### Naperville Police Department Personal Property Report

IR# 2020 1302

| Name:  |  | Booking#:  | **       | *1   |
|--|--|--|----------|--|
| DAVENPORT, DANA  | . М.   | B  | 4762     |  |
| Paper \$ Belt Comb Coins \$35 Brush Glasses Total \$35 Boots Floves  CAUTION ITEMS: Cell Ph. Case Keys  Knife Cell Ph. Charger License / ID Mace Check Brook Lighter Needles Cigarettes Make-up Razor Blades Coat Medication | MP3 Player Pants Pen Pencil Purse Shirt Shires Sunglasses Wallet Watch | Detailed Ite  Pearrings  Necklace: WHT  Rings: WHT M  Other Jewelry: C  TAM POI  TAM | ETALWATE | STONES  STONES |
| Comments   |  | NATT   | 0        |  |
|  | S  | UJS K  | h        | -  |
|  | 1 9  |  | 7.       |  |
| Detainee's signature attests to the complete list of property held temporarily during confinement.   |  | have received all my<br>My personal property<br>unty Jail.   |          |  |
| Detainee's Signature   | ī  | Detainee's Signature   | went     | A  |
| Inventorying Officer  THE  | F  | MMM2<br>Releasing Officer  |          | 1 43   |

UNITED STATES OF AMERICA

STATE OF ILLINOIS

IN THE CIRCUIT COURT OF THE EIGHTEENTH JUDICIAL CIRCUIT

COUNTY OF DU PAGE

PEOPLE OF THE STATE OF ILLINOIS

VS

DANA DAVENPORT

2022CF000259

CASE NUMBER

OW202200000910 COMPLAINT NUMBER

FELONY COMPLAINT Candice Adams

- filed in the 18th Indicial Circuit Court

2022CF000259

02/11/2022 04:34 AM

. . . . . . . . . . . . . . . . . . .

File Stamp Here

DEFENDANT

COUNT 1 CF (Class: 4) 720 ILCS 5/31-4(a)(1) - OBSTRUCTING JUSTICE - TAMPER WITH EVIDENCE/FALSE INFORMATION

In the name and by the authority of THE PEOPLE OF THE STATE OF ILLINOIS, MEAGAN MCPHERSON hereinafter called the Complainant, on oath charges that at or about the hour of 03:57 AM on or about the 11th of FEBRUARY, 2022 in the County of DUPAGE, State of Illinois, DANA DAVENPORT hereinafter called the Defendant committed the offense of OBSTRUCTING JUSTICE—TAMPER WITH EVIDENCE/FALSE INFORMATION in violation of 720 ILCS 5/31-4(a)(1), in this, to wit, that the said Defendant with the intent to OBSTRUCT THE PROSECUTION of Dana M. Davenport / SAID DEFENDANT knowingly CONCEALED PHYSICAL EVIDENCE in that said defendant refused to provide a blood sample after being served with a search warrant signed by a judge., contrary to the form of the statute in such case made and provided and against the peace and dignity of the People of THE STATE OF ILLINOIS.

COUNT 2 DT (Class: A) 625 ILCS 5/11-501(a)(2) - DUI - ALCOHOL - 1ST OR 2ND OFFENSE

In the name and by the authority of THE PEOPLE OF THE STATE OF ILLINOIS, MEAGAN MCPHERSON hereinafter called the Complainant, on oath charges that the hour of 03:57 AM on or about the 11th of FEBRUARY, 2022 in the County of DUPAGE, State of Illinois, DANA DAVENPORT hereinafter called the Defendant committed the offense of DUI - ALCOHOL - 1ST OR 2ND OFFENSE in violation of 625 ILCS 5/11-501(a)(2), in this, to wit, that the said Defendant drove and was in actual physical control of a motor vehicle within this State while under the influence of alcohol, contrary to the form of the statute in such case made and provided and against the peace and dignity of the People of THE STATE OF ILLINOIS.

COUNT 3 TR (Class: P) 625 ILCS 5/11-804(b) - FAILURE TO SIGNAL WHEN REQUIRED

In the name and by the authority of <u>THE PEOPLE OF THE STATE OF ILLINOIS</u>, <u>MEAGAN MCPHERSON</u> hereinafter called the Complainant, on oath charges that at or about the hour of <u>03:57 AM</u> on or about the <u>11th</u> of <u>FEBRUARY. 2022</u> in the County of <u>DUPAGE</u>, State of Illinois, <u>DANA DAVENPORT</u> hereinafter called the Defendant committed the offense of <u>FAILURE TO SIGNAL</u> <u>WHEN REQUIRED</u> in violation of <u>625 ILCS 5/11-804(b)</u>, in this, to wit, that the said Defendant <u>turned S/B Washington Street from Benton Avenue and failed to use a turn signal.</u>, contrary to the form of the statute in such case made and provided and against the peace

and dignity of the People of THE STATE OF ILLINOIS.

