



# INCIDENT REPORT (CONT.)

Offense Indicator 1. #1 2. #2	3. Both	1	Subject Code S-Suspect D-Defendant	V-Victim (Missing Person)	Code #	Subj. Type	Name (Last)	(First)	(Middle)	Race	Sex	Ethnicity
					D	1	3	LECLERC		STEPHANIE		MICHELL
Date of Birth			Age	To Age	Height	To Height	Weight	To Weight	Eye Color	Hair Color	Maiden Name	
03-25-1976			37		5' 09"		138		BRO	BRO		
Nickname / Street Name					Place of Birth - City			County	State	Employer/Other/School		Occupation
					WASHINGTON DC			US	DC			
Last Known Address (Street, Apt. Number)							City	State	Zip	Address Type	Phone	Phone Type
123 W INDIANA							DELAND	FL		H		
Other Address (Street, Apt. Number)							City	State	Zip	Address Type	Phone	Phone Type
Driver's License State/Number					Social Security Number			Other ID Number		ID Type		
FL					XXXXXXXXXXXXXXX			XXX-XX-XXXX				
Clothing (Describe)					Scars/Marks/Tattoos (Type/Describe)			Scars/Marks/Tattoos (Type/Describe)				
Hair Length /Style		Skin		Build		Facial Features		Speech/Voice		Deformity		Glasses
If Subject:		Demeanor		Mask		Weapon Type		If Arrested:		Subject Was Already in Custody?		Warrant From:
										1. Yes 2. No		1. This Agency 2. Other Agency
Date of Last Contact		Date of Emancipation		Caution		Caution Reason		Personal Habits (Drugs / Alcohol)				
May Be With:		Physical Condition:			Mental Condition:			Doctor Name:		Dentist Name:		
Incident Type		6. Disaster		Foul Play Suspected?		Missing Before?		Fingerprints Available?		Photo Available?		Dental Record Available?
1. Runaway		Victim		1. Yes		1. Yes		1. Yes		1. Yes		1. Yes
2. Parents		Adult		2. No		2. No		2. No		2. No		2. No
3. Involuntary		8. Unknown		8. Unknown		8. Unknown		8. Unknown		8. Unknown		8. Unknown
4. Disabled												
5. Endangered												
I, _____ (Printed) _____ (Signature) certify that I have reported the above person as a missing person; and this agency has my permission to enter this person in a statewide alert.												

Offense Indicator 1. #1 2. #2	3. Both		Subject Code S-Suspect D-Defendant	V-Victim (Missing Person)	Code #	Subj. Type	Name (Last)	(First)	(Middle)	Race	Sex	Ethnicity
Date of Birth			Age	To Age	Height	To Height	Weight	To Weight	Eye Color	Hair Color	Maiden Name	
Nickname / Street Name					Place of Birth - City			County	State	Employer/Other/School		Occupation
Last Known Address (Street, Apt. Number)							City	State	Zip	Address Type	Phone	Phone Type
Other Address (Street, Apt. Number)							City	State	Zip	Address Type	Phone	Phone Type
Driver's License State/Number					Social Security Number			Other ID Number		ID Type		
Clothing (Describe)					Scars/Marks/Tattoos (Type/Describe)			Scars/Marks/Tattoos (Type/Describe)				
Hair Length /Style		Skin		Build		Facial Features		Speech/Voice		Deformity		Glasses
If Subject:		Demeanor		Mask		Weapon Type		If Arrested:		Subject Was Already in Custody?		Warrant From:
										1. Yes 2. No		1. This Agency 2. Other Agency
Date of Last Contact		Date of Emancipation		Caution		Caution Reason		Personal Habits (Drugs / Alcohol)				
May Be With:		Physical Condition:			Mental Condition:			Doctor Name:		Dentist Name:		
Incident Type		6. Disaster		Foul Play Suspected?		Missing Before?		Fingerprints Available?		Photo Available?		Dental Record Available?
1. Runaway		Victim		1. Yes		1. Yes		1. Yes		1. Yes		1. Yes
2. Parents		Adult		2. No		2. No		2. No		2. No		2. No
3. Involuntary		8. Unknown		8. Unknown		8. Unknown		8. Unknown		8. Unknown		8. Unknown
4. Disabled												
5. Endangered												
I, _____ (Printed) _____ (Signature) certify that I have reported the above person as a missing person; and this agency has my permission to enter this person in a statewide alert.												

1 ON THE ABOVE DATE AND TIME DEPUTIES WERE ADVISED OF A RECKLESS VCSO VEHICLE N/B ON SR 415 SOUTH OF SR 44. THE  
 2 VEHICLE WAS REPORTED BY WITNESSES TO BE DRIVING ALL OVER THE ROAD AND INTO THE ONCOMING TRAFFIC LANE. THE  
 3 VEHICLE A WHITE CHEVY IMPALA TAG 47364 MADE A TURN ONTO E/B SR 44 FROM SR 415. THE VEHICLE CONTINUED TO FAIL TO  
 4 MAINTAIN A SINGLE LANE. THE WITNESS ADVISED HE HAD A VIDEO OF THE DRIVING PATTERN. THE WITNESS ADVISED THE  
 5 VEHICLE WAS NOW N/B ON AIRPORT RD. WHILE ON AIRPORT RD SOUTH OF PIONEER TR, DEPUTIES LOCATED THE VEHICLE.  
 6 DEPUTY HIGGINS OBSERVED THE VEHICLE FAIL TO MAINTAIN A LANE AND BE ALL OVER THE ROADWAY. DEPUTIES FOLLOWED THE  
 7 VEHICLE TO 3526 DISERA WAY NSB, WHERE THE VEHICLE STOPPED. DEPUTIES MADE CONTACT WITH THE DRIVER D-1 LECLERC.  
 8 DEPUTIES ADVISED THE DRIVER APPEARED TO BE IMPAIRED. AT THIS POINT SGT PECK WAS REQUESTED TO RESPOND TO THE  
 9 SCENE TO COMPLETE A DUI INVESTIGATION, AS SGT PECK WAS WORKING SPECIAL EVENTS DUI ENFORCEMENT.  
 10

Final Case Status:	Final Case Status Codes: 1.Arrest/Adult 2.Arrest/Juv. 3.Exceptional/Adult 4.Exceptional/Juv. 5.Closed 6.Unfounded	<input type="checkbox"/> Victim Advocate	<input type="checkbox"/> Triad	<input type="checkbox"/> SA Referral
<input type="checkbox"/> DCF Hotline	Date:	Time:	<input type="checkbox"/> FCIC / NCIC Entry	<input type="checkbox"/> T.T. BOLO
<input type="checkbox"/> CAC	Spoke With:		<input type="checkbox"/> FCIC / NCIC Cancel	Date:
Connecting Report Number		Agency	Additional Forms Attached: <input type="checkbox"/> Narrative <input checked="" type="checkbox"/> SA 707 <input type="checkbox"/> Persons <input type="checkbox"/> Property <input type="checkbox"/> Veh./Tow Sheet <input type="checkbox"/> Other Describe: <u>DUI PAPERWORK</u>	
Officer Reporting - Printed		Officer Reporting - Signature		ID. Number
Peck, Keith		<i>Sgt. K Peck</i>		2358
Officer Reviewing - Printed (If Applicable)		Officer Reviewing - Signature (If Applicable)		Unit
				1BAT2
				Date
				10-19-2013

# VOLUSIA COUNTY SHERIFF'S OFFICE

## NARRATIVE / SUPPLEMENT

EVENT	Report Date 10-19-2013	Report Time 1933	Orig. Reported Date 10-19-2013	Nature of Call (for Incident) 1	Agency Report Number 130029151	1.Original	2.Supplement	1
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NARRATIVE / CONTINUATION

11 UPON ARRIVAL CONTACT WAS MADE WITH THE DRIVER D-1 LECLERC , WHO WAS SETTING IN THE VEHICLE. SGT PECK  
 12 CONTACTED THE DEF AND ADVISED HER THAT HE WAS CONDUCTING A DUI INVESTIGATION AND SHE ADVISED SHE UNDERSTOOD.  
 13 SGT PECK REQUESTED D-1 COMPLETE FIELD SOBRIETY , TO WHICH SHE AGREED.  
 14  
 15 ALL EXERCISES WERE EXPLAINED AND DEMONSTRATED BY SGT PECK WITH SGT MACDONALD AS A WITNESS  
 16  
 17 FIRST WAS THE HGN. D-1 WAS OBSERVED TO HAVE LACK OF SMOOTH PURSUIT IN BOTH EYES. SHE WAS THEN OBSERVED TO  
 18 HAVE HGN ONSET PRIOR TO 45 DEGREES . D-1 WAS OBSERVED TO HAVE HGN AT MAXIMUM DEVIATION.  
 19  
 20 SECOND WAS THE WALK AND TURN. THE DEF COULD NOT STAND IN THE STARTING POSITION . SHE FELL TO THE RIGHT 4 TIME  
 21 THEN TO THE LEFT 4 TIMES LOOSING HER BALANCE IN THE STARTING POSITION. ON THE WALK, NONE OF THE STEPS WERE HEEL  
 22 TO TOE. ON STEPS 2,3,7 SHE STUMBLED AND ALMOST FELL. SHE WAS UNSTEADY WALKING. AT THE END OF THE 9 TH STEP SHE  
 23 STOPPED AND ASKED SGT PECK "NOW WHAT" SGT PECK AGAIN EXPLAINED THE EXERCISE TO THE DEF. SHE TURNED  
 24 IMPROPERLY AND BEGAN TO WALK . AS SHE WALKED SHE WAS UNSTEADY ON STEPS 3,6,7 SHE STUMBLED AND ALMOST FELL.  
 25  
 26 THE NEXT EXERCISE WAS THE ONE LEG STAND. THE DEF WAS UNSTEADY STANDING AND SWAYING. ON 0004 SHE BEGAN TO HOP.  
 27 ON THE FOLLOWING NUMBERS SHE PUT HER FOOT DOWN, 7,11,12,14,18,22,23,27 AND 0029.  
 28  
 29 AT THIS POINT D-1 WAS PLACED IN CUSTODY FOR DUI.  
 30  
 31 SGT PECK REQUESTED THE DEF SUBMIT TO A BREATH TEST AT 2011. THE DEF REFUSED. AT 2020 SGT PECK READ THE DEF THE  
 32 COMPLETE IMPLIED CONSENT WARNINGS. AGAIN SHE REFUSED.  
 33  
 34 D-1 WAS TAKEN TO VCISO DIST 5 FOR PROCESSING. THE ON DUTY COMMANDER WAS NOTIFIED.

ADMINISTRATIVE	Final Case Status:	Final Case Status Codes: 1.Arrest/Adult 2.Arrest/Juv. 3.Exceptional/Adult 4.Exceptional/Juv. 5.Closed 6.Unfounded	<input type="checkbox"/> Victim Advocate	<input type="checkbox"/> Triad	<input type="checkbox"/> SA Referral
<input type="checkbox"/> DCF Hotline	Date:	Time:	<input type="checkbox"/> FCIC / NCIC Entry	<input type="checkbox"/> T.T. BOLO	Date:
<input type="checkbox"/> CAC	Spoke With:		<input type="checkbox"/> FCIC / NCIC Cancel		By:
Connecting Report Number	Agency	Additional Forms Attached: <input type="checkbox"/> Narrative <input checked="" type="checkbox"/> SA 707 <input type="checkbox"/> Persons <input type="checkbox"/> Property <input type="checkbox"/> Veh./Tow Sheet <input type="checkbox"/> Other Describe: <u>DUI PAPERWORK</u>			
Officer Reporting - Printed	Officer Reporting - Signature <i>Sgt. K Peck</i>		ID. Number	Unit	Date
Peck, Keith			2358	1BAT2	10-19-2013
Officer Reviewing - Printed (If Applicable)	Officer Reviewing - Signature (If Applicable)		ID. Number	Unit	Date

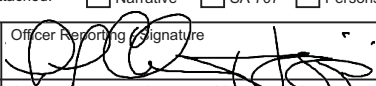
# VOLUSIA COUNTY SHERIFF'S OFFICE

## NARRATIVE / SUPPLEMENT

<b>EVENT</b>	Report Date 10-19-2013	Report Time 1919	Orig. Reported Date	Nature of Call (for Incident) <b>1</b>	Agency Report Number 130029151	1.Original 2.Supplement   <b>2</b>
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NARRATIVE / CONTINUATION

1 On the above date and time D/S Higgins was working Biketoberfest in the area of the Cabbage Patch. At approx. 1919 hrs Central put out a bolo  
 2 to the south end units for a suspicious vehicle in the area of SR 44 and Airport Rd. The vehicle was a marked VCSO unit. A citizen was traveling  
 3 behind the marked unit, talking to Central via a cell phone. Central stated the marked unit turned into Venetian Bay from Sr 44 onto Airport Rd. D/S  
 4 Higgins was on Pioneer Tr. at Airport Rd. D/S Higgins was traveling south bound on Airport Rd when a marked unit made a u-turn at Airport Rd  
 5 and Maribella Dr. There was a orange colored Chevrolet right behind the marked unit. D/S Higgins was able to see past the orange Chevrolet and  
 6 noticed that the marked unit was weaving from curb to center median on Airport Rd. D/S Higgins activated the emergence blue lights on his VCSO  
 7 marked motorcycle and passed the orange Chevrolet. D/S Higgins rode right up behind the marked unit with blue light still on. D/S Higgins hit the  
 8 siren once to attempt to get the drivers attention. The marked unit continued traveling s/b on Airport Rd. The unit made a left turn onto Marisol Dr.  
 9 The marked unit was traveling approx. 10 mph. The Marked unit was swerving from curb to curb. D/S Higgins again hit the siren to stop the unit.  
 10 The marked unit then turned right onto Disera Way. The marked unit continued to swerve from curb to curb. The marked unit made a right turn into  
 11 the driveway of 3526 Disera Way. D/S Higgins got off his motorcycle before the driver open the driver's door. D/S Higgins approached the driver's  
 12 door in a tactical manner. D/S Higgins was at the drive's side rear door when the driver's door begin to open. D/S Higgins grabbed the door and  
 13 swung it completely open. D/S Higgins looked into the vehicle and recognized the driver as D/S Stephanie LeClerc. D/S Higgins looked passed  
 14 LeClerc and saw that where was a small child in the passage seat. D/S Higgins called to D/S Ramos to come to the drivers side of the vehicle. D/S  
 15 Higgins told D/S Ramos to stay with LeClerc and keep her seated in the vehicle. D/S Higgins immediately contacted Sgt MacDonald and advised  
 16 him of the situation. D/S Higgins did not have any further contact with LeClerc.

<b>ADMINISTRATIVE</b>	Final Case Status:	Final Case Status Codes: 1.Arrest/Adult 2.Arrest/Juv. 3.Exceptional/Adult 4.Exceptional/Juv. 5.Closed 6.Unfounded	<input type="checkbox"/> Victim Advocate	<input type="checkbox"/> Triad	<input type="checkbox"/> SA Referral
<input type="checkbox"/> DCF Hotline	Date:	Time:	<input type="checkbox"/> FCIC / NCIC Entry	<input type="checkbox"/> T.T. BOLO	Date:
<input type="checkbox"/> CAC	Spoke With:		<input type="checkbox"/> FCIC / NCIC Cancel		By:
Connecting Report Number	Agency	Additional Forms Attached: <input type="checkbox"/> Narrative <input type="checkbox"/> SA 707 <input type="checkbox"/> Persons <input type="checkbox"/> Property <input type="checkbox"/> Veh./Tow Sheet <input type="checkbox"/> Other Describe: _____			
Officer Reporting - Printed <b>Higgins, Christopher</b>	Officer Reporting - Signature 		ID. Number <b>1375</b>	Unit <b>1m11</b>	Date <b>10-19-2013</b>
Officer Reviewing - Printed (If Applicable)	Officer Reviewing - Signature (If Applicable)		ID. Number	Unit	Date

# VOLUSIA COUNTY SHERIFF'S OFFICE

## NARRATIVE / SUPPLEMENT

<b>EVNT</b>	Report Date 10-19-2013	Report Time 2200	Orig. Reported Date 10-19-2013	Nature of Call (for Incident) 1	Agency Report Number 130029151	1.Original	2.Supplement	2
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1 On 10-19-2013 at approximately 1932 hours Deputy Ramos responded to a call of a reckless driver reference a Volusia County patrol vehicle

2 in the area of the Venetian Bay sub division in New Smyrna Beach. Upon arrival in the area of North Airport Road and Marisol Drive Deputy

3 Ramos observed a Volusia County Sheriff's Office marked patrol unit make a u turn in the middle of an intersection, North Airport Road and

4 Marisol Drive and travel east bound on Marisol Drive at a slow speed. Deputy Ramos activated his blue lights and followed the vehicle east bound

5 on Marisol, then south bound on Diseria Way. The vehicle then proceeded into the driveway of 3526 Diseria Way where it parked. Deputy Ramos

6 approached the vehicle tactically on the passenger side and observed Deputy Higgins recognized the driver as Stephanie. Deputy Ramos

7 approached the drivers side and observed the driver to be Stephanie Le Clerc, a Volusia County Deputy Sheriff. Deputy Ramos stayed with Le

8 Clerc while Deputy Higgins walked away to call Sgt. Macdonald. Deputy Ramos stayed with Le Clerc who remained seated in the drivers seat until

9 other VCSO units arrived on scene to assist with the call. Deputy Ramos observed a female juvenile sitting in the front passengers seat. Deputy

10 Ramos asked Le Clerc who the child was and she stated XXXXXXXXXXXXXXX. An adult female came out of the 3526 Diseria Way and advised

11 Deputy Ramos she was Le Clerc's sister. Deputy Ramos asked her if she would take XXX into the residence which she did. Deputy Ramos stayed

12 with Le Clerc until he was relieved by Sgt. Piser.

NARRATIVE / CONTINUATION

<b>ADMINISTRATIVE</b>	Final Case Status:	Final Case Status Codes: 1.Arrest/Adult 2.Arrest/Juv. 3.Exceptional/Adult 4.Exceptional/Juv. 5.Closed 6.Unfounded	<input type="checkbox"/> Victim Advocate	<input type="checkbox"/> Triad	<input type="checkbox"/> SA Referral
<input type="checkbox"/> DCF Hotline	Date:	Time:	<input type="checkbox"/> FCIC / NCIC Entry	<input type="checkbox"/> T.T. BOLO	Date:
<input type="checkbox"/> CAC	Spoke With:		<input type="checkbox"/> FCIC / NCIC Cancel		By:
Connecting Report Number	Agency	Additional Forms Attached: <input type="checkbox"/> Narrative <input type="checkbox"/> SA 707 <input type="checkbox"/> Persons <input type="checkbox"/> Property <input type="checkbox"/> Veh./Tow Sheet <input type="checkbox"/> Other Describe: _____			
Officer Reporting - Printed	Officer Reporting - Signature		ID. Number	Unit	Date
Ramos, Jose			2441	1M17	10-19-2013
Officer Reviewing - Printed (If Applicable)	Officer Reviewing - Signature (If Applicable)		ID. Number	Unit	Date


# VOLUSIA COUNTY SHERIFF'S OFFICE

## NARRATIVE / SUPPLEMENT

<b>EVENT</b>	Report Date 10-19-2013	Report Time 1919	Orig. Reported Date 10-19-2013	Nature of Call (for Incident) <b>1</b>	Agency Report Number 130029151	1.Original	2.Supplement
							<b>2</b>

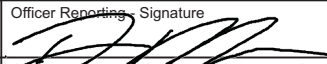
NARRATIVE / CONTINUATION

1 On Saturday, 10/19/2013, Sergeant MacDonald was advised that a Volusia County Sheriff's Office patrol vehicle was driving erratically north on  
 2 SR 415 and being followed and video taped by Luise Salvatore (W1). During the course of the phone conversation with Central Dispatch,  
 3 Salvatore provided a VCISO car number 174166 and tag number 47364.  
 4  
 5 Sergeant MacDonald checked RMS and determined that the VCISO car was assigned to Deputy Stephanie LeClerc (D1). Based on the information  
 6 provided by Salvatore, Sergeant MacDonald advised Central dispatch to give out a BOLO to the Biketoberfest event units that were in the area.  
 7 Deputies Chris Higgins and Jose Ramos first observed the VCISO patrol vehicle in question. After following the vehicle to 3526 Disera Way, New  
 8 Smyrna Beach, Deputy Higgins approached the vehicle and identified LeClerc suspecting possible impairment (see Deputy Higgins and Ramos  
 9 supplements for additional information).  
 10  
 11 Sergeant MacDonald arrived on scene and contacted Sergeant's Cory Piser and Keith Peck. Sergeant MacDonald contacted LeClerc and  
 12 requested she exit the vehicle. LeClerc was very unsteady as she got out of the vehicle and had trouble maintaining balance. Sergeant Peck  
 13 administered and Sergeant MacDonald witnessed the Field Sobriety Exercises. Sergeant MacDonald observed the following:  
 14  
 15 **Walk and turn**  
 16 LeClerc was instructed on how to proceed with the exercise by Sergeant Peck.  
 17 LeClerc lost balance during the instruction phase Eight times, stopped walking six times, did not touch heel to toe on any of the steps, stepped off  
 18 the line six times and used arms for balance and turned.  
 19  
 20 **One Leg Stand**  
 21 LeClerc was instructed on how to proceed with the exercise by Sergeant Peck.  
 22 LeClerc was swaying while balancing, used her arms for balance, put her foot down nine times at the following numbers  
 23 7,11,12,14,18,22,23,27,29.  
 24  
 25 LeClerc was placed under lawful arrest for DUI and transported to District five for DUI processing. LeClerc refused to submit to a breath test.  
 26  
 27 Sergeant MacDonald contacted Lieutenant Quigley (Watch Commander), Captain Dietrich, Captain Mandizha. Sergeant MacDonald advised  
 28 LeClerc that she was on administrative suspension and the administration would contact her on Monday, 10/21/2013.  
 29  
 30 A copy of the video provided by Salvatore was submitted to evidence as well as Internal Affairs.  
 31  
 32 Sergeant MacDonald had no further involvement in this investigation.  
 33  
 34 **Case Status:**  
 35 Closed  
 36

<b>ADMINISTRATIVE</b>	Final Case Status: <u>5</u>	Final Case Status Codes: 1.Arrest/Adult 2.Arrest/Juv. 3.Exceptional/Adult 4.Exceptional/Juv. 5.Closed 6.Unfounded	<input type="checkbox"/> Victim Advocate	<input type="checkbox"/> Triad	<input type="checkbox"/> SA Referral
<input type="checkbox"/> DCF Hotline	Date:	Time:	<input type="checkbox"/> FCIC / NCIC Entry	<input type="checkbox"/> T.T. BOLO	Date:
<input type="checkbox"/> CAC	Spoke With:		<input type="checkbox"/> FCIC / NCIC Cancel		By:
Connecting Report Number	Agency	Additional Forms Attached: <input type="checkbox"/> Narrative <input type="checkbox"/> SA 707 <input type="checkbox"/> Persons <input type="checkbox"/> Property <input type="checkbox"/> Veh./Tow Sheet <input type="checkbox"/> Other Describe: _____			
Officer Reporting - Printed <b>Macdonald, David</b>	Officer Reporting - Signature 		ID. Number <b>2439</b>	Unit <b>1R200</b>	Date <b>10-19-2013</b>
Officer Reviewing - Printed (If Applicable)	Officer Reviewing - Signature (If Applicable)		ID. Number	Unit	Date

# VOLUSIA COUNTY SHERIFF'S OFFICE

## ADDITIONAL PERSONS REPORT

<b>EVENT</b>	Report Date	Report Time	Orig. Reported Date	Nature of Call (for Incident)				Agency Report Number		1. Original	2. Supplement	
	10-19-2013	1919	10-19-2013	1 <b>Drunk Driver</b>				130029151			2	
<b>CODES</b>	V/W Code	Victim/Subject Type		Address/Phone Type			Race	Sex	Residence Type		Residence Status	
	V-Victim W-Witness R-Reporting Person	N-Next of Kin O-Other	0. N/A 1. Juvenile 2. L.E. Officer 3. Adult	4. Business 5. Government 6. Church 9. Other	B. Business/Work C. Cell H. Home	M. Message N. Next of Kin O. Other	P. Pager S. School V. Vacation	N-N/A W-White B-Black	I-American Indian O-Oriental/Asian U-Unknown	M-Male F-Female U-Unknown	0. N/A 1. City 2. County	3. Florida 4. Out-of-State Z-Other
<b>VICTIM/WITNESS</b>	Means of Attack		Extent of Injury		Nature of Call (for Victim, if Different from Incident)			Domestic Violence		Victim Relationship to Offender		
	F-Firearm K-Knife/Cutting Inst.	O-Other Dangerous H-Hands, Fists, Feet, Etc.	00. N/A 01. Gunshot 02. Stabbed	03. Laceration 04. Unconscious 05. Poss. Broken Bones	06. Poss. Internal Injury 07. Loss of Teeth 08. Burns	09. Abrasions/Bruises 10. No Visible Injury 99. Other Serious Injury	1. Yes 2. No	S-Spouse P-Parent C-Child	B-Sibling O-Other Family H-Co-Habitant			
<b>VICTIM/WITNESS</b>	Offense Indicator	V/W Code	#	V. Type	Name (Last/Business)			Name (First) (Middle)				
	1. #1 2. #2	1 W	1	3	Salvatore			Luise				
<b>VICTIM/WITNESS</b>	Address (Street, Apt. Number)		City		State	Zip	Residence Phone					
	2729 Brierdale Dr.		DELTONA		FL	32725	(386) 882-1241					
<b>VICTIM/WITNESS</b>	Address (Street, Apt. Number)		City		State	Zip	Address Type	Other Phone		Phone Type		
	XXXXXXX		Sanford		FL	32725	B					
<b>VICTIM/WITNESS</b>	Address (Street, Apt. Number)		City		State	Zip	Residence Phone					
	Seminole County Fire Department		Sanford		FL	32725	(386) XXX-XXXX					
<b>VICTIM/WITNESS</b>	Address (Street, Apt. Number)		City		State	Zip	Residence Phone					
	XXXXXXX		Sanford		FL	32725	(386) XXX-XXXX					
<b>VICTIM/WITNESS</b>	Address (Street, Apt. Number)		City		State	Zip	Residence Phone					
	XXXXXXX		Sanford		FL	32725	(386) XXX-XXXX					
<b>VICTIM/WITNESS</b>	Address (Street, Apt. Number)		City		State	Zip	Residence Phone					
	XXXXXXX		Sanford		FL	32725	(386) XXX-XXXX					
<b>SUBJECT / MISSING SECTION</b>	Offense Indicator	Subject Code	V-Victim	Code #	Subj. Type	Name (Last)		Name (First)		Race	Sex	Ethnicity
	1. #1 2. #2	S-Suspect D-Defendant	(Missing Person)	D 1	3	LeClerc		Stephanie		Michelle	W	F
<b>SUBJECT / MISSING SECTION</b>	Date of Birth	Age	To Age	Height	To Height	Weight	To Weight	Eye Color	Hair Color	Maiden Name		
	03-25-1976	37		5' 09"		140		BRO	BLN			
<b>SUBJECT / MISSING SECTION</b>	Nickname / Street Name		Place of Birth - City		County	State	Employer / School		Occupation			
	Washington DC		DC		DC	DC	Volusia County Sheriff's Offi		Deputy			
<b>SUBJECT / MISSING SECTION</b>	Last Known Address (Street, Apt. Number)		City		State	Zip	Address Type	Phone	Phone Type			
	123 W. Indiana Av.		DELAND		FL	32720	B	(386) 248-1777	B			
<b>SUBJECT / MISSING SECTION</b>	Other Address (Street, Apt. Number)		City		State	Zip	Address Type	Phone	Phone Type			
	XXXXXXX		XXXXXXX		XXXXXXX	XXXXXXX	XXXXXXX	XXXXXXX	XXXXXXX			
<b>SUBJECT / MISSING SECTION</b>	Driver's License State/Number		Social Security Number			Other ID Number			ID Type			
	FL XXXXXXXXXXXXX		XXX-XX-XXXX									
<b>SUBJECT / MISSING SECTION</b>	Clothing (Describe)		Scars/Marks/Tattoos (Type/Describe)			Scars/Marks/Tattoos (Type/Describe)						
	/ / /		/ / /			/ / /						
<b>SUBJECT / MISSING SECTION</b>	Hair Length / Style		Skin Color	Build	Facial Features		Speech / Voice	Deformity	Glasses			
	/ / /		/	/	/ / /		/	/	/ / /			
<b>SUBJECT / MISSING SECTION</b>	If Subject:		Demeanor	Mask	Weapon Type		If Arrested:		Subject Was Already in Custody?		Warrant From:	
	/		/	/	/ / /		/ / /		1. Yes 2. No 2		1. This Agency 2. Other Agency	
<b>SUBJECT / MISSING SECTION</b>	Date of Last Contact		Date of Emancipation		Caution	Caution Reason		Personal Habits (Drugs / Alcohol)				
<b>SUBJECT / MISSING SECTION</b>	May Be With:		Physical Condition:		Mental Condition:		Doctor Name:		Dentist Name:			
<b>SUBJECT / MISSING SECTION</b>	Incident Type		Foul Play Suspected?		Missing Before?		Fingerprints Available?		Photo Available?		Dental Record Available?	
	1. Runaway 2. Parents 3. Involuntary 4. Disabled 5. Endangered		6. Disaster Victim 7. Voluntary Adult 8. Unknown		1. Yes 2. No 8. Unknown		1. Yes 2. No 8. Unknown		1. Yes 2. No		1. Yes 2. No	
<b>SUBJECT / MISSING SECTION</b>	I, _____ (Printed) _____ (Signature) certify that I have reported the above person as a missing person; and this agency has my permission to enter this person in a statewide alert.											
<b>ADMIN.</b>	Officer Reporting - Printed		Officer Reporting - Signature				ID. Number	Unit	Date			
	Macdonald, David						2439	1R200	10-19-2013			
<b>ADMIN.</b>	Officer Reviewing - Printed (If Applicable)		Officer Reviewing - Signature (If Applicable)				ID. Number	Unit	Date			

**7th. Judicial Circuit 707  
Charging Affidavit - Volusia**

Arrest # \_\_\_\_\_ Bk # \_\_\_\_\_ Pg # 1 of 3

ARREST <input checked="" type="checkbox"/>	NOTICE TO APPEAR <input type="checkbox"/>	AFFIDAVIT <input type="checkbox"/>	C.C. <input type="checkbox"/>	ADULT <input checked="" type="checkbox"/>	JUVENILE <input type="checkbox"/>	Court Case Number:
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(ORI) FL: <u>FL0640000</u>	Agency Name: <u>VOLUSIA COUNTY SHERIFF'S OFFICE</u>	Agency Case Number: <u>130029151</u>
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FCIC/NCIC Check? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	OBTS #	U.C.R.:	Date Arrested: <u>10-19-2013</u>	Time of Arrest: <u>2011</u>
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ADDRESS OF ARREST (Street, City, State, Zip): <u>AIRPORT RD S OF PIONEER TR NEW SMYRNA FL 32168</u>	Arrested By: <u>Peck,Keith</u>	ID Number: <u>2358</u>
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<b>DEFENDANT</b>	NAME (Last) <u>LECLERC</u> (First) <u>STEPHANIE</u> (Middle) <u>MICHELL</u>	A.K.A.:	Sex: <u>F</u>	Race: <u>W</u>
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DOB: <u>03-25-1976</u>	Age: <u>37</u>	Driver's Lic./ID No.: <u>XXXXXXXXXXXXXX</u>	State: <u>FL</u>	Year Expires: <u>2014</u>	S.S.# - <u>XXX-XX-XXXX</u>
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Height: <u>5' 09</u>	Weight: <u>138</u>	Hair: <u>BRO</u>	Eyes: <u>BRO</u>	P.O.B. (City, State, Country): <u>WASHINGTON DC DC US</u>	Statement: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
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Scars, Marks, Tattoos:	Business & Occupation:	Citizenship: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
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Probation: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Sexual Predator: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	English: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Deaf/Mute: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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Address - Mailing/Permanent <u>123 W INDIANA</u>	(STREET, APT. NUMBER)	(CITY) <u>DELAND</u>	(STATE) <u>FL</u>	ZIP CODE	RESIDENCE PHONE
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Address - Local	(STREET, APT. NUMBER)	(CITY)	(STATE)	ZIP CODE	RESIDENCE PHONE
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Address - Other (Employer/School)	(STREET, APT. NUMBER)	(CITY)	(STATE)	ZIP CODE	BUS/SCHOOL PHONE
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<b>CHARGES</b>	DOMESTIC VIOLENCE? Yes <input type="checkbox"/>	Attachments: Affidavit(s)? <input type="checkbox"/>	Statement(s) <input type="checkbox"/>	NTA Schedule <input type="checkbox"/>	Report <input type="checkbox"/>	Traffic Infraction(s) <input type="checkbox"/>	DUI <input checked="" type="checkbox"/>	Total Charges: <u>1</u>
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#1	Charge: <u>DUI Alcohol or Drugs</u>	FEL <input type="checkbox"/> MISD <input checked="" type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD: <u>316.193</u>	Citation No.: <u>A0YY6JP</u>	Bond: <u>500</u>
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#2	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD:	Citation No.:	Bond:
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#3	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD:	Citation No.:	Bond:
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<b>CO-DEFENDANT</b>	Co-Def #1. Arrested? Y <input type="checkbox"/> N <input type="checkbox"/> Fel. <input type="checkbox"/> Misd. <input type="checkbox"/> Traf. <input type="checkbox"/> Ord. <input type="checkbox"/> NTA <input type="checkbox"/>	Co-Def #2. Arrested? Y <input type="checkbox"/> N <input type="checkbox"/> Fel. <input type="checkbox"/> Misd. <input type="checkbox"/> Traf. <input type="checkbox"/> Ord. <input type="checkbox"/> NTA <input type="checkbox"/>
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#1 NAME	(Last)	(First)	(Middle)	Race:	Sex:	DOB:	Age:
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#2 NAME	(Last)	(First)	(Middle)	Race:	Sex:	DOB:	Age:
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**NARRATIVE**

The undersigned certifies and swears that there is probable cause to believe the above-named defendant, on the 19 day of October, 2013, at approximately 0733  a.m.  p.m. at AIRPORT RD S OF PIONE NEW SMYRNA within Volusia County, violated the law and did then and there:

1 ON THE ABOVE DATE AND TIME DEPUTIES WERE ADVISED OF A RECKLESS VCSO VEHICLE N/B ON SR 415 SOUTH OF SR 44. THE  
 2 VEHICLE WAS REPORTED BY WITNESSES TO BE DRIVING ALL OVER THE ROAD AND INTO THE ONCOMING TRAFFIC LANE. THE  
 3 VEHICLE A WHITE CHEVY IMPALA TAG 47364 MADE A TURN ONTO E/B SR 44 FROM SR 415. THE VEHICLE CONTINUED TO FAIL TO  
 4 MAINTAIN A SINGLE LANE. THE WITNESS ADVISED HE HAD A VIDEO OF THE DRIVING PATTERN. THE WITNESS ADVISED THE VEHICLE  
 5 WAS NOW N/B ON AIRPORT RD. WHILE ON AIRPORT RD SOUTH OF PIONEER TR, DEPUTIES LOCATED THE VEHICLE. DEPUTY HIGGINS  
 6 OBSERVED THE VEHICLE FAIL TO MAINTAIN A LANE AND BE ALL OVER THE ROADWAY. DEPUTIES FOLLOWED THE VEHICLE TO 3526  
 7 DISERA WAY NSB, WHERE THE VEHICLE STOPPED. DEPUTIES MADE CONTACT WITH THE DRIVER D-1 LECLERC.  
 8 DEPUTIES ADVISED THE DRIVER APPEARED TO BE IMPAIRED. AT THIS POINT SGT PECK WAS REQUESTED TO RESPOND TO THE  
 9 SCENE TO COMPLETE A DUI INVESTIGATION, AS SGT PECK WAS WORKING SPECIAL EVENTS DUI ENFORCEMENT.  
 10 UPON ARRIVAL CONTACT WAS MADE WITH THE DRIVER D-1 LECLERC, WHO WAS SETTING IN THE VEHICLE. SGT PECK CONTACTED  
 11 THE DEF AND ADVISED HER THAT HE WAS CONDUCTING A DUI INVESTIGATION AND SHE ADVISED SHE UNDERSTOOD. SGT PECK  
 12 REQUESTED D-1 COMPLETE FIELD SOBRIETY, TO WHICH SHE AGREED.  
 13  
 14 ALL EXERCISES WERE EXPLAINED AND DEMONSTRATED BY SGT PECK WITH SGT MACDONALD AS A WITNESS  
 15

<b>NOTICE TO APPEAR</b>	MANDATORY APPEARANCE <input type="checkbox"/>	YOU NEED NOT APPEAR IN COURT BUT MUST COMPLY WITH INSTRUCTIONS ON THE REVERSE SIDE OF YOUR COPY <input type="checkbox"/>	FINE, AND COSTS AMOUNT:
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I AGREE TO APPEAR IN COURT HEREIN TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE INDICATED, I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED, OR PAY THE LISTED FINE, I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST WILL BE ISSUED.

SIGNATURE OF DEFENDANT	Date	SIGNATURE OF JUVENILE PARENT OR CUSTODIAN	JUVE DISP.
		RELATIONSHIP TO JUVENILE	CITATION No.

Sworn to and subscribed before me, the undersigned this <u>19</u> day of <u>October</u> , <u>2013</u> Name: <u>[Signature]</u>	I swear/affirm the above statements are correct and true <u>[Signature: Sgt. K Peck]</u> OFFICER'S/COMPLAINANT'S SIGNATURE	Rt Thumb		
Notary Public <input type="checkbox"/> Law Enforcement or Corrections Officer <input checked="" type="checkbox"/> Personally Known <input type="checkbox"/> Produced Identification <input type="checkbox"/> Type of Identification: _____	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;"><u>PECK, KEITH</u> NAME (PRINTED)</td> <td style="width:40%;"><u>2358</u> ID NUMBER</td> </tr> </table>	<u>PECK, KEITH</u> NAME (PRINTED)	<u>2358</u> ID NUMBER	
<u>PECK, KEITH</u> NAME (PRINTED)	<u>2358</u> ID NUMBER			



**Narrative Supplement 707-B**

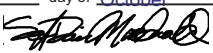
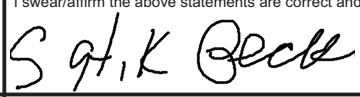
Arrest  
 Affidavit  
 Notice to Appear  
 Adult  
 Juvenile

**Court Case Number:**

Defendant Name: <b>LECLERC</b>	(Last)	(First)	(Middle)	Agency Case Number: <b>130029151</b>
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CHARGES	DOMESTIC VIOLENCE? Yes <input type="checkbox"/>	Attachments: Affidavit(s)? <input type="checkbox"/>	Statement(s) <input type="checkbox"/>	NTA Schedule <input type="checkbox"/>	Report <input type="checkbox"/>	Traffic Infraction(s) <input type="checkbox"/>	Total Charges: <b>1</b>
#	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD:	Citation No.:	Bond:		
#	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD:	Citation No.:	Bond:		
#	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD:	Citation No.:	Bond:		

16 FIRST WAS THE HGN. D-1 WAS OBSERVED TO HAVE LACK OF SMOOTH PURSUIT IN BOTH EYES. SHE WAS THEN OBSERVED TO HAVE  
 17 HGN ONSET PRIOR TO 45 DEGREES . D-1 WAS OBSERVED TO HAVE HGN AT MAXIMUM DEVIATION.  
 18  
 19 SECOND WAS THE WALK AND TURN. THE DEF COULD NOT STAND IN THE STARTING POSITION . SHE FELL TO THE RIGHT 4 TIME THEN  
 20 TO THE LEFT 4 TIMES LOOSING HER BALANCE IN THE STARTING POSITION. ON THE WALK, NONE OF THE STEPS WERE HEEL TO TOE.  
 21 ON STEPS 2,3,7 SHE STUMBLD AND ALMOST FELL. SHE WAS UNSTEADY WALKING. AT THE END OF THE 9 TH STEP SHE STOPPED  
 22 AND ASKED SGT PECK "NOW WHAT" SGT PECK AGAIN EXPLAINED THE EXERCISE TO THE DEF. SHE TURNED IMPROPERLY AND  
 23 BEGAN TO WALK . AS SHE WALKED SHE WAS UNSTEADY ON STEPS 3,6,7 SHE STUMBLD AND ALMOST FELL.  
 24  
 25 THE NEXT EXERCISE WAS THE ONE LEG STAND. THE DEF WAS UNSTEADY STANDING AND SWAYING. ON 0004 SHE BEGAN TO HOP.  
 26 ON THE FOLLOWING NUMBERS SHE PUT HER FOOT DOWN, 7,11,12,14,18,22,23,27 AND 0029.  
 27  
 28 AT THIS POINT D-1 WAS PLACED IN CUSTODY FOR DUI.  
 29  
 30 SGT PECK REQUESTED THE DEF SUBMIT TO A BREATH TEST AT 2011. THE DEF REFUSED. AT 2020 SGT PECK READ THE DEF THE  
 31 COMPLETE IMPLIED CONSENT WARNINGS. AGAIN SHE REFUSED.  
 32  
 33 D-1 WAS TAKEN TO VCSO DIST 5 FOR PROCESSING. THE ON DUTY COMMANDER WAS NOTIFIED.

Sworn to and subscribed before me, the undersigned this <u>19</u> day of <u>October</u> , 2013 Name: 	I swear/affirm the above statements are correct and true  OFFICER'S/COMPLAINANT'S SIGNATURE PECK, KEITH NAME (PRINTED)	Right Thumb
Notary Public <input type="checkbox"/> Law Enforcement Officer <input checked="" type="checkbox"/> Personally Known <input type="checkbox"/> Produced Identification <input type="checkbox"/> Type of Identification:	ID NUMBER 2358	

**7th. Judicial Circuit 707  
Charging Affidavit - Volusia**

Arrest # \_\_\_\_\_ Bk # \_\_\_\_\_ Pg # 1 of 3

ARREST <input type="checkbox"/>	NOTICE TO APPEAR <input type="checkbox"/>	AFFIDAVIT <input checked="" type="checkbox"/>	C.C. <input type="checkbox"/>	ADULT <input checked="" type="checkbox"/>	JUVENILE <input type="checkbox"/>	Court Case Number:	
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(ORI) FL: <u>FL0640000</u>	Agency Name: <u>VOLUSIA COUNTY SHERIFF'S OFFICE</u>	Agency Case Number: <u>130029151</u>
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FCIC/NCIC Check? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	OBTS #	U.C.R.:	Date Arrested:	Time of Arrest:
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ADDRESS OF ARREST (Street, City, State, Zip): \_\_\_\_\_

<b>DEFENDANT</b>	NAME (Last) <u>LECLERC</u>	(First) <u>STEPHANIE</u>	(Middle) <u>MICHELL</u>	A.K.A.:	Sex: <u>F</u>	Race: <u>W</u>
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DOB: <u>03-25-1976</u>	Age: <u>37</u>	Driver's Lic./ID No.: <u>XXXXXXXXXXXX</u>	State: <u>FL</u>	Year Expires: <u>2014</u>	S.S.# - <u>XXX-XX-XXXX</u>
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Height: <u>5' 09"</u>	Weight: <u>138</u>	Hair: <u>BRO</u>	Eyes: <u>BRO</u>	P.O.B. (City, State, Country): <u>Washington DC DC</u>	Statement: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
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Scars, Marks, Tattoos:	Business & Occupation: <u>Deputy Sheriff</u>	Citizenship: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
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Probation: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Sexual Predator: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	English: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Deaf/Mute: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
--	--	--	--

Address - Mailing/Permanent: <u>123 W INDIANA</u>	(STREET, APT. NUMBER)	(CITY) <u>DELAND</u>	(STATE) <u>FL</u>	ZIP CODE	RESIDENCE PHONE
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Address - Local	(STREET, APT. NUMBER)	(CITY)	(STATE)	ZIP CODE	RESIDENCE PHONE
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Address - Other (Employer/School)	(STREET, APT. NUMBER)	(CITY)	(STATE)	ZIP CODE	BUS/SCHOOL PHONE
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<b>CHARGES</b>	DOMESTIC VIOLENCE? Yes <input type="checkbox"/>	Attachments: Affidavit(s)? <input type="checkbox"/>	Statement(s) <input checked="" type="checkbox"/>	NTA Schedule <input type="checkbox"/>	Report <input checked="" type="checkbox"/>	Traffic Infraction(s) <input type="checkbox"/>	DUI <input type="checkbox"/>	Total Charges: <u>1</u>
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#1	Charge: <u>Child Neglect w/o Great Harm</u>	FEL <input checked="" type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD: <u>827.03(3)(C)</u>	Citation No.:	Bond:
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#2	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD:	Citation No.:	Bond:
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#3	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD:	Citation No.:	Bond:
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<b>CO-DEFENDANT</b>	Co-Def #1. Arrested? Y <input type="checkbox"/> N <input type="checkbox"/>	Fel. <input type="checkbox"/> Misd. <input type="checkbox"/> Traf. <input type="checkbox"/> Ord. <input type="checkbox"/> NTA <input type="checkbox"/>	Co-Def #2. Arrested? Y <input type="checkbox"/> N <input type="checkbox"/>	Fel. <input type="checkbox"/> Misd. <input type="checkbox"/> Traf. <input type="checkbox"/> Ord. <input type="checkbox"/> NTA <input type="checkbox"/>
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#1 NAME	(Last)	(First)	(Middle)	Race:	Sex:	DOB:	Age:
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#2 NAME	(Last)	(First)	(Middle)	Race:	Sex:	DOB:	Age:
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<b>NARRATIVE</b>	<p>The undersigned certifies and swears that there is probable cause to believe the above-named defendant,</p> <p>on the <u>19</u> day of <u>October</u>, <u>2013</u>, at approximately <u>0733</u> <input type="checkbox"/> a.m. <input checked="" type="checkbox"/> p.m.</p> <p>at <u>Airport Rd. S. of Pioneer Tr. NEW SMYRNA</u> within <u>Volusia</u> County, violated the law and did then and there:</p>
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1 On Saturday, 10/19/2013, at approximately 1919 Hours Biketoberfest south end event supervisor Sergeant MacDonald was advised that a Volusia County Sheriff's Office patrol vehicle was driving erratically north on SR 415. The patrol vehicle was being followed and video taped by Witness #1.

2

3

4 During the phone conversation with Central Dispatch, Witness #1 provided a Volusia County Sheriff's Office car number of 174166 and a Sheriff tag number 47364.

5

6

7 Sergeant MacDonald checked RMS and determined that the Volusia County Sheriff's Office car was assigned to Deputy Stephanie LeClerc (Defendant). Based on the information provided by Witness #1, Sergeant MacDonald advised Central dispatch to give out a BOLO to the Biketoberfest event units that were in the area.

8

9

10

11 Deputies Chris Higgins and Jose Ramos first observed the Volusia County Sheriff's Office patrol vehicle in question. After following the vehicle to 3526 Disera Way, New Smyrna Beach, Deputy Higgins tactically approached the vehicle and identified the Defendant. Upon contact, Deputy Higgins suspected impairment (see Deputy Higgins Supplement for additional information).

12

13

14

15 Sergeant MacDonald arrived on scene and contacted Sergeant's Cory Piser and Keith Peck. Sergeant MacDonald contacted the Defendant

<b>NOTICE TO APPEAR</b>	MANDATORY APPEARANCE <input type="checkbox"/>	YOU NEED NOT APPEAR IN COURT BUT MUST COMPLY WITH INSTRUCTIONS ON THE REVERSE SIDE OF YOUR COPY <input type="checkbox"/>	FINE, AND COSTS AMOUNT:
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I AGREE TO APPEAR IN COURT HEREIN TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE INDICATED, I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED, OR PAY THE LISTED FINE, I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST WILL BE ISSUED.

SIGNATURE OF DEFENDANT	Date	RELATIONSHIP TO JUVENILE	JUVE DISP.	CITATION No.
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Sworn to and subscribed before me, the undersigned this <u>20</u> day of <u>October</u> , <u>2013</u>	I swear/affirm the above statements are correct and true	Rt Thumb
Name: <u>Sgt. Saunders 717</u>	OFFICER'S/COMPLAINANT'S SIGNATURE	
Notary Public <input type="checkbox"/> Law Enforcement or Corrections Officer <input checked="" type="checkbox"/>		
Personally Known <input type="checkbox"/> Produced Identification <input type="checkbox"/>	NAME (PRINTED) <u>MACDONALD, DAVID</u>	ID NUMBER <u>2439</u>
Type of Identification: _____		

<b>OFFICIAL USE ONLY</b>	Inmate Number & Facility:
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**Narrative Supplement 707-B**

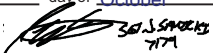
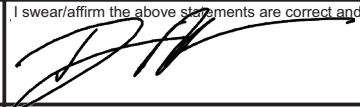
Arrest  
 Affidavit  
 Notice to Appear  
 Adult  
 Juvenile

**Court Case Number:**

Defendant Name: <b>LECLERC</b>	(Last)	(First) <b>STEPHANIE</b>	(Middle) <b>MICHELL</b>	Agency Case Number: <b>130029151</b>
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CHARGES	DOMESTIC VIOLENCE? Yes <input type="checkbox"/>	Attachments: Affidavit(s)? <input type="checkbox"/>	Statement(s) <input checked="" type="checkbox"/>	NTA Schedule <input type="checkbox"/>	Report <input checked="" type="checkbox"/>	Traffic Infraction(s) <input type="checkbox"/>	Total Charges: <b>1</b>
#	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD:	Citation No.:	Bond:		
#	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD:	Citation No.:	Bond:		
#	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD:	Citation No.:	Bond:		

16 requesting she exit the vehicle. Sergeant MacDonald observed that the Defendant was very unsteady as she got out of the vehicle and had trouble  
 17 maintaining balance.  
 18  
 19 Sergeant Peck administered and Sergeant MacDonald witnessed the Field Sobriety Exercises.  
 20  
 21 During the course of the criminal DUI investigation it was learned that the Defendant had XXXXXXXX (Victim #1) in the front seat of the patrol  
 22 vehicle while driving from the Osteen area to the location where she was stopped. Deputy Jose Ramos inquired about the child (Victim) that was in  
 23 the front seat of the patrol car. The Defendant advised XXXXXXXXXXXXXXXXXXXX. The victim was not physically injured during this incident. The  
 24 Victim was left in the custody of XXXXXXXXXXXX.  
 25  
 26 Based on the field sobriety exercises, the Defendant was placed under lawful arrest for DUI and transported to District five for DUI processing. The  
 27 Defendant refused to submit to a breath test.  
 28  
 29 A copy of the video provided by Witness #1 was submitted to evidence.  
 30  
 31  
 32

Sworn to and subscribed before me, the undersigned this <u>20</u> day of <u>October</u> , 2013 Name: 	I swear/affirm the above statements are correct and true  OFFICER'S/COMPLAINANT'S SIGNATURE MACDONALD, DAVID NAME (PRINTED)	Right Thumb
Notary Public <input type="checkbox"/> Law Enforcement Officer <input checked="" type="checkbox"/> Personally Known <input type="checkbox"/> Produced Identification <input type="checkbox"/> Type of Identification:	ID NUMBER 2439	