

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			



\*24TRC10180\*

TICKET NO. OHP250738101420241417  
NUMBER OF COUNTS 4

CLARK COUNTY  
MUNICIPAL COURT OF  
SPRINGFIELD, OHIO

THE STATE OF OHIO  
THE CITY OF SPRINGFIELD

VS

CHRISTOPHER JAMES RUTHERFORD  
2714 ASH DR  
SPRINGFIELD OH 45504

D.O.B.: 1973-04-22  
SSN :

VIOLATION:

4511.19A1A  
4510.16A  
4503.11  
4513.263B1

DATE OF ARRAIGNMENT: 2024-10-21 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 10/21/2024 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# OHP250738101420241417 CASE #

NAME Christopher James Rutherford REFERENCE # 2JAMSQ

STREET,CITY 2714 Ash Dr, Springfield

COUNTY, STATE, ZIP OH ,45504

PHONE# (937) 450-8750 TEXT/PHONE NOTIFICATION APPROVED? YES NO

OPERATOR LICENSE / STATE ID# None BIRTH DATE 04/22/1973 ISSUE DATE 09/27/2024 STATE OH

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

SEX HEIGHT WEIGHT EYES HAIR RACE FINANCIAL RESPONSIBILITY PROOF?

TO DEFENDANT: COMPLAINT ON Oct 14, 2024 AT 1235 , 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 2013 MAKE Chrysler MODEL 4Door

COLOR Red LICENSE # GQQ6568 STATE OH

UPON A PUBLIC HIGHWAY, NAMELY Spring Street DIRECTION Northbound

AT/NEAR Main 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.

OVI: Under the influence of alcohol/drug of abuse. ORC ORD T.P.

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

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

OTHER OFFENSE: Failure To Register - Expired Tags ORC ORD T.P.

PAVEMENT: Dry Wet Snow Ice # of Lanes 4

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 statement

ACCOMPANYING CRIMINAL CHARGE(S): Yes No TOTAL # OFFENSES: 5

This summon served personally on the defendant on Oct 14, 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. B Baker

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: OHP250738101420241417





OHIO DEPARTMENT OF PUBLIC SAFETY  
BUREAU OF MOTOR VEHICLES

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

A. NAME <u>Christopher J. Rutherford</u>		DRIVER LICENSE # <u>RQ713320</u>		CLASS <u>ED</u>	STATE <u>OH</u>
CURRENT STREET ADDRESS (AS VERIFIED BY OFFICER) <u>2719 Ash Dr</u>					
CITY <u>Springfield</u>		OHIO COUNTY OF RESIDENCE <u>Clark</u>		STATE <u>OH</u>	ZIP CODE <u>45504</u>
DATE OF BIRTH <u>9-22-73</u>	SOCIAL SECURITY # <u>1</u>	4 DIGIT COURT CODE <u>1220</u>		COUNTY OF VIOLATION <u>Clark</u>	
DATE OF VIOLATION <u>10/14/2024</u>	TIME OF VIOLATION <u>1235</u>	PLACE OF TEST <u>P-12</u>		VIN <u>2C3CCAG0DH595119</u>	
DATE OF REFUSAL OR TEST <u>10/14/2024</u>	TIME OF REFUSAL OR TEST <u>1404</u>	YEAR <u>13</u>	MAKE <u>Chrysler</u>	LICENSE PLATE # <u>NA</u>	TYPE PLATE <u>PC</u>
VEHICLE OWNER'S NAME <u>same</u>		DATE OF BIRTH		STREET ADDRESS	
CITY		STATE		ZIP CODE	
VEHICLE STORED AT (STREET ADDRESS) <u>Buckeye Towing</u>					CITY

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: constipated pupils, slow, drooping eyelids, admission, poor balance, SFSTs

☐ 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.

Christopher J. Rutherford  
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 TPR Billy Bob  
ARRESTING OFFICER'S SIGNATURE

OSHP Columbus  
ENFORCEMENT AGENCY

OHIO H P 2 5  
N.C.I.C. #

X TR M. B. 115  
WITNESS'S SIGNATURE

1583 Alvin Creek Dr  
OFFICER'S BUSINESS STREET ADDRESS  
Columbus  
CITY

OH 43209  
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 \_\_\_\_\_



## CONSEQUENCES OF TEST AND REFUSAL (R.C. 4511.192) (MUST BE READ TO OVI / PHYSICAL CONTROL OFFENDER)

"You now are under arrest for (specifically state the offense under state law or a substantially equivalent municipal ordinance for which the person was arrested - operating a vehicle under the influence of alcohol, a drug, or a combination of them; operating a vehicle while under the influence of a listed controlled substance or a listed metabolite of a controlled substance; operating a vehicle after underage alcohol consumption; or having physical control of a vehicle while under the influence).