COUNT 4 TR (Class: P) 625 ILCS 5/11-306 - DISOBEYED TRAFFIC CONTROL SIGNAL

In the name and by the authority of <u>THE PEOPLE OF THE STATE OF ILLINOIS</u>, <u>MEAGAN MCPHERSON</u> hereinafter called the Complainant, on oath charges that at or about the hour of <u>03:57 AM</u> on or about the <u>11th</u> of <u>FEBRUARY, 2022</u> in the County of <u>DUPAGE</u>, State of Illinois, <u>DANA DAVENPORT</u> hereinafter called the Defendant committed the offense of <u>DISOBEYED TRAFFIC</u> <u>CONTROL SIGNAL</u> in violation of <u>625 ILCS 5/11-306</u>, in this, to wit, that the said Defendant <u>was stopped on Washington Street past</u> the stop line for a red light at Jefferson Avenue (in the intersection)., contrary to the form of the statute in such case made and provided and against the peace and dignity of the People of <u>THE STATE OF ILLINOIS</u>.

COUNT 5 TR (Class: P) 625 ILCS 5/11-709(a) - IMPROPER LANE USAGE-CROSSING LANE BOUNDARY UNSAFELY

In the name and by the authority of THE PEOPLE OF THE STATE OF ILLINOIS, MEAGAN MCPHERSON hereinafter called the Complainant, on oath charges that at or about the hour of 03:57 AM on or about the 11th of FEBRUARY, 2022 in the County of DUPAGE, State of Illinois, DANA DAVENPORT hereinafter called the Defendant committed the offense of IMPROPER LANE USAGE-CROSSING LANE BOUNDARY UNSAFELY in violation of 625 ILCS 5/11-709(a), in this, to wit, that the said Defendant traveled over the lane markers multiple times while traveling S/B Washington Street between Jefferson Avenue and Hillside Avenue, contrary to the form of the statute in such case made and provided and against the peace and dignity of the People of THE STATE OF ILLINOIS.

VERIFICATION ON LAST PAGE

Name: MEAGAN MCPHERSON,

Address: 1350 AURORA AVE NAPERVILLE IL 60540

Phone #: 630-420-6666

Email:

#### ADDITIONAL WITNESS INFORMATION

Name:

Distribution: Original - Circuit Clerk Copies - Prosecutor - Police Department - Defendant

