4510.12, 4510.13, 4510.14, 4510.15, 4510.16, 4510.17, 4510.18, 4510.19, 4510.20, 4510.21, 4510.22, 4510.23, 4510.24, 4510.25, 4510.26, 4510.27, 4510.28, 4510.29, 4510.30, 4510.31, 4510.32, 4510.33, 4510.34, 4510.35, 4510.36, 4510.37, 4510.38, 4510.39, 4510.40, 4510.41, 4510.42, 4510.43, 4510.44, 4510.45, 4510.46, 4510.47, 4510.48, 4510.49, 4510.50, 4510.51, 4510.52, 4510.53, 4510.54, 4510.55, 4510.56, 4510.57, 4510.58, 4510.59, 4510.60, 4510.61, 4510.62, 4510.63, 4510.64, 4510.65, 4510.66, 4510.67, 4510.68, 4510.69, 4510.70, 4510.71, 4510.72, 4510.73, 4510.74, 4510.75, 4510.76, 4510.77, 4510.78, 4510.79, 4510.80, 4510.81, 4510.82, 4510.83, 4510.84, 4510.85, 4510.86, 4510.87, 4510.88, 4510.89, 4510.90, 4510.91, 4510.92, 4510.93, 4510.94, 4510.95, 4510.96, 4510.97, 4510.98, 4510.99, 4510.100

- ☐ 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 % 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 <u>[Signature]</u> ARRESTING OFFICER'S SIGNATURE	ENFORCEMENT AGENCY <u>OSHP</u>	OHO <u>A</u> <u>P</u> <u>1</u> <u>2</u>			
		N.C.I.C. # _____			
X <u>[Signature]</u> WITNESS'S SIGNATURE	OFFICER'S BUSINESS STREET ADDRESS <u>Springfield</u>	OH <u>45502</u>			
	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 Clark

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 <u>[Signature]</u> ARRESTING OFFICER SIGNATURE	X <u>[Signature]</u> PEACE OFFICER SIGNATURE
Sworn to before me this <u>7</u> day of <u>October</u> 20 <u>24</u>	X <u>[Signature]</u> NOTARY PUBLIC'S SIGNATURE
X <u>[Signature]</u> DEPUTY CLERK OF COURT'S SIGNATURE	City of _____