"If you refuse to take any chemical test required by law, your Ohio driving privileges will be suspended immediately, and you will have to pay a fee to have the privileges reinstated. If you have a prior conviction of OVI, or operating a vehicle while under the influence of a listed controlled substance or a listed metabolite of a controlled substance under state or municipal law within the preceding twenty years, you now are under arrest for state OVI, and, if you refuse to take a chemical test, you will face increased penalties if you subsequently are convicted of the state OVI."

(Read this part unless the person is under arrest for solely having physical control of a vehicle while under the influence.) "If you take any chemical test required by law and are found to be at or over the prohibited amount of alcohol, a controlled substance, or a metabolite of a controlled substance in your whole blood, blood serum or plasma, breath, or urine as set by law, your Ohio driving privileges will be suspended immediately, and you will have to pay a fee to have the privileges reinstated."

"If you take a chemical test, you may have an independent chemical test taken at your own expense."

## CONSEQUENCES OF TEST AND REFUSAL - OUT-OF-SERVICE (R.C. 4506.17) (MUST BE READ IN ADDITION TO THE ABOVE TO AN OFFENDER WHO IS THE HOLDER OF A COMMERCIAL DRIVER LICENSE OR IS DRIVING A COMMERCIAL VEHICLE)

"I am a law enforcement officer; I have probable cause to stop or detain you. After investigating the circumstances, I have probable cause to believe you were operating a motor vehicle in violation of section 4506.15 of the Ohio Revised Code. I request that you submit to a test or tests of your blood, breath, or urine for the purpose of determining your alcohol concentration or the presence of any controlled substance. If you refuse to submit to the test or tests you will immediately be placed out-of-service for twenty-four hours; you will be disqualified from operating a commercial motor vehicle for a period of not less than one year; and you will be required to surrender your commercial driver license to me."

## ADDITIONAL INFORMATION FOR OFFENDER

### IMMOBILIZATION OR FORFEITURE UPON OVI ARREST (R.C. 4511.195)

If you have previously been convicted of operating a motor vehicle under the influence, OVI (R.C. 4511.19 (A)), or similar municipal ordinance, the vehicle and its identification license plates may be seized. The vehicle may be towed and kept by the law enforcement agency or may be immobilized. The period of time for which the vehicle and license plates will be kept or immobilized may be at least until the initial appearance in court. At the initial appearance the court may order that the vehicle and license plates be returned or released to the vehicle owner until the disposition of the charge. If you are convicted of or plead guilty to OVI, the court may issue an order of immobilization of the vehicle and the impoundment of its license plates, or an order for the criminal forfeiture of the vehicle to the state. If you are not the vehicle owner you must immediately inform the owner that the vehicle and its license plates have been seized and that the owner may be able to obtain the return or release of the vehicle and plates at your initial appearance in court.

### OFFENDERS ARRESTED FOR DRIVING UNDER SUSPENSION OR WRONGFUL ENTRUSTMENT OF A MOTOR VEHICLE (R.C. 4511.203)

If you are charged for driving under an OVI suspension, (R.C. 4510.14), or wrongful entrustment of a motor vehicle, (R.C. 4511.203), the vehicle and identification plates may be seized, and the vehicle may be towed and kept by the law enforcement agency. Any period of seizure will be at least until your initial appearance in court. At the initial appearance the court may order the vehicle returned to you or released to the vehicle owner. If you are convicted of driving under suspension, or of wrongful entrustment of a vehicle, the court may issue an order of immobilization of the vehicle and impoundment of its license plates. Upon a third conviction of wrongful entrustment of a vehicle (R.C. 4511.203), of driving under suspension (R.C. 4510.11), or a municipal ordinance similar to one of the above, the court, upon your conviction may order the forfeiture of the vehicle. If you are not the owner, you should immediately inform the owner that the vehicle and the license plates have been seized and that the owner may be able to obtain the return or release of the vehicle and plates at your initial appearance in court.

### IF YOU HAVE A COMMERCIAL DRIVER LICENSE OR YOU WERE OPERATING A COMMERCIAL VEHICLE:

- A. To appeal your disqualification, you must prepare a WRITTEN request for an Administrative Hearing and submit the request by REGISTERED or CERTIFIED MAIL within 30 days of your refusal or test date (see reverse side). Mail your request to:  
Ohio Bureau of Motor Vehicles  
Attn.: CDL / OSP  
P.O. Box 16784  
Columbus, Ohio 43216-6784
- B. You may appeal this SUSPENSION in court at the time of your initial appearance. Even though you may appeal this suspension, your driving privileges will still be suspended.