|     |  | A SHEET   | Dui age  | Sheriff's Office:  | Corrections Bureau   | ren               |
|-----|--|---|--|--|--|-------------------|
| 18  | ARREST/TRANSPORT OFFI  |   |  |  | 02/11/22   | 0048              |
|     | Print all Information and Chec   | 1   | ondition(s)  | M  | Date   | Time              |
|     | PRISONER NAME:   | Daventoit   | Dana   | 101  | F/B/   |                   |
|     | ARRESTING AGENCY:  | Last Name   | First Name   | MI.  | Sex/Race/De  | 1                 |
|     | ANTESTING ACENOT.  | MACOL   |  |  | 121  | 1.                |
| П   | ARRESTING OFFICER:   | Myhurson  |  |  | 1010   | 05                |
|     |  | Last Name   |  |  | ID#  |                   |
| 800 | TRANSPORTING AGENCY: TRANSPORTING OFFICER:   | Meherson  |  |  | 101  | 65                |
|     |  | Last Name   |  |  | 1D#  |                   |
|     |  | Cd / an   | enga   |  | 676  |                   |
|     | *INTAKE / SEARCH OFFICER:  |   | 17/54  |  |  |                   |
|     | * Including the use of the<br>Hand Scanner   | Last Name   | Day.   | 10272  | !D#  |                   |
|     |  | 1R:266841   |  |  |  |                   |
| 1.  | PRISONER CONDITION:  | Has Indicated or Express  | sed SUICIDAL IDEATIO   |  | 2-4  |                   |
|     | Check Appropriate Box  | Under the Influence of A  | cohol or Drugs?  | Chou   | 95   |                   |
|     |  | Has or Complains of Phy   | sical Injury?  | CHOVS  | , , ,  |                   |
| 1   | Complaint #  | Has Received Medical At   | tantion?   |  |  |                   |
|     | Complaint #  |   |  |  | -  |                   |
|     | 2002-001302  | Has Pre-Existing Medical  | l or Psychological Pro   | blem?  | Ø  |                   |
|     | 1003-001   | Has a Cough and Report  | ed Fever?  |  |  |                   |
|     | (DuPage Only)  | Combative or Beligerent   | ?  |  |  | -                 |
| -   | Dispersional technological description   | No Known Physical Injur   | v or Mental Disorder   |  |  |                   |
| CI  |  |   |  |  |  |                   |
|     | harges: Obstructing  | Justice, D  | UI,  | Out of County  | HOLD's?  | 100 <u>- 11</u> 0 |
|     | harges: Obstructing  | Justice, D  | 01,  | Out of County  | NO   |                   |
|     | INTAKE SUPERVISOR  | Justice, D  | 01,  | Out of County  | HOLD's?  | - 0               |
|     | INTAKE SUPERVISOR  I have observe being accepted I have observe the large of the la | red the prisoner and find<br>ed to the Jail. (Notificat<br>red the prisoner and find  | him/her IN NEED  | of medical exam  | Ination before   |                   |
|     | INTAKE SUPERVISOR  I have observe being accepted.  | red the prisoner and find<br>ed to the Jail. (Notificat<br>red the prisoner and find  | him/her IN NEED  | of medical exam<br>made.)<br>CEPTABLE for Ja                       | Ination before   |                   |
|     | INTAKE SUPERVISOR  I have observe being accepted I have observe RECEIVED BY:   | red the prisoner and find<br>ed to the Jail. (Notificat<br>red the prisoner and find  | him/her IN NEED ion of Duty Nurse him/her to be ACC  | of medical exam<br>made.)<br>CEPTABLE for Ja                       | Ination before   |                   |
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| I.R.#: 2003  |  |  |  |  |   | APERVI   |   |                    |                            |                                       | Room#                    |
|--|--|--|--|--|---|--|---|--------------------|----------------------------|---------------------------------------|--------------------------|
|  | 0.1302   | BOOKING#:  | 7474   | 2  | DATE  | All  | 100   | 10                 | ldult 🗆                    | Juvenile                              | T (GOITIN                |
| Name DAUE  |  | DANA MOO   | ND.  |  | T   | -  | Transgender?  | /                  |                            | Juvernie                              |                          |
| 11010  | PIOC   | 1 21 11014 (00   | В  |  | ace   | /W   | i ransgender r  | Li Describe.       |                            |                                       |                          |
|  | PLACED I   | IN DETENTION ROOM  | M  |  |   |  |   | MEDICAL HI         |                            | N                                     | 11                       |
| 2011/20  | 1  | 105 By MC  | Duran  | \  | 1.  |  | we any medical<br>abetes, eplleps   |                    |                            | S mo                                  | DES                      |
| Date Searched by   | Ja 101 - 558   | Booking Offi   |  |  | Si .  | (G.E.R.D),   | high blood pre  | ssure, etc?) If    | YES,                       | //                                    |                          |
| Counciled by   | TOPHER   | DOOKING CIT  | -  | 115  |   | describe:  |   |                    |                            | 11                                    |                          |
|  | TELE   | PHONE RECORD   |  |  |   |  |   |                    |                            | _                                     |                          |
|  |  |  |  |  |   |  |   |                    |                            | XI                                    | \/                       |
| Date Tim   | PERSONAL CONTRACTOR OF THE PERSON OF THE PER | Nature of Call   | . V.   | Initials   | 2.  |  | eing treated by a<br>sical or psycholo  |                    | y issue,                   | 400                                   | YES                      |
| 02/11/22/04  | 24 Give  | 1. Phone to  | Make   | MM   |   | If yes, for v  | what?   | 115                |                            | 9                                     |                          |
|  | <u> </u>   | 415  |  |  |   | Doctor Na  | me  | لحا                |                            | -/-                                   |                          |
|  |  |  |  |  |   | Address:   |   | -UK                | SK                         | 1                                     |                          |
|  | M  | EAL RECORD   |  |  |   |  | -   |                    |                            | _                                     | \ \                      |
| -  |  |  |  |  | 3.  | Are you tal  | king medication   | for GERD, die      | abetes, hear               | rt 🗆 NO                               | D√¥€S                    |
| Date Tim   | ne (   | Meal Content   |  | Initials   |   | any  | eizures, asthma   | i, nign blood p    | ressure, or                |                                       | /,                       |
|  | -  |  |  |  |   |  |   |                    |                            |                                       | <i>,</i> '               |
|  |  |  |  |  | 3   |  |   |                    |                            |                                       |                          |
|  | 100  | Top proces   |  |  |   |  |   |                    |                            | - 1/                                  | _                        |
