## PEACE OFFICER'S SWORN REPORT COMMERCIAL MOTOR VEHICLES

	TE OF TEXAS JNTY OF						
My name is			, and I am a Texas Peace Officer. I certify that the following information is				
true	and correct: I had probable cause	to believe and do believe tha	at				
				Subject's Name			
	driving or in actual physical control of		e in a public place i	n this state while having a	a measurable o	r detectable amount	
	cohol in his/her system. Facts in su						
Ш	A. Contained in report(s) incorpora	ated by reference for all purp	oses as if written a	and copied herein.			
	Specify report(s) or document(			No. of pages			
OR							
	B. Noted in the following:						
I.	On or about Date and Time of Of	, a	Complete Descrip	otion of Commercial Motor	Vohiolo		
	Date and Time of Or	101130	·				
	was observed by	in	in the following public place Location (addre				
	O	bserver		Location (add	lress, including o	city and county)	
		and $\Box$	was $\square$ was not	transporting hazardous r	material require	ed to be placarded.	
II.	Reason for stopping commercial m	notor vehicle:		-		•	
III.	The driver was identified to me as					202	
IV.	Probable cause for arrest or deten	Name		Driver Licen	se No.	DOB	
	a. Signs of intoxication or consumption of alcohol:						
	a. Signs of intoxication of consum	ption of alcohol.					
	<ul> <li>b. Sobriety tasks requested, if any I □ am □ am not certified to</li> </ul>			including $\square$ not including	ng horizontal g	aze nystagmus	
.,	continuation page(s) incorporated by reference for all purposes as if written and copied herein.						
v.	Check one:  Subject provided specimen - Ir						
	Subject refused test	itoxiiyzei resuits.					
	☐ Subject provided blood or urine		EOD DEDARTA	MENT LISE OF	AII V		
The statutory warning given to the person is set out in detail				FOR DEPARTMENT USE ONLY			
	statutory warning given to the pe ne document DIC-55 which is inco						
	all purposes as if written and cop						
	an purposes us it written und sop	iod norom.					
Offic	er's Signature						
Duind	and Names						
PIIII	ed Name						
Age	псу						
Му	name is First	Middle	Last	My date of birth is			
	FIISt	ivildule	Lasi				
My agency address isStreet		·*************************************	02-	,		, and U.S. of A.	
I do	S clare under penalty of perjury that th		City	State	Zip Code		
Exe	cuted in	County, State of Tex	xas on the	day of	Month,		
					Month	Year	

Declarant