### NOTICE OF SUSPENSION (R.C. 4511.192)

Independent of any penalties or sanctions imposed upon you pursuant to any other section of the Revised Code or municipal ordinance, your driver license or commercial driver license, permit, or nonresident operating privilege is now suspended. The suspension takes effect immediately. The suspension will last at least until your initial appearance on the charge, which will be held within five days after the date of this arrest or the issuance of a citation to you. You may appeal the suspension at the initial appearance before the court that hears the charges against you that resulted from the arrest, or during the period of time ending 30 days after that initial appearance.

### LENGTH OF SUSPENSION

#### FOR REFUSAL

(Based on prior refusals, convictions, and guilty pleas within 10 years)

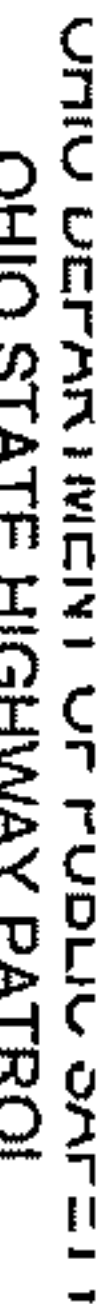
No priors .....	1 year
One prior .....	2 years
Two priors .....	3 years
Three or more priors .....	5 years

#### FOR PROHIBITED CONCENTRATION OF ALCOHOL

(Based on prior convictions and guilty pleas within 10 years)

No priors .....	90 days
One prior .....	1 year
Two priors .....	2 years
Three priors .....	3 years





**LABORATORY NUMBER**  
Do not write in this area

AGENCY INFORMATION									
AGENCY NAME		<input checked="" type="checkbox"/> OSHHP	<input type="checkbox"/> OIU	<input type="checkbox"/> OTHER (list below)	AGENCY MAIN OR, or OSHHP / OIU ASSIGNED FACILITY MAIN OR			DISTRICT / OIU OFFICE	OSHP POST
								6	25
OFFICER / SUBMITTER NAME									
TPR Bradley Baker									
SUBJECT INFORMATION									
NAME (last, first, MI)								DATE OF BIRTH	
Rutledge Ford, Christopher J								4-22-1973	
INCIDENT INFORMATION									
<input type="checkbox"/> Case									
<input type="checkbox"/> Crash									
CAD No.		24		10		14		0001	
PROPERTY NUMBER		PROPERTY DESCRIPTION		LOCATION COLLECTED		SERIAL NUMBER		YOUR ID MARK	
1		Bottle of wine		BAC Room				BB0738	
PROPERTY CHAIN									
PRINTED NAME									
SIGNATURE									
UNIT NO.									
TIME									
DATE									
COMMENTS									
RECEIVING OFFICER PRINTED NAME									
RECEIVING OFFICER SIGNATURE									
UNIT NO.									
BRADLEY BAKER									
0738									
1404									
10/1/14									
COLLECTED									
BRADLEY BAKER									
0738									
1500									
10/1/14									
WRESTLING FIRE DEPT									
CRIME LAB EXAMINATION									
(Check Type or Types of Laboratory Examination Desired)									
TOXICOLOGY: BLOOD / URINE / OTHER FLUID									
<input type="checkbox"/> Biological Specimen Analysis (Fluid container sealed and labeled with time, date, name and collector)									
<input type="checkbox"/> DRE Certification #									
<input checked="" type="checkbox"/> For all Available Drugs									
<input checked="" type="checkbox"/> For Specific Drug(s)									
marijuana, crack									
<input type="checkbox"/> For Alcohol									
<input checked="" type="checkbox"/> 8F Capsule Added by: TPR Bradley Baker									
<input type="checkbox"/> Deceased									
DRUG / CONTROLLED SUBSTANCE ANALYSIS									
(Note: Misdemeanor Marijuana amounts will not be tested unless specifically requested)									
<input type="checkbox"/> Beverage Analysis									
<input type="checkbox"/> Examination									
<input type="checkbox"/> Store Evidence Until Further Notice									
<input type="checkbox"/> Destroy the Submission (No Prosecution)									
OSHP DIGITAL FORENSIC EXAMINATION DO NOT SEND TO THE OSHP CRIME LAB									
BCI LABORATORY EXAMINATION DO NOT SEND TO THE OSHP CRIME LAB									
For all other examinations, you must submit the evidence directly to a BCI Lab with BCI FORM 101.									
Submission of this completed form and evidence to the OSHP									
Crime Lab implies acknowledgement/authorization for lab staff to									
determine the most appropriate test methods to employ based on									
the evidence and test request(s).									