|  | VIS  | ITOR RECORD  |  |  | 4.  |  | ve, or have you   |                    |                            | DINO                                  | ☐ YES                    |
| Date Tim   | 10   | Name and Relationsh  | ıip  | Initials   |   | ii so what t   | type? A, B, C:  | <del>(12-211</del> |                            | -                                     |                          |
|  |  |  |  |  | 5.  | Are you all  | ergic to any foo  | ds, medication     | s or aspirin               | ? 1 NO                                | ☐ YES                    |
|  |  |  |  |  |   | If yes, wha  | t?  |                    |                            | + 1                                   | i.                       |
| 1 0  | FINAL DISPO  | OSITION OF DETAIN  | FF   |  | 6.  | Are you be   | ındicapped in aı  | au way? If yae     | decarbo                    | 15/6                                  | ☐ YES                    |
|  | THE DIOT   | O T  |  |  | 0.  |  | indicapped in a   |                    |                            | S.NO                                  | LI YES                   |
| Removed from De  | etention Center  | 12/1   |  |  |   |  |   |                    |                            |                                       |                          |
| Reason   |  |  |  |  | 7.  | Note any s   | mautations da   | formition boule    |                            | /                                     |                          |
|  |  |  |  |  |   | or physical  | amputations, de<br>l condition effec  | ting the ease      | es, lesions,<br>of movemen | , jaundice,<br>ot:                    |                          |
| If transferred to a  | nother facility, lis   | st the facility and obtain   | n the signa  | ture of the  |   | 0.51   |   |                    |                            | 200                                   |                          |
| receiving officer to   | o wnom you turn  | ned over both the detai  | inee and pr  | roperty.   | 3   |  |   |                    |                            |                                       |                          |
| dol  | ON   |  | N/   | (0)  |   |  |   |                    |                            |                                       | _                        |
| - m  | wu .   |  |  | \ \  |   |  |   |                    |                            |                                       |                          |
|  | Signature  |  | Denarte  | mont/Eacility  | 8.  | Pregnancy  |   | 5                  |                            | 77                                    | ☐ YES                    |
| Date 211   | Signature  | Tin  |  | ment/Facility  | 9.  | 8  |   | 8                  |                            | Z                                     |                          |
| Date 211   | Signature  | Tin  |  | ment/Facility  | — 8.<br>— 9.  | 8  | hts of suicide?   | *                  | If yes, tr                 | NO NO reat detainee                   | ☐ YES                    |
|  | 122  |  | ne< <u>'</u> <i>0</i> :  | 544  | 8.<br>9.  | Any though   | hts of suicide?   |                    |                            | eat detainee                          | ☐ YES<br>as "high risk.  |
|  | 122  | Tin  | ne< <u>'</u> <i>0</i> :  | 544  | 9.  | Any though   | hts of suicide?   | DCFS Notifie       |                            | eat detainee                          | ☐ YES                    |
| Do you have any cl   | hildren under 18 v   | who may be neglected a   | as a result o  | of your arrest?  | which cou   | Any though   | hts of suicide?  VES  u a citizen of?   |                    |                            | eat detainee                          | ☐ YES<br>as "high risk.  |
| Do you have any cl   | hildren under 18 v   | who may be neglected a   | as a result o  | of your arrest?  | which cou   | Any though   | hts of suicide?  VES  u a citizen of?   |                    | d? 🗆                       | eat detainee                          | ☐ YES<br>as "high risk.  |
| Do you have any cl   | hildren under 18 v   | who may be neglected a YES D N Informed of his/her righ  | as a result o  | of your arrest?  | which cou<br>e foreign                                | Any though   | hts of suicide?  YES  u a citizen of?   |                    | d? 🗆                       | eat detainee                          | ☐ YES<br>as "high risk.  |
| Do you have any cl<br>Are you a United Si<br>If not a US citizen w   | hildren under 18 v<br>tates citizen?<br>was the detainee   | who may be neglected a  YES  N  Informed of his/her righ   | as a result o  | of your arrest? It a US citizen, very the appropriate of the conduct of the condu | which cou<br>e foreign<br>AT TIM                      | Any though   | hts of suicide?  YES  u a citizen of?  ifice?   | ☐ YES              | d?                         | NO   NO                               | ☐ YES<br>as "high risk.  |
| Do you have any cl<br>Are you a United Si<br>If not a US citizen w   | hildren under 18 v<br>tates citizen?<br>was the detainee   | who may be neglected a YES D N Informed of his/her righ  | as a result o  | of your arrest?  It a US citizen, we the appropriate of the A / CONDUCT of all that apply:   | which cou<br>e foreign                                | Any though   | YES u a citizen of? Ifice?  | ☐ YES              | d?                         | eat detainee                          | ☐ YES<br>as "high risk.  |
| Do you have any cl<br>Are you a United Si<br>If not a US citizen w   | hildren under 18 v<br>tates citizen?<br>was the detainee   | who may be neglected a  YES N  Informed of his/her right   | as a result of the contact of the co | of your arrest?  It a US citizen, we the appropriate of CONDUCT g all that apply:  Confused  | AT TIMI  Alert Cooper                                 | Any though   | Hts of suicide?  YES  u a citizen of?  Fice?  KE  Belligerent   | ☐ YES              | d?                         | NO   NO                               | ☐ YES<br>as "high risk.  |
| Do you have any cl<br>Are you a United Si<br>If not a US citizen w   | hildren under 18 v<br>tates citizen?<br>was the detainee   | who may be neglected a  YES N  Informed of his/her right   | as a result of the contact of the co | of your arrest?  It a US citizen, we the appropriate of the A / CONDUCT of all that apply:   | AT TIMI  Alert Cooper                                 | Any though   | YES u a citizen of? Ifice?  | ☐ YES              | d?                         | NO   NO                               | ☐ YES<br>as "high risk.  |
| Do you have any cl<br>Are you a United Si<br>If not a US citizen w   | hildren under 18 v<br>tates citizen?<br>was the detainee i   | who may be neglected a  YES N  Informed of his/her right  tibe this individual's behave Uncooperative  | as a result of the contact BEHAVIOR Withdrawn HIGH I   | of your arrest?  It a US citizen, we the appropriate of CONDUCT g all that apply:  Confused  | AT TIMI Alert Cooper                                  | Any though   | YES u a citizen of? Ifice?  | ombalive other:    | Appre                      | NO   NO                               | ☐ YES<br>as "high risk.  |
