

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					



24TRC11522

TICKET NO. OHP120417111820240153
NUMBER OF COUNTS 1

**CLARK COUNTY
MUNICIPAL COURT OF
SPRINGFIELD, OHIO**

**THE STATE OF OHIO
THE CITY OF SPRINGFIELD**

VS

**JOSHUA S CLAY
535 KNICKERBOCKER AVE.
SPRINGFIELD OH 45506**

**D.O.B.: 1989-12-02
SSN :**

VIOLATION:

4511.19A1A

DATE OF ARRAIGNMENT: 0001-01-01 0000

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 To Be Set AT IN Clark Co Municipal Court

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

CITY VILLAGE TOWNSHIP Springfield, Clark COUNTY, OHIOPERSONAL 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# OHP120417111820240153 CASE#

NAME Joshua S Clay REFERENCE # J28Q7NK

STREET,CITY 535 Knickerbocker Ave., Springfield

COUNTY, STATE, ZIP OH, 45506

PHONE# TEXT/PHONE NOTIFICATION APPROVED? YES NOOPERATOR LICENSE / STATE ID# None BIRTH DATE 12/02/1989 ISSUE DATE 02/03/2024 STATE OH TK565886* If no OL/State ID; REQUIRED documentation attached: Yes

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

12/02/2031 CDL MC Other [R] [E]

SEX HEIGHT WEIGHT EYES HAIR RACE FINANCIAL RESPONSIBILITY PROOF

M 5'7" 165 BRO BLK BNH Yes No N/A

TO DEFENDANT: COMPLAINT ON Nov 18, 2024 AT 0014, 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 2017 MAKE Kia Motors MODEL 4Door

COLOR Black LICENSE # KKJ8720 STATE OH

UPON A PUBLIC HIGHWAY, NAMELY East Street DIRECTION Northbound

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

Prior OVs: # of prior OVs Years of prior OVs 4 16 15 12 12

DRIVER LICENSE: None Not on person Revoked Suspended EXPIRED: < 6 months > 6 months Failure to Reinstate Suspension Type:SAFETY BELT: Failure to wear ORC ORD T.P. Driver Passenger Child Restraint Booster SeatOTHER 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 2VISIBILITY: Clear Cloudy Dusk Night Dawn A/VWEATHER: Rain Snow Fog No Adverse Construction ZoneTRAFFIC: Heavy Moderate Light None Workers PresentAREA: Business Freeway Industrial Residential Rural SchoolCRASH: Yes No Almost Caused Non-Injury INJURY FATAL

Crash Report #

REMARKS: ****REVIEW FOR FELONY OVI***

ACCOMPANYING CRIMINAL CHARGE(S): Yes No TOTAL # OFFENSES: 1

This summon served personally on the defendant on Nov 18, 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

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 MailReceipt 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: OHP120417111820240153



OHIO DEPARTMENT OF PUBLIC SAFETY
OHIO STATE HIGHWAY PATROL

IMPAIRED DRIVER REPORT

NAME Joshua Steven Clay	ARREST OHP120417111820240145 OHP120417111820240153
VEHICLE CONDITION Fair	
VEHICLE DISPOSITION Shield Towing	

CLOTHING DESCRIPTION AND CONDITION

HAT OR CAP None	
JACKET OR COAT None	
SHIRT OR DRESS White tshirt	
PANTS OR SKIRT Blue jeans	
SHOES Flip-flops	HEELS None
ODOR OF ALCOHOLIC BEVERAGE Strong odor of an alcoholic beverage	
SPEECH Nothing notable	
EVIDENCE OF DRUG USE (PUPIL SIZE) Glassy eyes	

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 type="checkbox"/>	LACK OF SMOOTH PURSUIT	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	ONSET OF NYSTAGMUS BEFORE 45°	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	PRESENCE OF VERTICAL NYSTAGMUS	<input checked="" type="checkbox"/>

WALK AND TURN

- Moves feet to keep balance while listening to instructions
- Starts before instructions completed
- Stops while walking to steady self
- Does not touch heel to toe
- Raises arms 6" for balance
- Steps off line while walking
- Turns incorrectly or loses balance while turning
- Incorrect number of steps
- Cannot do test (document reason for not completing)
Unable in hospital