**Do not write in this area**

我  
CAD

Case#

Property # \_\_\_\_\_

### OVI Statement

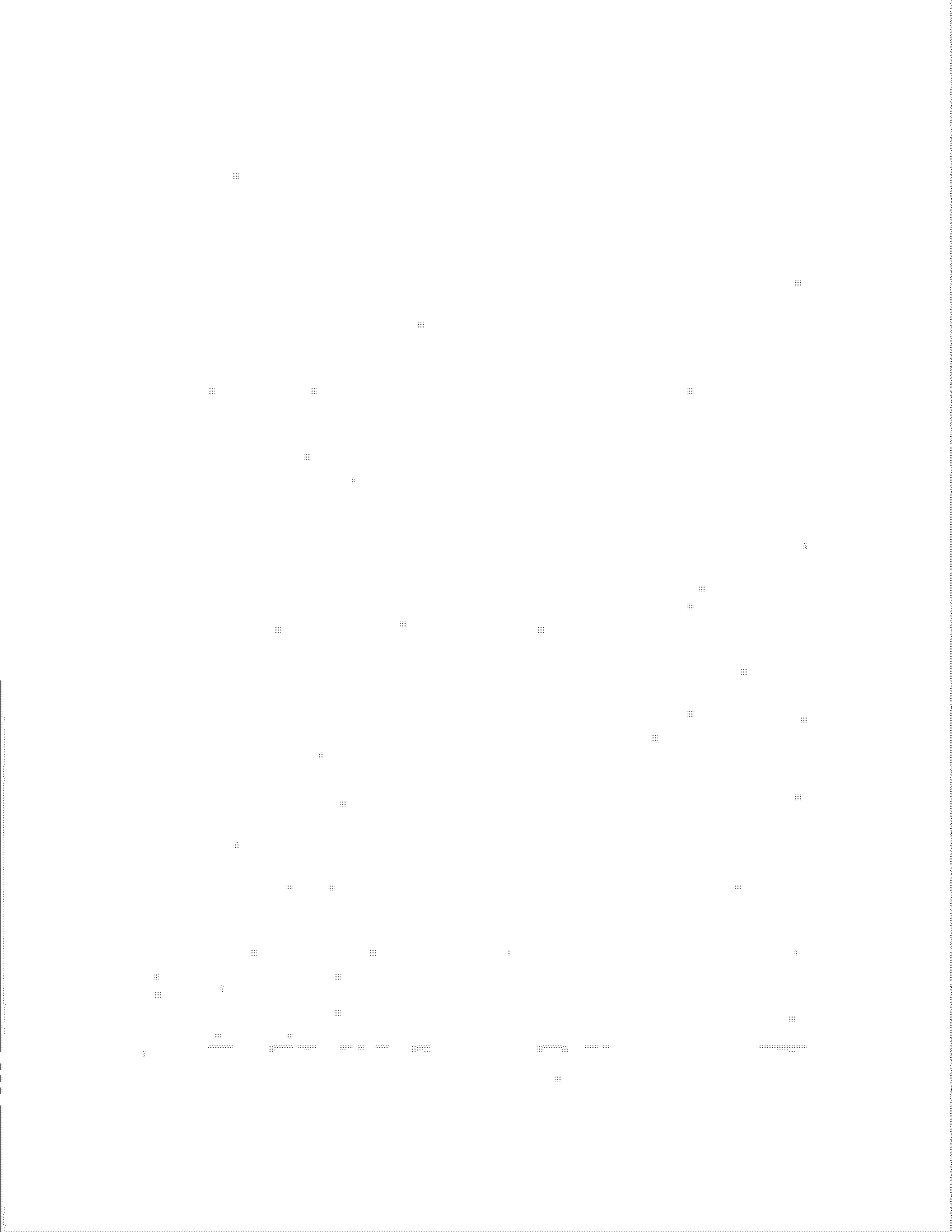
On October 14th, 2024 at 1235 hours, I observed a vehicle traveling northbound on Spring Street near Main Street. The vehicle was a red Chrysler 300 bearing registration GQQ6568. The license plate was ran through LEADS and did not return through the system. The registration plate was not registered in Ohio. I made the traffic stop and the driver stopped on Main Street. The driver did not have a license and handed me an ID card. The driver was identified as Christopher J. Rutherford. The driver stated it was his vehicle, but he did not have any paperwork for the vehicle. The driver stated it was an old plate he just put on the vehicle. The driver displayed slow and draught out speech, blank stare facial expression, droopy eyes, constricted pupils the size of a pinpoint, facial scratching, wiping his nose, shaky movements, and inability to stay still. The driver was brought back to the patrol bike for further investigation.