| Do you have any cl  Are you a United St If not a US citizen w  In the reporting office  1. Extremely into 2. Drug addicted of  | hildren under 18 v<br>tates citizen?<br>was the detainee i<br>er's opinion, descri<br>xicated?<br>or under influence   | who may be neglected a vest of drugs?  | as a result of the contact BEHAVIOR Withdrawn HIGH   | of your arrest?  It a US citizen, very the appropriate of a CONDUCT  If a distribution of the appropriate of a CONDUCT  If a distribution of the appropriate of a confused  If a distribution of the appropriate of a confused  If a distribution of the appropriate of a confused  If a distribution of the appropriate of a confused of a confus | AT TIMI  Alert Cooper  Evider Any be                  | Any thought  | hts of suicide?  YES  u a citizen of?  ffice?  KE  Belligerent  Calm  | ombalive other:    | Appre                      | NO   NO   NO   NO   NO   NO   NO   NO | ☐ YES as "high risk. YES |
| Do you have any cl  Are you a United St If not a US citizen w  In the reporting office  1. Extremely into 2. Drug addicted of 3. Violent towards   | hildren under 18 vitates citizen? was the detainee in the deta | who may be neglected a  YES  N  Informed of his/her right  ibe this individual's behave Uncooperative  Of drugs?  N  estructive?  N  | as a result of the contact BEHAVIOR Withdrawn HIGH   | of your arrest?  It a US citizen, very the appropriate of the Appropri | AT TIMI  Alert Cooper  Evider Any be                  | Any though   | hts of suicide?  YES  u a citizen of?  ffice?  KE  Selligerent  uiet Calm   | ombalive other:    | Appre                      | NO NO                                 | ☐ YES as "high risk. YES |
| Do you have any cl Are you a United Si If not a US citizen w In the reporting office  1. Extremely into 2. Drug addicted 3. Violent towards Supervisor Notified                          | hildren under 18 vitates citizen? was the detainee if er's opinion, descri   | who may be neglected a  YES  N  Informed of his/her right  ibe this individual's behave Uncooperative  Of drugs?  N  estructive?  N  | as a result of the contact BEHAVIOR Withdrawn HIGH I   | of your arrest?  It a US citizen, very the appropriate of a CONDUCT gradient of the appropriate of the appro | AT TIMI  Alert Cooper  EVider Any be Uncon            | Any thought  | hts of suicide?  YES  u a citizen of?  ffice?  KE  Belligerent  uiet Calm  uunicable diseas gesting suicide r           | ombalive other:    | Appre                      | NO   NO   NO   NO   NO   NO   NO   NO | YES  YES  YES  YES       |
| Do you have any cl Are you a United Si If not a US citizen w In the reporting office  1. Extremely into 2. Drug addicted 3. Violent towards Supervisor Notified                          | hildren under 18 vitates citizen? was the detainee in er's opinion, descri xicated? or under influence s others or self -de i: ny of the above qu  | who may be neglected a large region of drugs?  | as a result of the contact BEHAVIOR Withdrawn HIGH I   | of your arrest?  It a US citizen, very the appropriate of the appropri | AT TIMI  Alert Cooper  Evider  Any be  Uncon          | Any thought  | hts of suicide?  VES  u a citizen of?  ffice?  KE  Selligerent  uiet Calm  sunicable diseas  jesting suicide r          | ombalive other:    | Appre                      | NO   NO   NO   NO   NO   NO   NO   NO | YES  YES  YES  YES       |
| Do you have any cl Are you a United Si If not a US citizen w In the reporting office  1. Extremely into 2. Drug addicted 3. Violent towards Supervisor Notified                          | hildren under 18 vitates citizen? was the detainee in er's opinion, descri xicated? or under influence s others or self -de i: ny of the above qui   | who may be neglected a    YES  | as a result of the contact BEHAVIOR Withdrawn HIGH I   | of your arrest?  It a US citizen, which appropriate is a US citizen, which appropriate is a US citizen, which appropriate is a US citizen, which is a US confused in the appropriate in the appropriate is a US confused in the appropriate is a US confused in the appropriate is a US confused in the appropriate is a US citizen, which is a US citize | AT TIMI  Alert Cooper  Evider  Any be  Uncon          | Any thought Any thought Any thought Any thought Any are you consular of E OF INTA  Loud E Patrice Question Any and a Comment of Comment Any and a Comment An | hts of suicide?  YES  u a citizen of?  ffice?  KE  Belligerent  unicable diseas jesting suicide r  s refer to G.O. 7    | ombalive other:    | Appre                      | NO   NO   NO   NO   NO   NO   NO   NO | YES YES YES YES          |
| Do you have any cl Are you a United St If not a US citizen we In the reporting office  1. Extremely into 2. Drug addicted of 3. Violent towards Supervisor Notified A "YES" answer to an | hildren under 18 visuates citizen? was the detainee in the control of the above query of  | who may be neglected a YES   N Informed of his/her right ibe this individual's behave Uncooperative   N N Informed of drugs?   N N Informed of dru | as a result of  If not t to contact  BEHAVIOR  Withdrawn  HIGH I  O  | of your arrest?  It a US citizen, very the appropriate of the appropri | AT TIMI  Alert Cooper  Evider  Any be  Uncon          | Any thought  Ountry are you consular of EOF INTA  Loud E rative Out REENING  noce of commender and out commander and out | He of suicide?  YES  U a citizen of?  Iffice?  KE  Belligerent  Junicable diseasestesting suicide r  Serefer to G.O.: 7 | ombalive other:    | Appre                      | NO   NO   NO   NO   NO   NO   NO   NO | YES  YES  YES  YES       |
| Do you have any cl  Are you a United St If not a US citizen we In the reporting office  1. Extremely into 2. Drug addicted a 3. Violent towards Supervisor Notified A YES" answer to an  | hildren under 18 visuates citizen? was the detainee in the company of the above queres of the company | who may be neglected a YES   N Informed of his/her right ibe this individual's behave Uncooperative   N N Informed of drugs?   N N Informed of dru | as a result or  IO If not  It to contact  BEHAVIOR  Withdrawn  HIGH I  IO I Y  IO I Y  IT Ime:  e to be "high  CK INTERV  CET Deta   | of your arrest?  It a US citizen, very the appropriate of the appropri | AT TIMI  Alert Cooper  Evider  Any be  Uncon  Watch C | Any thought  Ountry are you consular of EOF INTA  Loud E rative Out REENING  noce of commender and out commander and out | wes  u a citizen of?  ffice?  KE  Selligerent  unicable diseas  jesting suicide r  k refer to G.O: 7                    | combalive Other:   | Appre                      | NO   NO   NO   NO   NO   NO   NO   NO | YES  YES  YES  Officer   |
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## Illinois Phlebotomy