ONE LEG STAND

- Sways while balancing (during count)
- Raises arm 6" for balance
- Hops
- Puts foot down
- Cannot do test (document reason for not completing)
Unable in hospital

PBT RESULT

P W F Percent N/A

OTHER SKILL EVALUATIONS

None

AUDIO / VIDEO RECORDING <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	STORAGE MEDIA REFERENCE # SP1223		
OFFICER'S NAME Trooper C. Piatt	UNIT 0417	POST 12	DATE 11/18/24

STATEMENT OF FACTS

On November 18, 2024, at approximately 0014 hours. I was sitting stationary on Selma Road near East Street in the city of Springfield, Clark County, Ohio. I observed a 2017 black Kia Forte in the Sunoco parking lot (720 Selma Road). The Kia began to drive toward the East Street exit but saw Trooper M. Shelton drive by. The Kia stopped and sat stationary until he suspected Trooper M. Shelton was gone, which raised my suspicion. Once the Kia exited onto East Street, I attempted to pull out and follow it, only to discover that it was traveling northbound at a high rate of speed. I activated my radar, utilizing the same direction mode. The radar provided a steady audible tone and digital reading of 54 MPH in a posted 35 MPH zone. I activated my overhead emergency lights in order to catch up to the Kia and initiate a traffic stop. The Kia turned westbound on Kenton Street and maintained a quick speed. I activated my audible siren. The Kia quickly turned northbound on Central Avenue. As I turned the corner onto Central Avenue, I observed the Kia pulled over and an African American male, later identified as Joshua Steven Clay, exit the driver's seat and begin running westbound on foot through an alleyway. I utilized my patrol car to close the distance between Mr. Clay and me.

Mr. Clay ran into the backyard of 751 E. Pleasant Street and jumped over the fence. I continued to chase Mr. Clay down the sidewalk of E. Pleasant Street. While running on foot, I kept Trooper M. Shelton informed about my approximate location, as he was in the nearby area. Mr. Clay ran in between 731 and 733 E. Pleasant Street and jumped a second fence. I verbally advised Mr. Clay he would be TASED. Mr. Clay then began climbing over debris that was between the two residences in an attempt to further elude me. Due to the size and likelihood of falling or getting caught on the debris, I gave three warnings and deployed my TASER. The first TASER deployment was unsuccessful, and Mr. Clay continued to create distance, so I deployed my TASER a second time. The second deployment was successful, rendering Mr. Clay incapacitated and causing him to fall to the ground. Mr. Clay landed on his right side, and I issued multiple commands, instructing him to make his hands visible. The area in which Mr. Clay fell was a confined space with minimal room for movement. Mr. Clay was initially compliant; at one point, Mr. Clay began digging in his waist band. Mr. Clay retrieved a Kia key fob and attempted to give it to me. I assisted Trooper M. Shelton in finding my location. Once Trooper M. Shelton arrived, I advised Mr. Clay to back up, allowing me to climb over the large debris. When asked, Mr. Clay denied having any weapons on his person. I verbally advised Mr. Clay of the reason for the traffic stop. I verbally advised Mr. Clay of his Miranda rights. Once out of the confined space, I arrested Mr. Clay. I handcuffed Mr. Clay behind his back. While handcuffing Mr. Clay, I detected a strong odor of an alcoholic beverage coming off his person. I escorted Mr. Clay back to my patrol car. Trooper M. Shelton was familiar with Mr. Clay because he had prior interactions from a felony OVI arrest.

When I advised dispatchers of Mr. Clay's information, they advised Mr. Clay had an outstanding felony and misdemeanor warrant, both for OVI.

A search incident to arrest was completed. I requested Springfield EMS respond to the scene to assess Mr. Clay. While waiting on EMS, I utilized the department-issued TASER probe removal tool to remove the two (2) TASER probes from Mr. Clay's left hip/buttocks area.

Once Sergeant J. Kunka arrived, I briefed him on the situation; Mr. Clay was sitting in the back of my patrol car. Sergeant J. Kunka spoke with Mr. Clay about the situation.

Once Springfield EMS arrived on scene, Mr. Clay was complaining of difficulty breathing and requested to be transported to the hospital. EMS personnel requested I ride with them to Springfield Regional Medical Center (SRMC).

Upon arrival at SRMC, Mr. Clay was turned over to medical staff for evaluation. I read and showed the Ohio BMV Form 2255 to Mr. Clay, which was witnessed by Springfield Police Officer Anderson (unit # 889). When asked, Mr. Clay consented to the urine screen.

While waiting on Mr. Clay to submit to the urine test, I asked if he'd be willing to participate in the horizontal gaze nystagmus test.

Prior to beginning the test, I asked the pre medical questions. When asked, Mr. Clay denied wearing contact lenses, glasses, or taking any medications.

Horizontal gaze nystagmus test: With Mr. Clay lying in the hospital bed. I placed the tip of my ink pen (stimulus) approximately 12–15 inches from Mr. Clay's face; I observed both pupils were equal sizes and no resting nystagmus was present. I instructed the test to Mr. Clay, and when asked, Mr. Clay stated he understood it and had no questions. Both eyes equally tracked. During the test, I observed a lack of smooth pursuit, distinct and sustained nystagmus at maximum deviation, and the onset of nystagmus prior to 45 degrees. Vertical nystagmus was present.

When asked, Mr. Clay denied consuming any alcoholic beverages today and alleged that he drank yesterday, November 17, 2024.

Mr. Clay and I remained at SRMC for a long duration of time while medical staff completed their medical evaluation. I collected the urine sample, packaged it, and sent it to the Ohio State Highway Patrol Crime Lab for analysis.

Mr. Clay would periodically get irate over the situation and make racial allegations. When Mr. Clay was released from SRMC, I transported him to the Clark County Jail.

Mr. Clay was incarcerated on the following offenses:

- 4511.21- Speed – 54 MPH in a posted 35 MPH zone.
- 4513.263(B)(1)- Seatbelt
- 4510.12- No operator's license
- Outstanding felony and misdemeanor OVI warrants

Additional charges of OVI- 4511.19(A)(1)(a) were submitted for felony review due to four (4) prior OVI convictions within 20 years. A review of Mr. Clay's driving record showed the following OVI convictions.

- March 13, 2016 – Clark County Common Pleas court- case number 16CR0216
- March 20, 2015- Clark County Municipal Court- case number 1503079
- April 29, 2012- Clark County Municipal Court- case number 1205078
- March 23, 2012- Clark County Municipal Court- case number 1203692

Mr. Clay also has two pending OVI charges from the following courts:

- December 24, 2023- Clark County Common Pleas court- Case number 24CR0184
- March 11, 2024 – Xenia Municipal Court- case number 24TRC00848

Mr. Clay was provided copies of the required paperwork, which was turned over to Clark County Jail Correction staff. Mr. Clay was given a court date of Monday, November 18, 2024, at 10:30 a.m.



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 <i>Joshua Sherry Day</i>		DRIVER LICENSE # <i>1KU65886</i>		CLASS <i>CD</i>	STATE <i>OH</i>
CURRENT STREET ADDRESS (AS VERIFIED BY OFFICER) <i>555 Knickerbacker Ave</i>					
CITY <i>Springfield</i>		OHIO COUNTY OF RESIDENCE <i>Clark</i>		STATE <i>OH</i>	ZIP CODE <i>45506</i>
DATE OF BIRTH <i>1/1/1984</i>	SOCIAL SECURITY # <i>123-45-6789</i>	4 DIGIT COURT CODE <i>1234</i>		COUNTY OF VIOLATION <i>Clark County</i>	
DATE OF VIOLATION <i>1/1/2014</i>	TIME OF VIOLATION <i>12:00 PM</i>	PLACE OF TEST <i>OSHP</i>		VIN <i>1C3PCK4U7FH044964</i>	
DATE OF REFUSAL OR TEST <i>1/1/2014</i>	TIME OF REFUSAL OR TEST <i>12:00 PM</i>	YEAR <i>2014</i>	MAKE <i>BMW</i>	LICENSE PLATE # <i>1KU65886</i>	TYPE PLATE <i>CD</i>
VEHICLE OWNER'S NAME <i>Alannah Davis</i>		DATE OF BIRTH <i>1/1/1984</i>		STREET ADDRESS <i>123 Main St</i>	
CITY <i>Springfield</i>		STATE <i>OH</i>		ZIP CODE <i>45503</i>	
VEHICLE STORED AT (STREET ADDRESS) <i>OSHP Training</i>					
CITY <i>Springfield</i>					

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). 0.00% 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.
- 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 marihuana 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) 0.00% 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.

X

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 *OSHP*
ARRESTING OFFICER'S SIGNATURE

ENFORCEMENT AGENCY

OHO *OSHP*

N.C.I.C. #

X *Joshua Sherry Day*
WITNESS'S SIGNATURE

OFFICER'S BUSINESS STREET ADDRESS

CITY *Springfield* STATE *OH* ZIP CODE *45503*

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 *Joshua Sherry Day*
ARRESTING OFFICER SIGNATURE

X *OSHP*
PEACE OFFICER SIGNATURE

Sworn to before me this *12* day of *January* 20*14*

20

X *OSHP*
NOTARY PUBLIC'S SIGNATURE

X *OSHP*
DEPUTY CLERK OF COURT'S SIGNATURE

City of *Springfield*



OHIO DEPARTMENT OF PUBLIC SAFETY
OHIO STATE HIGHWAY PATROL

PROPERTY CONTROL / CRIME LAB SUBMISSION

LABORATORY NUMBER OF BAPTIST STATE BANK

Do not write in this area

AGENCY INFORMATION		DISTRICT / OIU ASSIGNED FACILITY MAIN ORI		DISTRICT / OIU OFFICE		OSHP POST	
AGENCY NAME	<input checked="" type="checkbox"/> OSHP	<input type="checkbox"/> OIU	<input type="checkbox"/> OTHER (list below)	AGENCY MAIN ORI on OSHP / OIU ASSIGNED FACILITY MAIN ORI			
OFFICER / SUBMITTER NAME	Trooper C. Pitt		DATE OF BIRTH		UNIT / BADGE NUMBER		
SUBJECT INFORMATION		NAME (last, first, MI)		NAME (last, first, MI)		S	
INCIDENT INFORMATION		PROPERTY NUMBER		PROPERTY DESCRIPTION		COUNTY OF EVIDENCE	
2		2 4		- 1		3 2 0 0 9 - 0 0 5 1	
CAD No.		2 4		1 1		8 0 0 0 0 0 2 6	
PROPERTY NUMBER		PROPERTY DESCRIPTION		LOCATION COLLECTED		SERIAL NUMBER	
2		Urine Sample		Clark		Springfield Regional	
PROPERTY CHAIN							
PRINTED NAME	SIGNATURE	UNIT NO.	TIME	DATE	COMMENTS	RECEIVING OFFICER PRINTED NAME	RECEIVING OFFICER SIGNATURE
Tro. Colleton Pitt	<i>Tro. Colleton Pitt</i>	0417	0113	11/18/24	COLLECTED	—	—
Tro. Colleton Pitt	<i>Tro. Colleton Pitt</i>	0417	0310	11/18/24	To USPS Spokane	—	—
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 # <u>0417</u> <input checked="" type="checkbox"/> For all Available Drugs <input type="checkbox"/> For Specific Drug(s) <input checked="" type="checkbox"/> For Alcohol <input type="checkbox"/> SF Capsule Added by: <u>0417</u> <input type="checkbox"/> Deceased							
DRUG / CONTROLLED SUBSTANCE ANALYSIS							
<input checked="" 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							
<input type="checkbox"/> Digital Forensic Analysis (Complete CCU Request Service Form) <input type="checkbox"/> Video Analysis (Complete FVA Unit Form)				BCI LABORATORY EXAMINATION DO NOT SEND TO THE OSHP CRIME LAB			
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).							
Remarks:							

COPY

Case No.

**CLARK COUNTY MUNICIPAL COURT
OF
SPRINGFIELD, OHIO**

THE STATE OF OHIO

VS.