The driver was under a non-compliance suspension. Trooper N. Bishop arrived on scene to assist. The driver was patted down and place in his patrol car. Trooper N. Bishop advised the driver of his Miranda Rights. I asked the driver if he had any illegal items in the vehicle and he stated just marijuana. I started an administrative inventory on the vehicle as it was to be towed by Buckeye Towing. On the driver floorboard was a metal smoking pipe that was loaded up with a white crystallike rock. There was a blue container on the floorboard with small white crystallike rocks inside it. Both items were seized as evidence. There was also small amounts of marijuana and marijuana smoking pipes inside the vehicle.

Trooper Bishop started talking to the driver and notified him of what was found in the vehicle. The driver admitted to smoking marijuana and smoking crack. The driver admitted to smoking crack around 7:30 AM that morning. The driver stated he has not slept either. When asked what drugs would come back in his system if he took a drug test he admitted to marijuana and crack. The driver asked to step out and conduct field sobriety tests.

The driver denied any head injuries or glasses. The driver was checked for HGN and no clues were present. The constricted pupils were still present. The next test was a walk and turn test. The driver moved his feet before starting the test. The driver started the test and raised his arms and then stopped. He went back to start the test again. He stopped and tied his shoes. The driver started the test and was raising his arms. He made an incorrect turn that wasn't demonstrated to do in that manner. The driver walked very unsteadily back down the line. The driver showed four of eight clues. The last test was a one leg stand test. The driver was very unsteady and was swaying. The driver raised his arms from his sides, and put his foot down. The driver showed three of four clues. The driver was placed under arrest for OVI and possession of drugs. The driver's person was searched. The vehicle was towed by Buckeye Towing.

The driver was read the BMV 2255 and consented to take a urine test. The urine test was sent to the OSP crime lab for testing. The seized drugs believed to be crack was sent to the OSP crime lab for testing. The driver was cited and released from custody on charges for valid registration plate, no seatbelt, OVI, and DUS non-compliance. The driver is set to appear at Clark County Municipal Court at 1100 hours on October 21, 2024. A grand jury packet will be sent down to the Clark County Common Pleas Court for indictment on the possession of drugs a Schedule II substance. Lab results will be sent to the prosecutor's office once they are available.







OHIO DEPARTMENT OF PUBLIC SAFETY  
OHIO STATE HIGHWAY PATROL

**IMPAIRED DRIVER REPORT**

NAME Christopher Rutherford	ARREST
VEHICLE CONDITION Fair	
VEHICLE DISPOSITION Buckeye Towing	

**CLOTHING DESCRIPTION AND CONDITION**

HAT OR CAP	
JACKET OR COAT Orange button up	
SHIRT OR DRESS Muscle T-Shirt	
PANTS OR SKIRT Jeans	
SHOES Shoes	HEELS
ODOR OF ALCOHOLIC BEVERAGE NA	
SPEECH Slow and draught out	
EVIDENCE OF DRUG USE (PUPIL SIZE) Constricted	

**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"/>

WALK AND TURN	ONE LEG STAND
<input checked="" type="checkbox"/> Moves feet to keep balance while listening to instructions	<input checked="" type="checkbox"/> Sways while balancing (during count)
<input type="checkbox"/> Starts before instructions completed	<input checked="" type="checkbox"/> Raises arm 6" for balance
<input checked="" type="checkbox"/> Stops while walking to steady self	<input type="checkbox"/> Hops
<input type="checkbox"/> Does not touch heel to toe	<input checked="" type="checkbox"/> Puts foot down
<input checked="" type="checkbox"/> Raises arms 6" for balance	<input type="checkbox"/> Cannot do test (document reason for not completing)
<input type="checkbox"/> Steps off line while walking	
<input checked="" type="checkbox"/> Turns incorrectly or loses balance while turning	
<input type="checkbox"/> Incorrect number of steps	
<input type="checkbox"/> Cannot do test (document reason for not completing)	

PBT RESULT
<input type="checkbox"/> P <input type="checkbox"/> W <input type="checkbox"/> F   Percent

OTHER SKILL EVALUATIONS Droopy eyes, facial scratching, unable to be still, blank stare, poor divided attention skills, very poor balance, admission to consuming drugs, possession of drugs			
AUDIO / VIDEO RECORDING <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		STORAGE MEDIA REFERENCE #	
OFFICER'S NAME Tpr. B. Baker	UNIT 0738	POST 25	DATE 10/14/24



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