### Services

Phlebotomy P.O. BOX 199 • PLANO, IL 60545 630-296-4199

| Service Requisition           | www.illinoisphlebotomyservices.com • contact.us@illinoisphlebotomyservices.com |                     |                          |  |  |  |  |
|-------------------------------|--|---------------------|--------------------------|--|--|--|--|
| SUBJECT                       | PLEASE PRINT LEGIBLY   |                     |                          |  |  |  |  |
| Today's Date                  | $\frac{0.2}{\text{Month}} \frac{2.0.2.5}{\text{Day}}$                          | 2                   |                          |  |  |  |  |
| Last Name                     | Daveryort  |                     |                          |  |  |  |  |
| First Name                    | Dana   |                     |                          |  |  |  |  |
| Date of Birth                 | Month Day Year   | Male 🔲              | Female 💆                 |  |  |  |  |
| Street Address                |  |                     |                          |  |  |  |  |
| City                          | Search Warrant Consent to Draw   |                     |                          |  |  |  |  |
|                               | X  |                     | - I                      |  |  |  |  |
|                               | SUBJECT SIGNATURE  | DATE                |                          |  |  |  |  |
| POLICE<br>Police Department   | Naperville PD  |                     |                          |  |  |  |  |
| County (of Arrest / Incident) | Dupage   |                     |                          |  |  |  |  |
| Agency Case #                 | 2022-1502  |                     |                          |  |  |  |  |
| Officer & Badge #             | Markerson #10165   |                     |                          |  |  |  |  |
|                               | X 4/1/2 # 10165  OFFICER SIGNATURE   | 02/11<br>DATE       | 122                      |  |  |  |  |
| PHLEBOTOMIST                  |  | OFFICER<br>INITIALS | PHLEBOTOMIST<br>INITIALS |  |  |  |  |
| Kit Lot Number #              | 613110003  |                     | 20                       |  |  |  |  |
| Expiration Date               | 513112023  | -                   | 10                       |  |  |  |  |
| Blood Collection Time         | am • pm  |                     |                          |  |  |  |  |
| Urine Collection Time         | am • pm  |                     |                          |  |  |  |  |
| Refusal Time                  | (am) · pm  | 2                   |                          |  |  |  |  |
| Phlebotomist Name (PRINT)     | Alinette Osias   |                     | 1 =                      |  |  |  |  |
| *                             | x Chnette O  |                     | 122                      |  |  |  |  |
|                               | PHLEBOTOMIST SIGNATURE   | DATE                |                          |  |  |  |  |

# CITY OF NAPERVILLE POLICE DEPARTMENT NOTICE OF VEHICLE IMPOUNDMENT

| Report # 2000 . /300   |
|--|
| The vehicle Year Make Model TOHAN Cens is being impounded as there is probable cause to believe the vehicle has been used in violation of 11-5B-12 of the City of Naperville Municipal Code in that the driver's vehicle was:  |
| wed due to an outstanding warrant for the driver;  |
| Towed due to the driver's commission of a misdemeanor criminal or vehicle code offense or corresponding municipal ordinance violation;   |
| Towed due to the driver's commission of a felony criminal or vehicle code offense.   |
| For the release of the vehicle, you must post a bond in the amount of the administrative fee of \$500.00 at the Naperville Police Department, 1350 Aurora Avenue, Naperville, Illinois, (630) 420-6666 and pay all towing and storage fees related to this incident.   |
| Preliminary Hearing The owner of record of any vehicle which is impounded pursuant to Chapter 11, Section 5B-12 of the City of Naperville Municipal Code has the right to appeal the impoundment of this vehicle and to contest the validity of the probable cause to impound this vehicle. Request for a preliminary hearing must be in writing and filed with the Chief of Police, or designee, within forty-eight (48) hours, excluding weekends and holidays, from the time the vehicle was impounded. Appeal forms are available at the Naperville Police Department, 1350 Aurora Avenue, Naperville, Illinois 60540. A hearing on said appeal will be held within forty-eight (48) hours after the receipt of the request, excluding weekends and holidays.  |
| 11-5B-12 Violation Notice  A Notice of an Administrative Hearing shall be mailed within ten (10) days after the impoundment of this vehicle to the owner advising of the date, time and location of the Administrative Hearing. The owner of record IS NOT required to attend this hearing if they are not contesting the tow and all fees have been paid.   |
| I do hereby certify I personally handed a copy of the above notice to:    DANCE   DANC |