JOSHUA STEVEN CLAY
535 Knickerbocker Ave.
Springfield, Ohio 45506
DOB: 12/2/1989

***_*

CHARGE:

Obstructing Official Business

**In violation of Section 2921.31(A)
of the Ohio Revised Code**

PENALTY:

**Second Degree Misdemeanor
Ninety (90) days and/or
\$750 Fine**

Date of Arrest: 11/18/2024

Date of Arraignment: 11/18/2024 10:30 AM

Bond Posted - Cash – Surety

Amount:



OHIO DEPARTMENT OF PUBLIC SAFETY
OHIO STATE HIGHWAY PATROL

Page _____ of _____

VEHICLE INVENTORY / CUSTODY REPORT

Initial Court Date _____ / _____ / _____

CAD#	P 2411118		00000026			
REPORT NO.		DATE / TIME		LOCATION		REASONS FOR CUSTODY
VYR	VMA	VMO	VST	VCO	ODOMETER	<input type="checkbox"/> Pretrial Retention <input checked="" type="checkbox"/> # OVI <input type="checkbox"/> DUS <input type="checkbox"/> Wrongful Entrustment <input type="checkbox"/> Forfeiture Eligibility <input type="checkbox"/> Abandoned - Hazardous <input type="checkbox"/> Abandoned - 48 hours <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Crash <input type="checkbox"/> Rent / Lease / Borrowed <input type="checkbox"/> Owner Unverified <input type="checkbox"/> Other
VIN			LIC	KKJ 8720		STATE
DRIVER LAST NAME		DRIVER FIRST NAME / MI				WORK NO.
CLAY		JOSHUA				HOME / CELL NO.
ADDRESS		535 KNICKERBOKER AVE SPRINGFIELD OH 45504				WORK NO.
OWNER (IF SAME AS DRIVER, WRITE "SAME")		MIRANDA GIVENS				HOME / CELL NO.
ADDRESS (IF SAME AS DRIVER, WRITE "SAME")		720 Mound St Springfield OH 45525		937-4713885		
LOCATION		<input type="checkbox"/> GPS Device <input type="checkbox"/> CD / DVD <input type="checkbox"/> Radar Detector <input type="checkbox"/> Laser Detector <input type="checkbox"/> CB <input type="checkbox"/> Cell Phone <input type="checkbox"/> Stereo / # CD's / DVD's		Total Keys Key-Ignition Key-Trunk	CIRCLE DAMAGE	Condition FAIR Seats Wheels Glass Undercarriage <input type="checkbox"/> Photos <input checked="" type="checkbox"/> Drivable
LOC	INVENTORY / REMARKS			LOC	INVENTORY / REMARKS	
P1	INVENTORY / REMARKS			6	INVENTORY / REMARKS	
SAFETY GLASSES,			6		OWNERS MANUAL, MISC PAPERS	
C MISC CLOTHES, PHONE CHARGER						
			P2		MISC CLOTHES	
P2 BLACK BACKPACK w/ POUCH, CORDS, MISC BINDERS / PAPERS			T		MISC CLOTHES, NIKE SHOES, HAT, SECURITY GUARD, GLOVES, SCARF	
ARRESTING / INVENTORY OFFICER		UNIT NO.	DATE / TIME	@ 11/18/14 0011		Wrecker Company <u>SHIELD TOWING</u>
SUPERVISOR REVIEW		UNIT NO.	DATE / TIME	@ 11/18/14 0233		Vehicle Stored At <u>LOT</u> Tow Driver Signature <u>John</u>
OWNER NOTIFICATION						Owner Request <input type="checkbox"/>
PRINT OWNER'S NAME		UNIT NO.	DATE / TIME	@ 11/18/14 0233		CONDITIONS FOR RELEASE
MIRANDA GIVENS		0334				<input type="checkbox"/> No OSP Hold <input type="checkbox"/> Hold <input type="checkbox"/> HP-60 Required <input type="checkbox"/> Court Release <input type="checkbox"/> Other _____
Relationship if not the owner						
RELEASE OF PROPERTY						
<input type="checkbox"/> Plates	SIGNATURE <u>X</u>	UNIT NO.	DATE / TIME	/ /		
<input type="checkbox"/> Vehicle	SIGNATURE <u>X</u>	UNIT NO.	DATE / TIME	/ /		