

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 CHANGED 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:	COSTS:		
	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: _____				
_____ JUDGE				
ENTRY MODIFYING SUSPENSION				
NOTICE OF APPEAL				
ATTORNEY NAME AND ADDRESS:				

Case No. 24TRC12180

Number of Counts _____

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

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

vs.

DOUGLAS E SMITH III
1419 CLARK ST
Pittsburgh PA 15221
D. O. B. 09-28-1990
S. S. NO. XXX-XX-

VIOLATION:
A OVI (4511.19A1A)
B _____
C _____
D _____
E _____
F _____

DATE OF ARRAIGNMENT: 12-04-2024

ASSIGNMENT:
(1) _____
(2) _____
(3) _____
(4) _____
(5) _____
(6) _____
(7) _____

INSURED? YES ☒ NO ☐
OL HELD? YES ☒ NO ☐

BOND POSTED - CASH-SURETY _____
AMOUNT _____

STAPLE TOP OF TICKET ON THIS LINE

NOTES

DL - 6 COMPLETED AND

MAILED _____ 20 _____

By _____, Deputy Clerk

TO DEFENDANT: SUMMONS YOU ARE SUMMONED AND ORDERED TO APPEAR

ON 12/04/2024 AT 1330 IN Clark Co Municipal Court

AT 50 E COLUMBIA ST, SPRINGFIELD, OH, 45501

☐ CITY ☒ VILLAGE ☐ TOWNSHIP Donnelsville, 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# 01205465113020242332

CASE #

NAME Douglas Eugene Smith III

REFERENCE # 0PBZGQI

STREET/CITY 1419 Clark Street, Pittsburgh

COUNTY, STATE, ZIP PA, 15221

PHONE# (937) 536-8035 TEXT/PHONE NOTIFICATION APPROVED? ☐ YES ☒ NOOPERATOR LICENSE / STATE ID# ☐ None ☒ 33881455 BIRTH DATE 09/28/1990 ISSUE DATE 10/08/2024 STATE PA* If no OL/State ID; REQUIRED documentation attached: ☒ YesCLASS D EXPIRES 09/29/2028 ENDORSEMENT(S)/RESTRICTION(S) ☐ CDL ☐ MC ☐ Other SS# (last 4 digits)SEX M HEIGHT 6'00" WEIGHT 350 EYES BRO HAIR BRO RACE BNH FINANCIAL RESPONSIBILITY PROOF? ☐ Yes ☒ No ☐ N/A

TO DEFENDANT: COMPLAINT ON Nov 30, 2024 AT 2211, 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 2023 MAKE Chevrolet MODEL SUV

COLOR White LICENSE # JXB1854 STATE OH

UPON A PUBLIC HIGHWAY, NAMELY E. Main St DIRECTION Eastbound

AT/NEAR Hampton Road (M.P.)

IN THE Village OF Donnelsville 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 4511.19A1A
☐ Blood ☐ Breath ☐ Urine ☒ Refused

Prior OVI's: # of prior OVI's 0 Years of prior OVI's

DRIVER LICENSE: ☐ None ☐ Not on person ☐ Revoked ☐ Suspended ☐ ORC ☐ ORD ☐ T.P.
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:

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

This summons served personally on the defendant on Nov 30, 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.

Lyons, Adam

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	Badge	Precinct	Zone
1220	465	12	05

Docket # Page # Case #

Defendant's Attorney Name / Address / Telephone

If Juvenile, Parents' Names: Phone#:

Grade: School:

DATE COURT ACTION: ORDERS

☐ 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 \$ Served DATE:☐ Summons Issued Executed DATE:☐ Warrant Issued