White Copy: Police

Yellow Copy: Driver/Owner

Pink: Tow Basket in Patrol

| Date of Arrest:  | Sh | 22 |
|------------------|----|----|
| Duce of Milesei_ |    |    |

| Case/IR #:_ | 2020-1302 |
|-------------|-----------|
|             | Q(17/2)   |
| Booking #   | CHTU      |

# NAPERVILLE POLICE DEPARTMENT



ADMINISTRATIVE FEE NOTICE You are hereby notified that under the City of Naperville Municipal Code, and as provided for by law, an Administrative Fee of fifty dollars (\$50.00) shall be imposed upon completion of any custodial arrest/booking procedure. First Name: Middle Initia Date of Birth DL #: City: Address: Apt # Zip Code: Phone # Fifty dollars (\$50.00) Paid In Full: CASH/CHARGE Officer's Initials/Badge #:\_\_\_\_ (Circle one) Juvenile Arrest Officer's Initials/Badge #:\_ No Administrative Released without Charges Fee due to: & Sergeant (or above) Initials/Badge #:\_ (Check box to right) Other: Officer's Initials/Badge# No Fee Paid-Payment Due Be advised you are hereby served with this invoice for failure to pay the fifty dollars (\$50.00) Administrative Fee at the time of your arrest/booking procedure in compliance with the City of Naperville Municipal Code. Pursuant to Ordinance No. 11-172: You may request a hearing to determine whether the imposition of the Administrative Fee was proper. The request must be in writing and mailed to the address provided below within thirty (30) days of the imposition of the Administrative Fee. Naperville Police Department **Traffic Section Commander** 1350 Aurora Avenue Naperville, Illinois 60540 You must pay the Administrative Fee within thirty (30) days from the date of this invoice unless a hearing was requested as provided for above. Fees may be paid in person at the City of Naperville Finance Department during the business hours listed below or by mail at the following address: City of Naperville **Business Hours** Mon/Tues/Thurs/Fri: 7:30am-5:00pm **Finance Department** 400 S. Eagle Street Wednesday: 10:00am-2:00pm Naperville, Illinois 60540 Prisoner's Signature: Releasing Offi Signature & Badge Number

Form#458

White: Records

Yellow: Defendant

Pink: Jailer

Revised 12/16

#### LAW ENFORCEMENT SWORN REPORT

| Circuit Court, Cage  | ounty,  | Muni  | cipal District  |
|--|---|---|---|
| Case Number 2022 - 302   | DUI TRAFFIC CITATION NO. (11-50   | 1A1) DUI TRAI   | FFIC CITATION NO. (UI-501A2)  |
| Case Number  | 11-401 Citation No.   | DUI TRA   | FFIC CITATION NO. (OTHER)   |
| Traveninet I   | /a//a   | M   | <u></u>   |
| Name Last  | First   | Middle  |   |
| Driver's Licens  | e Number  |   | State   |
| CDL holder   |   |   | 16.   |
| City & State  Sex Date of Birth  Notice of Summary Suspension/ 02 1 1 202-2  | Arrest 072 / Month  | Day Year Refusal or Location  | Time a.m.   |
| The suspension/revocation shall take effect on the 46th day following issual Vehicle Code, or similar provision of a local ordinance or Section 11-401 you were asked to submit to a chemical test(s) to determine the alcohol, of breath, blood, urine or other bodily substance and warned of the conseque a hearing to contest your suspension/revocation. You must file a petition to Because you refused to submit to or failed to complete testing, your driving Because you submitted to testing conducted pursuant to Section 11-501.2.  an alcohol concentration of | of the Illinois Vehicle Code, you are ther drug(s), intoxicating compound ences pursuant to Section 11-501.1 of orescind your suspension/revocation in privileges will be suspended for which disclosed:  8 or more; or   a delta-9-tetrahydrounce from the unlawful use or consumption in the Use of Intoxicating Compouning privileges will be suspended for e involved in a motor vehicle crash that suant to 11-501.2 which disclosed any | e hereby notified to (s), or any combin of the Illinois Vehic in within 90 days of a minimum of 12 cannabinol concent on of a controlled sounds. Act; or methor a minimum of 6 at caused Type A per amount of a drug, s | nation the date shown above, vation thereof, content of your ele Code. You have the right to of this notice.  months.*  cration of either 5 nanograms or ubstance as listed in the Illinois namphetamine as listed in the months.*  resonal injury or death to another, substance or compound resulting |
| Driver's license surrendered?  ☐ Yes ☐ No; Reas Driver's license valid at time of arrest? ☐ Yes (Sign receipt) ☐ No (Void  |   |   |   |
| I have complied with Section 11-501.1 of the Illinois Vehicle Code by having provision of a local ordinance, or Section 11-401: (Explain)  | reasonable grounds to believe the arre  | Stee was in violation   | on of Section 11-501 or a similar   |
| Pursuant to Section 11-501.1 of the Illinois Vehicle Code I have:  Served immediate Notice of Summary Suspension/Revocation/Disqualification of driprepaid postage envelope addressed to said person at the address as show Under penalties as provided by law pursuant to Section 1-109 of the Illinois Co.   | ving privileges to the above-named pe<br>n on the Uniform Traffic Ticket.   | erson by depositing   |   |
| ment are true and correct.   |   |   | 1116  |
| NJ 1/1/2-  |   | E.  | ID Number   |
| Signature of Arresting Officer   | ×   | 200   | ID Number   |
| Nove Wille   | Date  | OC 1  | Day Year  |
| Law Enforcement Agency   |   | Month   | Day Tear  |

