STA./UNIT CODE NUMBER	GALLOWAY TOWNSHIP POLICE DEPARTMENT DRINKING and DRIVING REPORT	(1) DEFENDANT First Name	Initial	Last Name	CASE NUMBER
		Ian	A	Smith	2007-10919

(2) Age	(3) Sex	(4) Weight	(5) Eye Color	(6) Race
20	MALE		BROWN	w

(7) Street Address	(8) City and State	(9) Summons No. (Drinking Driving/Allowing ONLY)
[redacted]	[redacted]	E63348

(10) Drivers License Number and State	CDL	(11) Day of Week	Violation Date	Military Time
[redacted]	☐	SATURDAY	04/28/2007	08:52

(12) Year/Color/Make of Vehicle Used	(13) License Number and State
2001 Blue Ford Escort	SRB13D NJ

(14) Vehicle Code: 1

CODES: NON-CDL VEHICLES: (1) Passenger Car / Station Wagen, (2) Passenger Car w/Trailer, (3) Recreational Vehicle, (4) Taxi / Limo, (5) Emergency Vehicle, (6) Motorcycle (7) Moped, (8) Pickup, (9) Van, Step Van, (10) Truck, (11) Truck Combo (12) Other
CDL VEHICLES: TRUCK COMBO: (20) 8'x48' (21) 8 1/2' X 48', (22) 8' X 48+, (23) 8 1/2 X 53', (24) Double Bottom, (25) Truck, (26) Bus, (27) School Bus (28) Limousine, (29) Other

(15) Name of Vehicle Owner	(16) Address of Owner
[redacted]	[redacted]

(17) Municipality of Violation	Code No.	(18) Roadway or Location	(19) County
GALLOWAY TOWNSHIP	0111	Liebig / Vienna Ave.	Atlantic

(20) Arrested By - Badge Number - Station	(21) Tested By - Badge Number - Station
CPL. E. FRYLING #43	

SEQUENTIAL FILE NUMBER

(22) **ACCIDENT INVOLVED**

- ☐ 1 NONE
- ☐ 2 PEDESTRIAN
- ☑ 3 FATAL
- ☐ 4 INJURY
- ☐ 5 1 VEHICLE
- ☐ 6 2 VEHICLES OR MORE
- ☐ 7 OTHER (Explain)

(23) **EXAMINATION**

- ☐ 1 CHEM. BREATH TEST
- ☐ 2 BREATH TEST REFUSED
- ☐ 3 OBSERVATION
- ☐ 4 DOCTOR'S EXAMINATION
- ☑ 5 BLOOD TEST
- ☐ 6 NARCOTICS, HABIT PRODUCING DRUGS, OR HALLUCINOGENIC

LABORATORY ☑ YES ☐ NO REPORT # _____

(24) **SUMMONS ISSUED FOR**

- ☑ 1 39:4-50 INFLUENCE
- ☐ 2 u/21 y.o.a. AND >.01% B.A.C.
- ☐ 3 39:4-50. 13 CDL
- ☐ 4 39:4-14.3g MOPED
- ☐ 5 ALLOWING _____ _____ TO OPERATE
- ☐ 6 BLOOD ALCOHOL RESULTS _____ %
- ☐ 7 SUMMONS No. (39:4-50.2 Refusal) - M.V.
- ☐ 8 SUMMONS No. (39:3-10.24 Refusal) - Comm.
- ☐ 9 SUMMONS No. (39:4-14.3g Refusal) - MOPED

OBSERVATIONS WERE:

(25) **ABILITY TO WALK**

☐ UNABLE TO ☐ ON HANDS AND KNEES ☐ SWAYING ☐ GRASPING FOR SUPPORT
☐ FALLING ☐ MOVED IN CIRCLES ☐ SAGGING ☐ STAGGERING

(26) **ABILITY TO STAND**

☐ SWAYING ☐ UNABLE TO STAND ☐ CONTINUAL LEANING FOR BALANCE
☐ RIGID ☐ SAGGING KNEES ☐ FEET WIDE APART FOR BALANCE

(27) **SPEECH**

☐ SHOUTING ☐ SLOBBERING ☐ BOISTEROUS ☐ SLURRED ☐ WHINING ☐ STUTTERING
☐ RAMBLING ☐ INCOHERENT ☐ WHISPERING ☐ HOARSE ☐ CRYING ☐ ACCENT ☐ SLOW

(28) **DEMEANOR**

☐ FIGHTING ☐ INDIFFERENT ☐ ANTAGONISTIC ☐ POLITE ☐ SLEEPY
☐ EXCITED ☐ HILARIOUS ☐ COOPERATIVE ☐ CALM ☐ CRYING

(29) **ACTIONS**

☐ PUNCHING ☐ RESISTING ☐ THUMBING NOSE ☐ DIFFICULT TO AWAKEN
☐ KICKING ☐ PROFANITY ☐ THREATENING

(30) **EYES**

☐ BLOODSHOT ☐ WATERY ☐ DROOPY LIDS ☐ WEARING GLASSES ☐ NOT WEARING GLASSES
☐ GLASS EYE? ☐ RIGHT ☐ LEFT

(31) **CLOTHING**

☐ MUSSED ☐ PARTLY DRESSED ☐ DEFECATED IN SAME
☐ DIRTY ☐ VOMITED ON ☐ URINATED IN SAME

(32) **MOVEMENT OF HANDS**

☐ FUMBLING ☐ SLOW

(33) **FACE**

☐ FLUSHED ☐ PALE

(34) **ODOR OF ALCOHOLIC BEVERAGE ON BREATH**

☐ NONE ☑ YES

(35) **REMARKS:** (If needed, to clarify observations)