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: 01205465113020242332



						INCIDENT NUMBER 24 1130 001		INCIDENT TYPE Offense			
ADMINISTRATIVE	NATURE CODE: TRAF Traffic Stop OMVI Drunk Driver					CLEARANCE CODE: F		COMPLETION DATE :			
	GEO CODE: A							A DEATH OF OFFENDER B PROSECUTION DECLINED C EXTRADITION DECLINED D VICTIM REFUSED TO COOPERATE E JUVENILE / NO CUSTODY F ARREST - ADULT G ARREST - JUVENILE H WARRANT ISSUED I INVESTIGATION PENDING J CLOSED K UNFOUNDED U UNKNOWN Z COLD CASE			
	Detailed GEO Code: Inside Village										
	TOD: 00:25										
	TOA: 00:25										
SPECIAL SECTION:					CLEARANCE DATE/TIME 11/30/2024 23:50		CLEARED BY 465				
Donnelsville Police Department Initial Incident Report											
REPORT DATE / TIME				INCIDENT OCCURED FROM				INCIDENT OCCURED TO			
MONTH	DAY	YEAR	TIME	MONTH	DAY	YEAR	TIME	MONTH	DAY	YEAR	TIME
12	1	2024	00:25	12	1	2024	00:25	12	1	2024	00:25
COUNTY: Clark County				FIPS Code: (22288) Donnelsville							
INCIDENT LOCATION / REF PT. (Street, Apt, City, State, Zip): Eastbound Main Street 0.00 At Harrison St				LATITUDE		LONGITUDE		K9 USED No		TYPE OF SEARCH:	
OFFENSE (OFFENSE CODE)				Count	Hate Bias	A/C	F/M & Degree	TYPE CRIMINAL ACTIVITY			
(4511.19A1A) Driving While Under the Influence of Alcohol and/or Drugs					N	C	M-1	(ENTER UP TO 3 FOR EACH OFFENSE) B - BUYING / RECEIVING C - CULTIVATING/MANUFACTURING/PUB D - DISTRIBUTING / SELLING E - EXPLOITING CHILDREN G - OTHER GANG J - JUVENILE GANG N - NO GANG INVOLVED O - OPERATING/PROMOTING/ASSISTING P - POSSESSING / CONCEALING T - TRANSPORTING / TRANSMITTING U - USING / CONSUMING			
LOCATION OF THE OFFENSE								LARCENY TYPE			
47		COMMERCIAL LOCATIONS		32 Clothing Store 33 Drug Store 34 Liquor Store 35 Shopping Mall 36 Sporting Goods 37 Grocery / Supermarket 38 Variety / Convenience 39 Department Store 40 Other Retail Store 41 Factory / Mill / Plant 42 Other Building		51 Public Transit Vehicle 52 Other Outside Location 53 Abandoned/Condemned Structure 54 Amusement Park 55 Arena/Stadium/Fairgrounds/Coliseum 56 Atm Machine Separate From Bank 57 Camp/Campground 58 Cargo Container 59 Daycare Facility 60 Dock/Wharf/Freight/Modal Terminal 61 Farm Facility 62 Gambling Facility/Casino/Race Track 63 Military Installation 64 Rest Area 65 Shelter-Mission/Homeless 66 Tribal Lands 67 Library 77 Other Location		23A Pocket Picking 23B Purse Snatching 23C Shoplifting 23D Theft from building 23E Theft from Coin-Op Machine 23F Theft from Motor Vehicle 23G Motor Vehicle Parts/Access 24O Theft of Motor Vehicle 23H Other			
RESIDENTIAL STRUCTURE		15 Auto Shop 16 Financial Institution 17 Barber / Beauty Shop 18 Hotel / Motel 19 Dry Cleaners / Laundry 20 Professional Office 21 Doctor's Office 22 Other Business Office 23 Amusement Center 24 Rental Storage Facility 25 Other Commercial Service		OUTSIDE				SUSPECTED OF USING			
PUBLIC ACCESS BUILDING		RETAIL		43 Yard 44 Construction Site 45 Lake / Waterway 46 Field / Woods 47 Street 48 Parking Lot 49 Park / Playground 50 Cemetery				<input checked="" type="checkbox"/> ALCOHOL <input type="checkbox"/> DRUGS <input type="checkbox"/> COMPUTER EQUIP <input type="checkbox"/> NOT APPLICABLE <input type="checkbox"/> CARGO THEFT			
01 Single Family Home 02 Multiple Dwelling 03 Residential Facility 04 Other Residential 05 Garage / Shed 06 Transit Facility 07 Government Office 08 School 09 College 10 Church 11 Hospital 12 Jail/Prison 13 Parking Garage 14 Other Public Access		26 Bar 27 Buy / Sell / Trade Shop 28 Restaurant 29 Gas Station 30 Auto Sales Lot 31 Jewelry Store									
METHOD OF OPERATION: 1) Used Auto											
METHOD OF ENTRY		METHOD OF ENTRY - BURGLARY / B&E				METHOD OF ENTRY - MOTOR VEHICLE THEFT					
<input type="checkbox"/> Force <input type="checkbox"/> No Force		ENTRY	EXIT	ENTRY	EXIT	ENTRY	EXIT				
No. Premises Entered		1 BASEMENT 2 1 ST FLOOR 3 2 ND FLOOR 4 OTHER 5 UNKNOWN	1 DOOR 2 WINDOW 3 GARAGE 4 SKYLIGHT 5 OTHER 6 UNKNOWN	1 FRONT 2 SIDE 3 REAR 4 ROOF 5 OTHER 6 UNKNOWN		01 MOTOR RUNNING/ KEYS IN CAR 02 UNLOCKED 03 DUPLICATE KEY USED 04 WINDOW BROKEN 05 TOWED		06 HOT WIRED 07 SLIM JIM/COAT HANGER 08 TUMBLERS REMOVED 09 COLUMN PEELED 10 IGNITION PEELED			
TYPE OF WEAPON FORCE :		None									
REQUESTING AGENCY:											
REPORTING OFFICER: Adam Lyons						BADGE NUMBER: 465		DATE: 12/1/2024			
APPROVING OFFICER:						BADGE NUMBER:		DATE:			



**Donnelsville Police Department
Initial Incident Summary**

INCIDENT NO. 24 1130 001	REPORT DATE / TIME 12/1/2024 00:25	PHOTO POUCH NO.
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Incident Summary

On Saturday, November 30, 2024, around 2200 hours, several deputies from the Clark County Sheriff's Office were dispatched to the area of Medway Carlile Road for a white Chevrolet SUV bearing Ohio registration JXB1854, due to the vehicle traveling in the wrong lane of travel. Dispatch advised the vehicle was at the stop light on Medway Carlile Road at National Road (US 40) and the vehicle was turning eastbound. The vehicle was now traveling eastbound on National Road (US 40), the vehicle was traveling east in the westbound lane. Dispatch advised the information and updates on the vehicle were coming from a caller who was driving behind the vehicle in question.

The deputies in-route advised they were still far off but were heading to the area. Dispatch advised me of the vehicle and stated it should be coming through Donnelsville at any minute. Dispatch advised again that the vehicle was eastbound in the westbound lanes and was possibly an OVI driver. I advised dispatch I was at the West end of the village waiting to see if the vehicle drove into the village. I was situated on Willowbrook Road and E. Main Street. After several minutes, a white Chevrolet Traverse entered the village with a dark colored Saturn Ion following closely behind.

I pulled out behind the Saturn to try and observe any traffic violations on the Chevrolet and to also try to verify the registration as I could not see it with the vehicle behind it. The Saturn Ion turned southbound on S. Hampton Road as I soon as I pulled behind it. The Chevrolet also had its turn signal on to turn right but pulled over to the side of the road just past Hampton Road. I initially drove past the Chevrolet to verify this was the vehicle in question. As I passed the vehicle, I observed the license plate of JXB1854 and observed the driver matching the photograph attached to the registered owner, Douglas E. Smith III, DOB: 09281990.

Once the vehicle was verified, I turned around and pulled behind the vehicle which was still parked on the south side of E. Main Street (US 40) near Harrison Street. I contacted the driver to see if they were OK. The driver, identified as Mr. Smith, had very blood shot eyes and was chugging a bottle of water. I asked Mr. Smith if he was OK and advised him people called regarding him driving in the wrong lane of travel. Mr. Smith advised he was OK. I asked Mr. Smith if he had identification, and he was able to provide a valid driver's license through Pennsylvania. I asked Mr. Smith if he had anything to drink tonight and he stated yes. I asked Mr. Smith if he would submit to a sobriety test to which he refused. While speaking with Mr. Smith he had slurred speech. I advised Mr. Smith to exit the vehicle and advised him he was under arrest for OVI. Around this time Deputy S. Harris #106 arrived on scene to assist. I advised Mr. Smith a second time to exit the vehicle but again he refused. I grabbed Mr. Smith's left arm and wrist and advised him he needed to exit or he would be removed from the vehicle. Mr. Smith advised he would exit but after doing so refused to turn around after being told again he was under arrest. Mr. Smith became agitated and began to stiffen up as we attempted to place him in handcuffs. I grabbed Mr. Smith's right arm while Deputy Harris had a hold of his left. Once Both arms and hands were behind his back, I held his arms while Deputy Smith placed Mr. Smith in handcuffs. Due to Mr. Smith's size of 6' 0 and 350 pounds, he was placed in two sets of handcuffs to not create undo stress on his arms or shoulders. Smith was searched for

Reporting Officer: Adam Lyons	Badge No: 465	Date: 12/1/2024
Approving Officer:	Badge No:	Date:

officer safety but while doing so, he again began to tense up and attempted to keep his legs and feet together to keep from being searched. A search was conducted, and nothing was located on Mr. Smith. Mr. Smith was secured in the rear of my patrol car.

A vehicle inventory search was conducted prior to the vehicle being removed from the scene by Dan's Towing. Nothing illegal was located during the search. A large unopened bottle of tequila was located on the backseat floor board behind the driver side.

I transported Mr. Smith to the Ohio Highway Patrol Post 12 to complete a breath test. Once at the OSP post, I read Mr. Smith the Ohio BMV 2255 form and requested that Mr. Smith submit to a breath test. Mr. Smith refused the test at 2307 hours. I completed the BMV form, and a copy was given to Mr. Smith. A traffic citation for OVI (ORC 4511.19a1a) was issued to Mr. Smith. Mr. Smith was issued a court date of Wednesday, December 4, 2024, at 1330 hours for the citation. Mr. Smith was advised his driving privileges were now suspended until at least his court date and I also advised Mr. Smith his driver's license was confiscated and will be sent to court.

Once the necessary paperwork was completed, Mr. Smith was released to his brother, James, who arrived on scene to take custody of him.

I will be calling to try and obtain a written statement from the original caller at a later date. Due to the time of clearing the call at 2350 hours, I didn't want to wake anyone at this hour.

There is nothing further to report currently.

Respectfully submitted,

Officer A. Lyons #465

Reporting Officer: Adam Lyons	Badge No: 465	Date: 12/1/2024
Approving Officer:	Badge No:	Date:



Donnelsville Police Department
REPORT OF INVESTIGATION
Investigative Notes

INCIDENT NO: 24 1130 001	REPORT DATE/TIME 12/1/2024 00:25	PHOTO POUCH NO.
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Monday, December 2, 2024 09:44	465 Adam Lyons
<p>On Monday, December 2, 2024, at 0940 hours, I attempted to make contact with the witness and caller from this OVI. I only have the callers first name of Larry (unknown last name) and a phone number of 760-920-0716. I attempted contacted but was unsuccessful. A voicemail was left for Larry to call me back regarding this case.</p> <p>There is nothing further to report currently.</p> <p>Respectfully Submitted,</p> <p>Officer A. Lyons #465</p>	

REPORTING OFFICER: Adam Lyons	UNIT NUMBER: 465	DATE: 12/1/2024
APPROVING OFFICER:	UNIT NUMBER:	DATE:



Donnelsville Police Department
REPORT OF INVESTIGATION
Suspect / Arrest Report

INCIDENT NUMBER
24 1130 001
REPORT DATE/TIME
12/1/2024 00:25

TOTAL SUSPECTS : 1

NAME / DESCRIPTIVES	No. 1	<input checked="" type="checkbox"/> Adult <input type="checkbox"/> Juvenile <input type="checkbox"/> Unknown <input type="checkbox"/> Business	CHECK APPROPRIATE CATEGORY 2		CHARGES FILED	
	<input type="checkbox"/> Suspect <input checked="" type="checkbox"/> Arrestee <input type="checkbox"/> Suspect/Arrestee <input type="checkbox"/> Runaway <input type="checkbox"/> Missing <input type="checkbox"/> Other			<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
	NAME: (Last, First, Middle): Smith, Douglas, Eugene				SSN#:	
	ALIAS:				GANG AFFILIATION:	
	ADDRESS: 1419 Clark, Street Pittsburgh, PA - 15221				PHONE #: (937) 536-8035	
	EMPLOYER NAME & ADDRESS: , OH				PHONE #:	
	PLACE OF BIRTH		DRIVER'S LICENSE # & STATE		STATE EMPLOYEE	
			33881455 PA		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
	AGE / DOB		GENDER		RACE	
	34 9/28/1990		M		Black, Non-Hispanic Origin	
HEIGHT						
WEIGHT						
HAIR						
Brown						
EYES						
Brown						
MARITAL STATUS						
ADDITIONAL DESCRIPTION:						
SCARS, MARKS, TATTOOS :						
1) 2) 3) 4) 5)						
POTENTIAL INJURIES :						
TYPE WEAPON FORCE USED						
SUSPECT USED: 99						
99 NONE						
11 FIREARM						
12 HANDGUN						
12A AUTOMATIC HANDGUN						
13 RIFLE						
13A FULLY AUTOMATIC RIFLE						
13B OTHER FULLY AUTOMATIC WEAPON						
14 SHOTGUN						
15 OTHER FIREARM						
15A SEMI-AUTOMATIC SPORTING RIFLE						
15B SEMI-AUTOMATIC ASSAULT FIREARM						
15C MACHINE PISTOL						
16 IMITATION FIREARM						
17 SIMULATED FIREARM						
18 BB / PELLET GUN						
20 KNIFE / CUTTING INSTRUM.						
30 BLUNT OBJECT						
35 MOTOR VEHICLE						
40 PERSONAL WEAPON						
50 POISON						
60 EXPLOSIVES						
65 FIRE / INCENDIARY DEVICE						
70 DRUGS/NARC/SLEEP PILLS						
80 OTHER WEAPON						
85 ASPHYXIATION						
U UNKNOWN						

ASSOC PERSONS	NAME	ADDRESS (Street, Apt, City, State, Zip)	PHONE	RELATION

ARREST INFORMATION	ARREST / OFFENSE DESCRIPTION		ARREST / OFFENSE CODE	COUNT	F/M & DEGREE	DISPOSITION	LARCENY	ARREST LARCENY TYPE
								23A POCKET PICKING 23B PURSE SNATCHING 23C SHOP LIFTING 23D THEFT FROM BUILDING 23E THEFT FROM COIN-OP MACHINE 23F THEFT FROM MOTOR VEHICLE 23G MOTOR VEH. PARTS/ACCESSORIES 24O THEFT OF MOTOR VEHICLE 23H OTHER
	WARRANT NUMBER		WARRANT DESCRIPTION		WARRANT NUMBER		WARRANT DESCRIPTION	
	1.				2.			
	3.				4.			
	ARREST DATE:		TIME:	ARREST LOCATION (Street, Apt., City, State, Zip)				CITATION NUMBER
	12/1/2024		00:25	EB Main Street Harrison St				
	ARRESTEE ARMED WITH:		1. None		2.	3.	ARREST DISPOSITION:	
	FINGER PRINTED:		THUMB PRINTED:		DNA TAKEN:		ITN NUMBER:	
	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				FBI/BCI #:	
<input type="checkbox"/> MULTIPLE ARRESTEE SEGMENTS INDICATOR		<input type="checkbox"/> COUNT ARRESTEE MULTIPLE ARRESTEE INDICATOR		<input checked="" type="checkbox"/> N/A		ARREST TYPE		
<input type="checkbox"/> Complaint		<input type="checkbox"/> Crime In Progress		<input type="checkbox"/> Warrant				
<input type="checkbox"/> Court Summons/Citation		<input type="checkbox"/> Order Of Protection		<input type="checkbox"/> Other				
COURT:							COURT DATE:	
JAIL SENTENCE		YEARS:	0.00	DAYS:	0.00			

JUVENILE	JUVENILE'S PARENT / GUARDIAN NOTIFIED	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	DATE/TIME NOTIFIED:	NOTIFIED By:	JUVENILE DISPOSITION:
	PARENT / GUARDIAN NAME & ADDRESS				PHONE
	PARENT / GUARDIAN NAME & ADDRESS				PHONE
	DATE OF LAST CONTACT		DATE OF EMANCIPATION		NCIC
	LAST SEEN WEARING				

REPORTING OFFICER: Adam Lyons	UNIT NUMBER: 465	DATE: 12/1/2024
APPROVING OFFICER:	UNIT NUMBER:	DATE:





Donnelsville Police Department
REPORT OF INVESTIGATION
Victim/Reportee/Witness Report

INCIDENT NUMBER
24 1130 001
REPORT DATE/TIME
12/1/2024 00:25

VICTIM	NO.1	VICTIM TYPE: <input type="checkbox"/> Individual <input type="checkbox"/> Financial Institution <input type="checkbox"/> Police Officer (In The Line Of Duty) <input checked="" type="checkbox"/> Society / Public <input type="checkbox"/> Other <input type="checkbox"/> Business <input type="checkbox"/> Government <input type="checkbox"/> Religious Organization <input type="checkbox"/> Unknown <input type="checkbox"/> Trooper <input type="checkbox"/> State Agency												
	<input checked="" type="checkbox"/> Victim <input type="checkbox"/> Witness		NAME (Last, First, Middle):											
	<input type="checkbox"/> Reportee		Society / Public											
	ADDRESS(Street, Apt, City,State, Zip):						PHONE #:							
	OCCUPATION:				STATE EMPLOYEE: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		SSN:							
	RESIDENTIAL STATUS: <input type="checkbox"/> Resident <input type="checkbox"/> Military <input type="checkbox"/> Other <input type="checkbox"/> Tourist <input type="checkbox"/> Not Reported <input type="checkbox"/> Student <input type="checkbox"/> Unknown				STATEMENT OBTAINED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO TYPE: <input type="checkbox"/> Written <input type="checkbox"/> Oral <input type="checkbox"/> Taped <input type="checkbox"/> Other									
	AGE / DOB		GENDER		RACE :		HEIGHT FROM - TO		WEIGHT FROM - TO		HAIR		EYES	
	EMPLOYER NAME & ADDRESS										PHONE #:			
	VICTIM <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		IF INJURED, DESCRIBE INJURIES: 1) 2) 3) 4) 5)				VICTIM DECEASED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		VICTIM WITNESS REFERRAL INFO <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		TYPE OF REFERRAL			
	AGG. ASLT / HOMICIDE CIR : 1)										2)			
VICTIM/SUSPECT RELATIONSHIP :						VICTIM OFFENSE LINK : 1)4511.19A1A								
JUSTIFIABLE HOMICIDE:				ACTIVITY TYPE		ASSIGNMENT TYPE		LE ORI - OTHER JURISDICTION						
My signature verifies that the information on this report is accurate and true X										DATE :				
WITNESS	NO.2	Reportee <input checked="" type="checkbox"/> Witness <input type="checkbox"/> NAME (Last, First, Middle): , Larry								AGE / DOB:		SSN:		
	ADDRESS(Street, Apt, City,State, Zip:										PHONE #: (760) 920-0716			
	EMPLOYER NAME & ADDRESS										PHONE #:			
	STATEMENTS OBTAINED : <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO										TYPE: <input type="checkbox"/> Written <input type="checkbox"/> Oral <input type="checkbox"/> Taped <input type="checkbox"/> Other			

REPORTING OFFICER: Adam Lyons	BADGE NUMBER: 465	DATE: 12/1/2024
APPROVING OFFICER:	BADGE NUMBER:	DATE:





OHIO DEPARTMENT OF PUBLIC SAFETY
BUREAU OF MOTOR VEHICLES

INSTRUCTIONS

For Preparing the BMV 2255 for OVI / Physical Control / Refusal Arrest

All items must be completed on the form in order for the BMV to process the suspension onto the driving record of the individual.

A. IDENTIFYING INFORMATION

1. Driver's Information:
 - a. Enter driver's name, driver license #, class of driver license & state.
 - b. Verify and enter current address of driver (enter only one address).
 - c. Enter driver's Date of Birth and Social Security number.
2. Violation Information:
 - a. Enter date and time of violation.
 - b. Enter date and time of refusal / test.
 - c. Enter the four-digit court code of court that will hear OVI / Physical Control.
 - d. Enter the county in which the violation occurred.
 - e. Enter date, time and place of test if the offender refuses and if reasonable means are used to ensure a chemical test.
3. Vehicle Information:
 - a. Verify and enter VIN # (1981 model years and beyond have 17 characters).
 - b. Enter year and make of vehicle.
 - c. Enter plate number, type of plate and state of issuance.
 - d. Enter vehicle owner information.
 - e. Enter address where vehicle will be stored.

B. QUESTIONS FOR ALS

1. Document the reasonable grounds for OVI or Physical Control arrest before test.
2. Circle whether the arrest was an OVI arrest or a Physical Control arrest.
3. Check appropriate box if offender refused to submit to test(s).
4. If the offender submitted to the test, indicate test level and circle type of test. NOTE: If level is below the required level, the offender will not be placed under an Administrative License Suspension, (ALS). Forward all information to the court.
If the offender submitted to the test, the test score must be entered.
5. Check box for **"Was placed under an Administrative License Suspension (ALS)."**
6. Check box if driver license was seized.
7. Check box if offender was provided a copy of this form at time of arrest.
8. **If offender submits to test(s) and test results are not immediately available, do not impose the ALS until results are available and offender is notified.**
9. The person must submit to the chemical test or tests, subsequent to the request of the arresting officer, within two hours of the time of the alleged violation and, if the person does not submit to the test or tests within that two-hour time limit, the failure to submit automatically constitutes a refusal to submit to the test or tests.
10. Document the reasonable grounds for the OVI / Physical Control arrest before test.
11. If the subject tested for a controlled substance or metabolite, circle the test type.
12. Specify the controlled substance and / or metabolite results: Please note the results should be provided in ng / ml.
13. Check if the subject tested positive for a prohibited level of marijuana metabolite and was under the influence of alcohol and / or a drug of abuse.
14. Please note: Under Ohio Revised Code (R.C.) 4511.19 (A)(1)(j)(viii)(I), the prohibited level of marijuana metabolite, in conjunction with a person being under the influence of alcohol, a drug of abuse, or a combination of the two, is 15 nanograms per milliliter of urine or 5 nanograms per milliliter of whole blood, blood serum, or plasma. Check the appropriate box and list the marijuana metabolite test results if the subject tested positive for prohibited level of marijuana metabolite and was under the influence of alcohol and / or a drug of abuse.
15. If the subject tested over a prohibited level for a controlled substance or metabolite, indicate the date the results were received and indicate the date the subject was served with the notice of ALS.
16. 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. The reasonable means I used to ensure the offender submitted to a chemical test were.

**OVER
PUBLIC**

INSTRUCTIONS
For Preparing the BMV 2255 for OVI / Physical Control / Refusal Arrest

C. Vehicle Sanctions

1. Check box if the plates were seized.
2. Check box if vehicle was seized as a result of an arrest for OVI.
3. Check box if vehicle was seized as a result of an arrest for DUS or wrongful entrustment of a motor vehicle.
4. Check boxes if vehicle is subject to immobilization / forfeiture.

NOTE: Do not send this form to the BMV if this arrest is only for DUS or Wrongful Entrustment of a Motor Vehicle.

D. CDL Information

Complete this block if the offender is the holder of a commercial driver license, or was operating a commercial vehicle. Officer is to read the advice on back of form BMV 2255 (R.C. 4506.17) and indicate that the advice was read and shown by checking the box.

1. Indicate if a refusal.
2. Indicate test results if test was taken.
3. Check appropriate remaining boxes.

E. Offender's Signature

1. Have offender (driver) sign.
2. If the offender refuses to sign, check refused to sign box.

F. Signatures

All signatures on bottom portion of form, "Complete below only for OVI / Physical Control Arrest," must be included in order for BMV to process.

1. Arresting officer must sign, followed by signature of witness. This indicates that the officer in fact has read the advice to the offender.
 - a. Complete County in affidavit portion.
2. Enforcement agency of arresting officer must be indicated.
3. In general, the four digits that are required are positions four through seven of your nine-character NCIC number. Check with your agency head if you have any questions.

NOTE: OSHP, Columbus PD, and Cincinnati PD:

Please check with your agency for the four digits of the NCIC number to use.

4. Enter arresting officer's business street address.
5. Officer must sign form again in presence of a Notary Public, Deputy Clerk of Court, or peace officer.
6. Notary, Deputy Clerk, or peace officer must sign form.
 - a. If Notary signs, must include seal and commission stamp. Must also indicate date sworn to.
 - b. If Deputy Clerk signs, must include court seal / stamp and city.
 - c. If peace officer signs, he or she must have completed an approved course of training as required by R.C. 2935.081.

G. When all of the above have been completed, distribute the copies as follows:

NOTE: Only mail BMV 2255 once a positive test result has been received and an Administrative License Suspension imposed, or if there was an arrest involving a commercial vehicle.

White	<i>BMV (use 2257 envelope), include driver license</i>
Canary	<i>Law Enforcement</i>
Pink	<i>Court</i>
Goldenrod	<i>Offender</i>



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>Douglas E. Smith III</u>		DRIVER LICENSE # <u>33 881 455</u>		CLASS <u>D</u>	STATE <u>PA</u>
CURRENT STREET ADDRESS (AS VERIFIED BY OFFICER) <u>SAME 1419 CLARK ST</u>					
CITY <u>Pittsburgh</u>		OHIO COUNTY OF RESIDENCE <u>N/A</u>		STATE <u>PA</u>	ZIP CODE <u>15221</u>
DATE OF BIRTH <u>09-28-90</u>		4 DIGIT COURT CODE <u>1208 / 220</u>		COUNTY OF VIOLATION <u>CLARK</u>	
DATE OF VIOLATION <u>11 13 12-24</u>		TIME OF VIOLATION <u>2211</u> <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM		PLACE OF TEST <u>OSP CLARK CO</u>	
DATE OF REFUSAL OR TEST <u>1 1</u>		TIME OF REFUSAL OR TEST <u>2307</u> <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM		VIN <u>1GNERFKW9P123095</u>	
DATE OF REFUSAL OR TEST <u>1 1</u>		TIME OF REFUSAL OR TEST <u>2307</u> <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM		YEAR <u>23</u> MAKE <u>Chery</u> LICENSE PLATE # <u>3XB854</u> TYPE PLATE <u>PC</u> STATE <u>OH</u>	
VEHICLE OWNER'S NAME <u>SAME</u>		DATE OF BIRTH <u>1</u>		STREET ADDRESS	
CITY		STATE		ZIP CODE	
VEHICLE STORED AT (STREET ADDRESS) <u>1750 Titus Road Springfield OH 45502</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). 0.02% 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: Vehicle was causing an accident while driving on highway

- ☐ 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) 0.02% 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.

[Signature] In custody ☐ REFUSED TO SIGN
DRIVER'S SIGNATURE

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 [Signature] 12465
ARRESTING OFFICER'S SIGNATURE

Donnellville P.O. OHIO 1 2 0 5
ENFORCEMENT AGENCY N.C.I.C. #

X [Signature] 2536
WITNESS'S SIGNATURE

15 S. Hampton Rd
OFFICER'S BUSINESS STREET ADDRESS
Donnellville OH 45319
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 4506.45 of the Ohio Revised Code. The information contained on this form is true to the best of my knowledge and belief.

X [Signature] 12465
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

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



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>Donald E Smith III</u>		DRIVER LICENSE # <u>155</u>		CLASS <u>1</u>	STATE <u>OH</u>
CURRENT STREET ADDRESS (AS VERIFIED BY OFFICER) <u>1715 LARRY ST</u>					
CITY <u>Pittsburgh</u>		OHIO COUNTY OF RESIDENCE <u>Lawrence</u>		STATE <u>OH</u>	ZIP CODE <u>44122</u>
DATE OF BIRTH <u>09-28-90</u>	SOCIAL SECURITY # <u>12-24</u>		4 DIGIT COURT CODE <u>220</u>	COUNTY OF VIOLATION <u>Lawrence</u>	
DATE OF VIOLATION <u>11-15-24</u>	TIME OF VIOLATION <u>2:11</u> <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	PLACE OF TEST <u>OSP LMAK CO</u>		VIN <u>1GNERFKW9P3123095</u>	
DATE OF REFUSAL OR TEST <u>1-1</u>	TIME OF REFUSAL OR TEST <u>2:30</u> <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	YEAR <u>23</u>	MAKE <u>Chevy</u>	LICENSE PLATE # <u>23534</u>	TYPE PLATE <u>1</u> STATE <u>OH</u>
VEHICLE OWNER'S NAME <u>Same</u>		DATE OF BIRTH		STREET ADDRESS	
CITY		STATE		ZIP CODE	
VEHICLE STORED AT (STREET ADDRESS) <u>1501 Franklin St OH 45502</u>				CITY <u>Pittsburgh</u> STATE <u>PA</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:

- ☐ 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.

[Signature] ☒ In custody ☐ REFUSED TO SIGN
DRIVER'S SIGNATURE

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.

[Signature]
ARRESTING OFFICER'S SIGNATURE

Donna Smith P.O. OH 1 2 5
ENFORCEMENT AGENCY 1234567890 N.C.I.C. #

[Signature]
WITNESS'S SIGNATURE

Donna Smith
OFFICER'S BUSINESS STREET ADDRESS
CITY OH STATE OH ZIP CODE 45319

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

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.

[Signature]
ARRESTING OFFICER SIGNATURE

[Signature]
PEACE OFFICER SIGNATURE

Sworn to before me this 20 day of 20

[Signature]
NOTARY PUBLIC'S SIGNATURE

[Signature]
DEPUTY CLERK OF COURT'S SIGNATURE City of Lawrence

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:

- 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
- 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