## TOW REPORT NAPERVILLE POLICE DEPARTMENT

| Z           | NAP  | E 1011 EDWN BJEST BOD               | Tow Repo          | ort Number: 288003445                                      |  |  |
|-------------|--|-------------------------------------|-------------------|--|--|--|
| COMPLA      |  |                                     | DCN:              | oort Type: ADMINISTRATIVE                                  |  |  |
| N O         | Case No.   | CAD                                 |                   | port Type: ADMINISTRATIVE                                  |  |  |
| ပ           | County of  | 2022-                               | 001302            | Accident/Crash Report #                                    |  |  |
|             | DUPAGE   | Township of                         |                   |  |  |  |
|             | Date Assigned: 02/11/2022  | STATE                               | Time Assigned:    | MILEAGE  |  |  |
| Щ           |  | IL.                                 | 04/2022           | 133863   |  |  |
| 絽           | MAKE<br>TOYOTA HIGHLANDER  | YEAR<br>2013                        |                   | COLOR<br>GRAY  |  |  |
| VE          | TYPE<br>PASSENGER CAR  | MN<br>5TDDK3EH6DS221374             |                   | CITY TAG<br>V22B0941                                       |  |  |
|             | NAME   |                                     | OPTIONS: SAME     | AS DRIVER  |  |  |
| 꿈           | DAVENPORT<br>LAST  | DANA<br>FIRST                       | M<br>MIDDLE       | ENAME  |  |  |
| Ž           | ADDRESS  |                                     |                   | Phone #  |  |  |
| Š           | STREET   |                                     | APT#              | Punyan   |  |  |
|             | NAME   | DONED                               | OPTIONS:          |  |  |  |
|             | DAVENPORT  | DANA                                | M                 | - NAME   |  |  |
| 卣           | ADDRESS  | FIRST                               | MIDDLE            | Phone #  |  |  |
| DRIV        |  |                                     | APTH              |  |  |  |
| 0           |  |                                     |                   | DOB  |  |  |
|             | FRONT  | OTHER                               |                   | ATES REMOVED?  |  |  |
|             | 01 🗆   | 00: No visible                      | damage B          | ront YES NO  |  |  |
| ш           | 02 03 0 04   | 13: Undercar                        | rlage Vif         | N ALTERED OR DAMAGED?                                      |  |  |
| DAMAGE      | 05 06 07   | ☐ 14: Interior<br>☐ 99: Total/All a |                   | Damaged YES NO   |  |  |
| AM          |  | Damage not indic                    | ated on diagram:  |  |  |  |
| Ω           | 08 09 10   |                                     |                   |  |  |  |
|             | 11 🗆   |                                     |                   |  |  |  |
| <u></u>     | REAR List all valuable property that is inc  | luded with or miss                  | ing from vehicle: |  |  |  |
| ORY         | MISC CLOTHING AND PA   |                                     |                   | RUNK.  |  |  |
| EN          |  |                                     |                   |  |  |  |
| N           | Keys in Vehicle? ■ YES □ N   | 0                                   |                   |  |  |  |
|             | Reason for Tow: ARREST   |                                     |                   |  |  |  |
| INFORMATION | Location Towed From: OLSER AN<br>Location Towed To/Stored: KITS, 1   |                                     |                   | L  |  |  |
| IAT         | Towing Company: KITS<br>Address: 1680-C QUINCY AV  |                                     |                   | Ph #: 6303693225   |  |  |
| JRIV        | City: NAPERVILLE   | Sta                                 | ite: ILLINOIS     | Zip: 60540   |  |  |
| N<br>N      | Tow Truck Driver:<br>Has the vehicle owner been notifie  | d? ■YES□I                           | NO                |  |  |  |
| Ð           | How was notification made or attention to the second of th |                                     |                   |  |  |  |
| É           | If yes, reason for hold: ADMINISTE   | RATIVE/DUI                          | Hold for how 1    | ong: 12 HOURS  |  |  |
|             | Hold Authorized By (If other than to<br>Tow stcker previously applied?   | YES NO                              |                   |  |  |  |
|             | Tow Authorized By (if other than to  |                                     |                   | Apr2016-v1.1   |  |  |
| MCI         | DERMOTT, B   | 10339<br>ID No.                     | ec                | DEVICE ID: 268<br>CLIENT: 21 3.4 310, DEPLOYMENT: 2002 004 |  |  |
| .,,,        |  | 132 (199)                           |                   |  |  |  |
|             | ased by Officer  |                                     | Release Dal       |  |  |  |
| that w      | undersigned do hereby acknowledge<br>as in sald vehicle at the time of tow. Ir<br>ly from any and all claims or damages  | requesting this rele                |                   |  |  |  |

Tow Truck Driver Name: