SIGNED:	Tor Duy	Mela	> 1	2450	
	OFFICER TAKING	STATEMENT:			
		SIGNATURE:			

DPSSP 3111 (REV. JAN. 2005)

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	ARREST
STATE OF LOUISIANA	NO. 12/09/39277 DATE: 09 / 06 /2012 TIME: 1800 ☐ AM ©
Versus	LOUISIANA BOND:
Bowlin cody m	
NAME	TWENTY-FIRST JUDICIAL DISTRICT COURT PARISH OF LIVINGSTON
	STATE OF LOUISIANA
RACE: w SEX: m DOB: 02 /07 / 1990	THE UNDERSIGNED,
29651 Joe Albin Rd	Chief Brignac
ADDRESS	
PROBABLE CAUSE IS:	CHARGED WITH DWI, RS No. 14:98. 14pp have Us  2.33-79  on la 16. When i arrived on the it was a head on crash Both driver
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NOTE: SEPARATE FROM THE SET BEFORE WRITING ON THIS PAGE	LOUISLA	NA (	INIFONM DW	I ARREST REPORT
Bowling Cody M	009208819	DATE 9-	6-1a	AGENCY FILE NO. 12 09-39,277
On 9-6-12 I, Chief Bi	rignac, was disp	atch	ed to a two	vehicle crash
on LA 16 just before the	Colvell Bay brid	ge.	The driver	of vehicle 2 told
me that vehicle just came	into his lane a	nd h	it him head	on. The driver
of vehicle one told me that	at he dropped hi	s ce	ll phone and	d looked down
to get his phone when he	Looked up again	he w	as in the n	orthbound lane
and hit vehicle head on. S	State police Tro	oper	McCartney	arrived to help
me with the crash. He aske	ed me what happe	ned	and I told	him that the
white GMC hit the other to	ruck head on, so	he	asked who wa	as driving and I
told him Mr. Bowlin was, s	so he went and t	alke	to Mr. Bos	wlin and than
trooper came back to me an	nd told me that	he h	d advised 1	Mr. Bowlin of his
rights and said Mr. Bowlin	who was obviou	sly	impaired.	
The EMT's with French	Settlement Fir	e De	t was try	ing to work on Mr.
Bowlin and he was giving t	hem a problem a	bout	going to th	ne hospital.
Acadian arrived and he did	the same thing	with	them as wi	ith French
Settlement EMT's. So I wen	t over to Acadi	an ai	nd told then	he was advised
of his rights at 17:38 hrs	and he was un	der a	rrest, take	e' him to St.
Elizabeth Hospital. So the	y took Mr. Bowl	in_ar	nd the drive	er of vehicle 2
to the hospital. So than I	, Chief Brignac	and.	Prooper McC	Cartney followed
Acadian to the hospital to	draw blood and	urir	ne from Mr.	Bowlin.
Once we arrived at th	e hospital Mr.	Bowli	n was read	his rights from
the rights form and Mr. Bo	wlin signed it	and a	so the ric	hts form for
drawing blood and urine. S	o than Michael	Gro d	ame drew bl	ood and urine
and signed all of the form	s and turned it	over	to me, Chi	ef Brignac. So
than after the hospital tr	eated Mr. Bowli	n, I	transported	l him to
Livingston Parish Jail whe	re he was booke	dint	o jail for	DWI ànd
improper lane use.		+-		
		4	-	
		-		
ARRESTING OFFICER (print) SIGNA	0.000	-	* * 1, 1/**	DEPT. DATE
Chief Hary Bright CONTROL ADDRE	Markhym	-		F500 9-6-12 PHONE
		1	<u> </u>	FRONE
TO H. MC CANTREY 2450 L	SP-A	<u> </u>		
TP H. Mc CANTREY 2450 L. 20 Per Mike Dunkin BY3 1.	or Vicent AD			
华沙人的建筑等的建筑为 短對 医氯酚酚 医胸膜畸形	UNIFORM ARREST	RED	OPTAGE	ACCOUNTS CHAIN LINE AND ASSESSED.

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DEPARTMENT OF PUT	LIC SAFETY AND CORRECTION	NS
NOTICE TO WITHDRAW BLOOD		
In accordance with Louisiana law, the following person		
other means of conveyance while under the influence of	in alcoholic beverage or any other abus	sed or illegal controlled dangerous
substance.  Person Tested: Boy 11's 1 od.	11 Say M Page	M/ DOR 2-7-90
(Last) (First)	(M.I.)	VV. DOB 2 7-707
Person Tested: Bowlin (First)  29651 Joe Albin Rd  (Address)	Livingston L	4 70454 9208819
(Address)	(City) (State	e) (Zip) (OLN No./State)
Pursuant to the authority of L.R.S. 32:661 A(2), a test for	intoxication shall be administered at t	he direction of a law enforcement officer.
Therefore, a person qualified to withdraw blood is comp		
person because at least one of the following conditions e	rist:	
The above named person has consented to the w	hdrawing of blood to determine the ale	coholic content and/or the presence of any
abused or controlled dangerous substance in the	-	•
The above named person has been involved in a	notor vehicle crash where a traffic fata	lity has occurred or a person has been
seriously injured. Therefore, in accordance with		
of a law enforcement officer.		
The above named person is dead, unconscious, or		
withdrawing of blood to determine the alcoholic	content and/or presence of any abused	or controlled dangerous substances in the
blood.		
The blood sample shall be drawn by a qualified person i		
utilizing a blood collection kit authorized by the Departr		It shall be immediately returned to said
officer in order to protect the integrity of the test and pro	serve the chain of evidence.	•
L.R.S. 32:664 (C) exempts qualified persons, firms, corp	orations, or hospitals from civil or crin	ninal liability for withdrawing blood at the
direction of a law enforcement officer for the purposes of		
	determining the alcoholic content and	for the presence of any abused of controlled
dangerous substances in a person's blood.	!	
dangerous substances in a person's blood. 9-6-12	!	
9-6-12 (Date) (Time)	Law Enforcement Officer	Brignac FS/
9-6-12	Chief H. D. Law Enforcement Officer	Prignac FS/ (Print)
9-6-12 (Date) (Time)	Chief H. D.  Law Enforcement Officer  Signature of Law Enforce	Prignac FS / (Print)  ment Officer
Qualified Person Taking Blood	Law Enforcement Officer  Signature of Law Enforce  57. E1.7.4 beth	Prignac FS / (Print) ment Officer
Qualified Person Taking Blood Signature of Qualified Person	Law Enforcement Officer  Signature of Law Enforce  5+ Exz 6+4  Medical Institution	(Print)  ment Officer  s Hospital
Qualified Person  Signature of Qualified Person  VOLUNTARY SUE	Law Enforcement Officer  Signature of Law Enforce  57. E1.7.4 beth	(Print)  ment Officer  s Hospital
Qualified Person Taking Blood  Signature of Qualified Person  VOLUNTARY SUE	Law Enforcement Officer  Signature of Law Enforce  5+ ENZ & beth  Medical Institution  MISSION TO THE CHEMICA	(Print)  ment Officer  s Hospital
Qualified Person  Signature of Qualified Person  VOLUNTARY SUE  BLOOD BREATH QURINE	Chief H. E.  Law Enforcement Officer  Signature of Law Enforce  5+ E 2 6+4  Medical Institution  MISSION TO THE CHEMICA	(Print)  ment Officer  s Hospital
Qualified Person  Signature of Qualified Person  VOLUNTARY SUE  BLOOD BREATH QURINE	Chief H. E.  Law Enforcement Officer  Signature of Law Enforce  5+ E 2 6+4  Medical Institution  MISSION TO THE CHEMICA	Prignac FS / (Print)  ment Officer  S Hospital  AL TEST  DOB 2-7-90
Qualified Person  Signature of Qualified Person  VOLUNTARY SUE  BLOOD BREATH QURINE	Chief H. E.  Law Enforcement Officer  Signature of Law Enforce  5+ E 2 6+4  Medical Institution  MISSION TO THE CHEMICA	Prignac FS / (Print)  ment Officer  S Hospital  AL TEST  E W DOB 2-7-90  725-7 00 9208819
Qualified Person Taking Blood  Signature of Qualified Person  VOLUNTARY SUE  BLOOD BREATH SURINE  Person Tested: Powlin Column  (Last) (First)  Address)	Law Enforcement Officer  Signature of Law Enforce  5+ E Z & beth  Medical Institution  MISSION TO THE CHEMICA  MISSION TO THE CHEMICA  (M.I.)  (City) (State)	(Print)  ment Officer  ** Hospital  AL TEST  e
Qualified Person Taking Blood  Signature of Qualified Person  VOLUNTARY SUE  Person Tested: Powlin (First)  (Last) (First)  Address)  The above named person has been involved in a motor of the control	Law Enforcement Officer  Signature of Law Enforce  5+ E Z & beth  Medical Institution  MISSION TO THE CHEMICA  (M.I.)  (City)  (City)  (State)  Chief  (State)	(Print)  ment Officer  s Hospital  AL TEST  e W DOB 2-7-90  72-7 00 9208819;  (Zip) (OLN No/State)  occurred or a person has been seriously
Qualified Person Taking Blood  Signature of Qualified Person  VOLUNTARY SUE  BLOOD BREATH QURINE  Person Tested: Dowling (First)  (Last) (First)  (Address)  The above named person has been involved in a motor vinjured and hereby submits to the chemical test of his/he controlled dangerous substance in the blood, breath, and	Law Enforcement Officer  Signature of Law Enforce  St. Z. 6eth  Medical Institution  MISSION TO THE CHEMICA  Medical Institution  (City)  (City)  (State)  Chief fatality has rown free will to determine the alcoholor urine. The above named person un	(Print)  ment Officer  is Hospital  AL TEST  e DOB 2-7-90  (Zip) (OLN No./State)  occurred or a person has been seriously lic content or the presence of any abused or derstands that he/she is not under arrest
Qualified Person Taking Blood  Signature of Qualified Person  VOLUNTARY SUE  BLOOD BREATH QURINE  Person Tested: Down (First)  (Last) (First)  (Address)  The above named person has been involved in a motor vinjured and hereby submits to the chemical test of his/he controlled dangerous substance in the blood, breath, and nor suspected of operating a motor vehicle, watercraft, or	Law Enforcement Officer  Signature of Law Enforce  St. Z. 6eth  Medical Institution  MISSION TO THE CHEMICA  Medical Institution  MISSION TO THE CHEMICA  (M.I.)  City)  (City)  (State)  Chicle crash where a traffic fatality has own free will to determine the alcoholor urine. The above named person unother means of conveyance while under the co	(Print)  ment Officer  ** Hospital  AL TEST  e DOB 2-7-90  (Zip) (OLN No/State)  occurred or a person has been seriously lic content or the presence of any abused or derstands that he/she is not under arrest ter the influence of drugs or alcohol. The
Qualified Person Taking Blood  Signature of Qualified Person  VOLUNTARY SUE  BLOOD BREATH QURINE  Person Tested: Powling (First)  (Last) (First)  (Address)  The above named person has been involved in a motor vinjured and hereby submits to the chemical test of his/he controlled dangerous substance in the blood, breath, and nor suspected of operating a motor vehicle, watercraft, above named person fully understands that in the event	Law Enforcement Officer  Signature of Law Enforce  5+ E Z 4 beth  Medical Institution  MISSION TO THE CHEMICA  MISSION TO THE CHEMICA  (City)  City)  City)  City)  City)  City)  Conveyance while under test results indicate a blood alcohol	(Print)  ment Officer  ** Hospital  AL TEST  e DOB 2-7-90  (Zip) (OLN No/State)  occurred or a person has been seriously lic content or the presence of any abused or derstands that he/she is not under arrest ter the influence of drugs or alcohol. The
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LOUISIA DEPARTMENT OF PUBLIC SAFETY AND COPPECTIONS
OFFICE OF STATE POLICE
ARRESTEE'S RIGHTS FORM
RIGHTS RELATING TO THE CHEMICAL TEST FOR INTO: ATION

You are under arrest by a law enforcement officer who has reasonable grounds to believe that you were operating a vehicle or watercraft while intoxicated. The law now requires you to submit to a chemical test or tests to determine the alcoholic content and/or the presence of any abused or illegal controlled dangerous substance

		breath, urin					mine u	ie alconolic	conten	t and/or t	ne presen	ice or a	ny abuse	a or mega	ai controli	ed dangerous	substance
						ved in the	traffic	stop, deten	tion, in	vestigation							· ,
		hief A	1. B.	-ianac	c /	ES 1		FSPD	۱	of	M.	Du	rkin	PV3	Poit	Vincer	1
	Nam	ic //	44.	7 1	Badge	2450		Agency SP-A	_	Name				Badge #		Agency	
	Not	oc H.	11/6	(4471	Badge	2930		Agency		Name				Badge #		Agency	
Α. '	These are t	he CONSEC	UENC	ES OF RE			мгт т		EMICA		YOU H	AVET	HE RIGI		EFUSE TH	IE CHEMIC	AL TEST
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	1.	Your driving efusal withi	; privile; n a five	ges shall b vear perio	pe suspe: od.	nded for a	репос	of one year	it this i	s your fur	st refusal,	or a pe	riod of tv	vo years i	i this is you	ur second or s	subsequent
	2. 1	f you have	refused	to submi	it to the	chemical	test or	two previo	ous and	separate	occasion	ıs, a rei	fusal to t	this test is	a crime	inder the pro	ovisions of
	3. 1	R.S.14:98.2 Evidence of	and the vour ref	penalties a usal to sul	are the s bmit to t	ame as the the chemic	e penali cal test	ties for first of will be used	convict lagains	ion of dri tyou in d	ving while	le intox	icated.				
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B 7	There are	the CONSE	OUEN	CES IE 7	THE TE	ST 15 C	ומער	CTED and	the re-	sults ind	cated a l	blood a	alcohol o	concentra	tion of O	B percent or	above by
	ght of alcoh	ol in the blo	od.												1011 01 .01	o percent or	20076 09
Į. `	The res	ults of the te	st will b	e used ag	ainst yo	u at your t	rial and	d will be con	clusive	evidence	that you	are int	oxicated	at ar an	a waar if	his is none	second or
2.	subsequ	ient submiss	sion to a	test withi	in the pa	st five vea	ars.									his is your	
3.	If you	submit to t	he chen	nical test	and the	e results i	ndicate	a blood a	lcohol	concentra	tion of .	.15 per	cent or	above by	weight o	f alcohol in	the blood
4.	you w	ill be requ	ired to	scrve a	it least	48 hours	S Of 1 eate a h	he senteno Jood alcoho	e impo	ntration	of .20 per	convic	tion and	ur driver	irs on the	e second c shall be susp	ended two
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		by weight o								·							
								d as evidenc days if this i					cion to a	tect			
						PERATU	NG A	COMMER	CIAL	MOTOR	VEHIC	LE OR	HAVE	A CLAS	SA, B, OF	₹C	
	n addition	RCIAL D	applica	CS LICE	EINSE ns. these	are the C	ONSE	QUENCES	IF YOU	WERE	OPERAT	TING A	COMM	1ERCIAL	OR NON	-	
	COMMER	CIAL VEHI	CLE.								1						
	1. 3	our Comm	ercial [	Driver's L	license :	shall be d	lisquali	fied for 1 y	year if,	for the f	irst time	reporte	ed on yo	our drivin	g record,	you refuse t lood while o	he test, or
	C	ommercial i	notor vi	ehicle or (	08 perce	ent or abov	e while	e operating a	a non-ce	ommercia	al vehicle						
	2. [	f the vehic	e vou	were ope	rating v	vas transi	porting	anv hazar	dous n	naterials	as define	ed by I	law, you	ır Comm	ercial Dri	ver's licens	e shall be
					refuse th	e test or su	ıbmit t	o the test, an	id the re	sults indi	date a blo	od alçe	ohol conc	entration	of ,04 per	ent or above	by weight
	3. 1	f alcohol in Your Comm	ercial I	xu. Drivers Li	icense s	hall be di	souali	fied for life	if for	the secon	nd time r	eported	d on you	or driving	record if	you were o	perating a
		ommercial r	notor ve	hicle you	refuse t	he test, or	submit	to the test a	nd the r	esults ind	licate a blo	ood alc	ohol con	centration	of .04 per	cent or above	by weight
	4 7	f alcohol i	n the b	lood whi	ile oper	ating a co	omme:	rcial motor	vehic	le or .08	percent	or abo	ove while	le operat	ing a non	-commercia al motor vel	l vehicle.
	4. 1	r you reruse he oublic his	to suoi ghways	of this sta	approve ate while	e under th	e influ	ence of eith	er alcol	holic bev	erages or	any ab	oused sub	ostance of	controlle	d dangerous	substance
	а	s set forth in	i R.S. 4	0.964, or	vou are	convicted	d of dr	iving under	the inf	luence of	either al	coholic	c bevera	ges or any	y abused s	ubstance or	controlled
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	1. Y	ou have the	right to	remain s	silent: aı	nything yo	ou say	may be use	d agair	nst you ir	a court	of law.			,		
	2. Y	ou have the	right n	ot to incri	iminate	yourself;	and yo	ou have the e right to co	right to	stop ans	wering a	answei	stions al	t any time	e you desi: s.	re.	
	4. Y	ou have the	right to	have an	attorne	y present	during	any questic	oning o	r the givi	ing of any	y stater	ment.	question			
	5. If	you cannot	afford	an attorne	ey, the c	ourt will	appoin	t an attorne	y to re	present y	ou.	m nn	Y377373.0		CE MILL	erii n	E
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www.lsp.org

# Louisiana State Police **Crime Laboratory**

Scientific Analysis Report

Lab Case #: SP-010900-12 Agency Case #: 12-09-39277

Case Officer: Harry Brignac Parish of Offense: Livingston State Computer Number:

### **AGENCY**

French Settlement Police Department 15540 La Hwy 16

French Settlement, LA 70733

21st Judicial District, Parish of Livingston Office of the District Attorney P.O. Drawer 299 Livingston, LA 70754

INDIVIDUALS

Cody M. Bowlin - Suspect Driver's License #: 9208819(LA)

Marie Contract

ANALYSIS REQUESTED Toxicology Drug Screen (General). This examination was completed on 10/31/2012.

### **EVIDENCE SUBMITTED**

On 9/13/2012 at 2:55 PM, Crime Lab Technician Marja Porteous received the following evidence from the French Settlement Police Department via Harry Brignac:

Evidence Submission 0001:

One sealed blood alcohol kit containing two (2) tubes of blood and one (1) container of

urine.

## **RESULTS AND CONCLUSIONS**

BA Kit Number: 505438

Oxycodone was detected in the specimen of blood labeled Cody M. Bowlin.

A marijuana metabolite was indicated by presumptive screening in the specimen of urine labeled Cody M. Bowlin.

\*A current list of substances for which this blood specimen was screened is available upon request.

SIGNATURE

Analysis Performed By:

Seil Meade

Leah Meade

Forensic Scientist

Report ID: SP-010900-12-0001



376 East Airport Avenue, Baton Rouge, Louislana 70806 Phone (225) 925-6216 Fax (225) 925-6217

An ASCLD/LAB-International Accredited Laboratory

Analysts Initials: Page 1 of 1

STATE OF LOUISIANA UNIFORM MOTOR VEHICLE TRAFFIC CHAST	SH REPORT COMPUTER NUMBER PAGE #
CONF CARGO BODY TYPE  X see page 1 for Selections  YEAR  MAKE  MODEL	# 000RS # AXLES # TIRES
VIN 367PAVE3486213198 VEHICLE A &	YES REMOVED TT'S WROOKE BY
YEAR STATE NUMBER TYPE	TEGWR/GCWR4/SU2 2 PREASON TOWED A VEHICLE DAMAGE A VEHICLE DAMAGE C. INSURANCE VIOLATION Z. OTHER  YEAR STATE NUMBER
TRAILERE	CENSE
COMPLETE INFORMATION BELOW IF THIS WEHICLE IS BEING USED FOR COMMERCE/BUSINESS, & HAS A OF 10,000 LBS. OR HAS A HAZMAT PLACARD, OR 19 A BUS WITH SEATING FOR NINE OR MORE INCLUDING	WWR/GCWR IN EXCESS AND THE DRIVER OF THE DRI
CARRIER NAME  STREET ADDRESS: CARRIER AD	MC/MX (PICCT) #
INTERSTATE CARRIER VIII TRANSPORTING HAZARDOUS MATERIAL VIII CLASS INTERSTATE CARRIER VIII TRANSPORTING HAZARDOUS MATERIAL VIII CLASS	STATE ZIP  HAZ MAT  PLACARDS DISPLAYED V/N RELEASED. V/N
NAME (LAST, FIRST, MI) OF ORIVER PEDESTRIAN	
BOWLIN CODY M	DATE OF 02071990
STREET ADDRESS 2 9651 JOE BISIN RP TELEPHONE 715	754 AAAADMW22C
	TRANSPORTED TO MEDICAL FACILITY  A. YES C. REFUSED AID  B. NO Y, UNINNOWN  PACIFIC ST. E1240214 HOSOILE
PEDESTRIAN ONLY UPPER BODY CLOTHING LIGHT DARK CLOTHING LIGHT DARK	SEX RACE AGE NUMBER CODE
OWNER'S NAME (LAST, FIRST, MI OR COMPANY NAME)	TELEPHONE #
STREET ADDRESS.	STATEZIP
INSURANCE CO. NAME GEICO INS POLICY NUMBER 42,75	556118 EXPIRATION DATE /- 27-13
AGENTS NAME/ADDRESS GEICO WOSTINGTON DC	PHONE \$ -800-841-3000
OCCUPANT'S NAME (LAST, FIRST, MI)	FOR TION TOWN CATED BAD PET BEX RACE AGE BAURY.
STREET ADDRESS TRANSPORTED TO MEDI	
	The same of the sa
CITY STATE ZIP B, NO \	REFUSED AID FACILITY UNKNOWN
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Page 11 of 20.

STATE OF LOUISIANA UNIFORM MOTOR VEHICLE TRAFFIC CRASH REPORT TOTAL NUMBER OF O \*5074106\* TIME (0000) DISTRICT/ZONE TROOP DATE OF CRASH PAGE # A 09012012 1700 LAT. : D; L PARISH CODE 32 LIUINGST 12-09-Quadz CITY OR TOWN CITY CODE Ę [ NW sw ΝĹ FRENGHSET T'S EMENT NE HIGHWAY # MILEPOST ROADWAY NAME HIT & CRASH OCCURRED ON KA 66 A. INTERSTATE
B. U.S. HWY
C. STATE HWY
D. PARISH ROAD
E. CITY STREET
F. OFF BOAD/
PRIVATE PROPE R NOT AT INTERSECTION DISTANCE STREET/HIGHWAY MILES bA1.6 FATAL RR TRAIN FEET 🔲 」sw G. TOLL ROAD ☐ NOT AT INTERSECTION DISTANCE C MILES 🗌 NE X FEET [] sw CONTRIBUTING FACTORS AND CONDITIONS WRITE APPROPRIATE LETTER IN BLOCK ROAD SURFACE ROADWAY TYPE OF ROADWAY ALIGNMENT PRIMARY FACTOR A B A IONE PER COLUMNI A NO ABNORMALITIES
B. SHOULDER ABNORMALITY
C. HOLES
D. DEEP RUTS
E. BUMPS
F. LOOSE SURFACE MATERIAL
G. CONSTRUCTION, REPAIR
H. OVERHEAD CLEARANCE LIMITED
I. CONSTRUCTION NO WARNING
J. PREVIOUS CASSH
K. WATER ON ROADWAY
L. ANIMAL IN ROADWAY
M. OBJECT IN ROADWAY
Z. OTHER CONDITIONS STRAIGHT-LEVEL STRAIGHT-LEVEL ELEVATED CURVE-LEVEL CURVE-LEVEL CURVE-LEVEL ELEVATED ON GRADE-CURVE HILLCREST-STRAIGHT HILLCREST-CURVE DIP, HUMP-STRAIGHT DIP, HUMP-CURVE UNKNOWN OTHER A. ONE-WAY ROAD.

B. TWO-WAY ROAD WITH
NO PHYSICAL SEPARATION
C. TWO-WAY ROAD WITH A
PHYSICAL SEPARATION
D. TWO-WAY ROAD WITH A
PHYSICAL BEARRIER
Y. UNKNOWN
Z. OTHER SECONDARY FACTOR B D A A. VIOLATIONS
B. MOVEMENT PRIOR TO CRASH
C. VISION OBSCUREMENTS
O. CONDITION OF DRIVER
E. VEHICLE CONDITIONS
F. ROAD SURFACE
G. ROADWAY CONDITION
H. LIGHTING
I. WEATHER
J. TRAFFIC CONTROL
K. KIND OF LOCATION
L. CONDITION OF PEDESTRIAN
M. PEDESTRIAN ACTIONS A DRY
B. WET
C. SHOW/SLUSH
O. ICE
E CONTAMINANT
(SAND, MUD,
DIRT, OIL, ETC.)
Y. UNKNOWN A. CONCRETE B. BLACK TOP C. BRICK D. GRAVEL E. DIRT Y. UNKNOWN Z. OTHER **RELATION TO** ACCESS CONTROL ROADWAY WEATHER A KIND OF LOCATION Z A. CLEAR
B. CLOUDY
C. RAIN
D. FOG/SMOKE
E. SLEET/HAIL
F. SNOW
G. SEYERE CROSSWIND A B. SHOULDER
C. MEDIAN
D. BEYOND SHOULDER - LEFT
E. BEYOND SHOULDER - RIGHT
F. BEYOND RIGHT OF WAY
G. GORE
Y. UNKNOWN
Z. OTHER LIGHTING NO CONTROL
(UNLIMITED ACCESS TO
ROADWAY)
PARTIAL CONTROL
LIMITED ACCESS TO ROADWAY
FULL CONTROL
(ONLY RAMP ENTRANCE & EXIT)
UNKNOWN
OTHER C A A. DAYLIGHT
B. DARK - NO STREET
LIGHTS
C. DARK - CONTINUOUS STREET
LIGHT D. DARK - STREET LIGHT AT
INTERSECTION ONLY
E. DUSK
F. DAWN
Y. UNKNOWN
Z. OTHER DAYLIGHT A. MANUFACTURING OR INDUSTRIAL
B. BUSINESS CONTINUOUS
C. BUSINESS, MIXED RESIDENTIAL
D. RESIDENTIAL DISTRICT
E. RESIDENTIAL SCATTERED
F. SCHOOL OR PLAYGROUND
G. OPEN COUNTRY
Z. OTHER H. BLOWING SAND, SOIL, Y. Z. DIRT, SNOW Y. UNKNOWN Z. OTHER PARTY OF THE WEHICLE CONFIGURATION TO THE PARTY OF THE PA CARGO BODY, TYPE A D G الله ال OFFEE D T M T 🚜 A SEE GENERA J PAN A, B, C, OR S WITH TRAILER BUS W/SEATS FOR 9 15 OCCUPANTS SINGLE UNIT TRACTOR TRUCK W/ 3 SEMI-TRAILER OFF-ROAD VEHICLE BUS FLATBED PASSENGER CAR AUTO TRANSPORTER HOPPER EQUIPMENT R LEUCK LOCUBLE H K B E des V 3 -23 K === B Hay Herm 77 BUS W/SEATS FOR 16 OR MORE OCC. EMERGENCY LT. TRUCK (P.U., ETC.) LOG TRUCK/ TRAILER DUMP TRUCK MOTORCYCLE MOTOR HOME VAN/ENCLOSE POLE TRAILER VEHICLE IN C - CO CO CO X C PF **5**4 S Z SINGLE HAD SCHOOL BUS CARGO TANK OTHER TRUCK W/ 2 OTHER AXLES TIME CALLED DEPARTED SCENE ARRIVED HOSPITAL TIME CALLED ARRIVED SCENE ARRIVED SCENE EMERGENCY AMBULANCE 17 RESCUE UNIT 1725 1800 711 AMBULANCE Trouch Sellwar Fine ACADAIN FIRE SERVICE DEPARTMENT TIME OF ARRIVAL TIME ALL LANES OPENED NAME OF AGENCY TIME OF NOTIFICATION AGENCY Chief HARLY BRIGHAC 1711 1725 1823

INVESTIGATING POLICE AGENCY

ChicF HATTE BRIGHT

B

A. STATE C. PARISH B. CITY 2. OTHER

Sun Busmin

09/00

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SUPERVISOR'S INITIALS OR BADGE#

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BADGE 1

DATE REPORT COMPLETED

# WRITE F' MLY - YOU ARE MAKING - COPIES

LIVINGSTON PARISH SHERIFF'S OFFICE INITIAL ARREST REPORT

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		PRI	SONER E	BOOKIN	G AND	PRO	PERT	YRE	CORD	•				
ARRESTEE						•		i,						
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Occupation	ماريدوند	Hemolina	Employer -	VAME, Add	ress, Pho	ne No.						39	291	
Alias Name	_		M	arital Status		Car A	Vo.	- 3		or's Licen		Lic.	St. Ye	ear
Marks - Scars	Tattoos - Etc.		М	ental Cond	-				Alcohol A	Addiction		Type .	Detox	
If Injured, Des	cribe by Whom an	nd if Treated; If Int	, , –		No hat Degre	e Un		Ves Gare	.∐ No Nature &		n Medicat	ion Type of	Medicat	
Veh	icle Involved	Veh. Yr.   Mak	e Model	Time	Cotor				Duck	, II	Yes 🗆	No Zoosition		
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I. You have the right to remain silent!

2. Anything you say may be used against you in a Court of Law.

3. You have the right to have an attorney present during questioning.

4. You may waive; your right to have an attorney present during questioning; however, you may istor answering questions at any time and ask that an attorney be present, or ask the advice of an attorney.

5. If you cannot afford; an attorney; one will be appointed to you by, the Court.

6. You have the right to request a preliminary examination, if you are charged with a felony.

7. You have the right to one telephone call, after you his ecompleted the Booking Procedure.

1. AUTHORIZE THE CRIMINAL SHERIFF'S OFFICE TO CENSOR ALL: MAIL:

THIS WILL AUTHORIZE THE RELEASE OF ANY AND ALL MEDICAL RECORDS I MAY HAVE ACCUMULATED IN LIVINGSTON PARISH PRISON MEDICAL DEPARTMENT TO THE CRIMINAL SHERIFF'S OFFICE OF LIVINGSTON PARISH.

I CERTIFY THAT I HAVE READ AND FULLY UNDERSTAND THE ABOVE INSTRUCTIONS AND MY RIGHTS.

EX-OFFICIO NOTARY PUBLIC NOTARY **DETERMINATION OF PROBABLE CAUSE** 

BASED ON THE AFFIDAVIT AND ANY OTHER WRITTEN EVIDENCE PRESENTED TO ME, I HEREBY FIND THAT THERE [] IS 12 IS NOT PROBABLE CAUSE TO CONTINUE TO HOLD THIS PERSON.

PAM □PM

LPSO - 07/31.02 Rev 04/12/11 - 400

JUDGE, 2187 JUDICIAL DISTRICT COURT

Reference: Unknown
Msg ID:
Msg Key: C5
Date/Time: 20121003091747
Ent Agy:
Requester:

Control : LEMS
Control : CCHC Response

TXT: MSG 3972003010 SOLIVIO2 006AEC CCHC 02951E 20121003 09:17:48 LA032013A. CTL/ATN/

C5.LA032013A..3972003010.. 10/03/2012 09:19:16 REQUESTED BY: WANDA FALCON FOR COURT

\*FOR USE BY AUTHORIZED CRIMINAL JUSTICE AGENCIES ONLY\*
(FINGERPRINTS ARE NECESSARY FOR A POSITIVE ID)

	· ·						
INVESTIGATIVE REPORT			CONFIDE	NTIAL 1	RECORDS		
CRIMINAL RECORD OF: BOWLIN, CODY M STATE ID: 0002672822 BIRTH DATE: ( RACE: W HEIGHT: 6' 1" SEX: M WEIGHT; 180 OLS/OLN: LA 9208819	02/07/1990 HAIR: BLN EYES: HAZ	PLACE	: LA	FBI: DOC: DNA ON	248984DDO N FILE:NO MSO		
BOWLIN, CODY M BOWLIN, CODY M BOWLIN, CODY M	SSN		OLS/OLN LA9208819 LA9208819 LA00920881	19	ID THEFT		
SUMMARY							
BOWLIN, CODY M BOWLIN, CODY M BOWLIN, CODY M BOWLIN, CODY M  S U M M A R Y DATE AGENCY 03/15/2010 LIVINGSTON, LA SO 02/05/2011 GONZALES, LA PD 03/02/2011 EAST FELICIANA, LA SO 09/06/2012 LIVINGSTON, LA SO	TEXT ARRESTED, ARRESTED, ARRESTED, ARRESTED,	ATN: ATN: ATN: ATN:	32001100 LBOIB111 190011100 320011205	1429 3510 0262 5141			
ARREST DATE: 03/15/2010 AGENCY: LIVINGSTON, LA SO (LA0320000) 320011001429 NAME: BOWLIN, CODY M	LID: AFIS ATN:						
CHARGE 1 CCRP 202 SPEEDING PASSING ON LEFT		l		119068			
ARREST DATE: 02/05/2011 AGENCY: GONZALES, LA PD (LA0030200) LB01B1113510 NAME: BOWLIN, CODY M			LID: 01 AFIS AT		)		
CHARGE 1 R.S. 14:67.10(MISD) THEFT OF GOODS	•		COUNTS				
ARREST DATE: 03/02/2011 AGENCY: EAST FELICIANA, LA SO (LA0190 190011100262 NAME: BOWLIN, CODY M	000)		LID: AFIS AT	เท:			
CHARGE 1 R.S. 32:415 OPERATING VEH. WITH SU	SPENDED LICENSE	I		ES			
ARREST DATE: 09/06/2012 AGENCY: LIVINGSTON, LA SO (LA0320000) 320011205141 NAME: BOWLIN, CODY M			LID: AFIS AT	: N:			
CHARGE 1 (AGENCY: FRENCH SETTLEMENT, R.S. 14:98 (MISD) OPERATING A VEHIC	LA PD) LE WHILE INTOXI	CATE	COUNTS	1			

COUNTS 1

THE RESPONSE TO YOUR REQUEST FOR CRIMINAL HISTORY RECORD CHECK IS BASED ON A REVIEW OF THE STATE OF LOUISIANA'S CRIMINAL HISTORY RECORDS DATABASE ONLY. THIS DOES NOT PRECLUDE THE EXISTENCE OF A RECORD IN A LOCAL AGENCY, ANOTHER STATE, OR THE FBI CJIS DIVISION.

TRACKING: 10/03/2012, 09:17:47

- MKE: C5

- Source: LEMS
- ISN: 03LG000WPU
- REF: UNKNOWN



Louisiana Justice Network - Desktop

# FEEDBACK HELP

Logged In: Michael Leavell Logout Inbox(30 total, 30 new) New Search Persons

Information on Cody Matthew Bowlin Extended Information

Printer Friendly Record

# - Hide Normal Messages

CODY MATTHEW BOWLIN - LA-DMV: RES/0,0,00 CODY MATTHEW BOWLIN - LA-DMV: ID only. Not licensed to drive. CODY MATTHEW BOWLIN - MS-CCH: CR.MSIII0000 00:56 09/07/2012 00200 00:56 09/07/2012 00263 LA03200Z9 \*079D04F580 HDR/2L01079D04F5802QR ATN/MICHAEL LEAVELL\*FY9 Data As Of 2012-09-07 This rap sheet was produced in response to the following request: State Id Number MS05893682 (MS) 079D04F580 Request Id Purpose Code C Attention MICHAEL LEAVELL\*FY9 The information in this rap sheet is subject to the following caveats: This record contains information contained in the criminal history file of Mississippi Department of Public Safety on the date it was prepared; if information is needed later, a new inquiry should be made. This information is based on fingerprint identification. (MS) If the request for this information did not include fingerprints, this record may not describe the subject of the inquiry. (MS) There may be further information concerning this subject in local files. (MS) Use of this information is subject to state and federal law and is limited to the purpose stated in the inquiry. Misuse is subject to criminal and civil penalty. (MS) Offenses are marked as felonies, misdemeanors or violations in accordance with Mississippi law. (MS) Data related to the Mississippi Sex Offender Registry is provided in the "Notice" field in this Criminal History Record. (MS) \*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\* IDENTIFICATION \*\*\*\*\*

https://icjis.ebrso.org/icjis/dosearch?rk=0{P&providertimeout=90&region=LOCAL\_... 9/7/2012

Subject Name(s) BOWLIN, CODY Subject Description FBI Number State Id Number 248984DD0 MS05893682 (MS) Sex Race Male White Weight Date of Birth Height 6'00" 1990-02-07 180 Fingerprint Pattern Hair Color Eye Color WUWURSWUWUWWWULSWUWU (IAFIS) Brown Hazel Place of Birth Citizenship Unknown Louisiana Photo Images Available Image Mugshot Capture Date 2009-03-13 (No Photo Image Transmitted ) Caution Information Notice There may be further information concerning this subject at the Mississinni Sex Offender " Registry public web site at http://state.sor.dps.ms.gov/ 9107798199 Tracking Number Earliest Event Date 2009-03-13 Incident Date 2009-03-13 Arrest Date 2009-03-13 Arresting Agency MS0570000 PIKE COUNTY SO Arrest Type Adult Charge Charge Literal Simple Domestic Violence; Simple Domestic 3rd Offense Charge Description Offense date 2009-03-13 Statute Simple Domestic Violence; Simple Domestic 3rd Offense (97-3-7(3) MS) Counts 1 PIKE COUNTY SO; MS0570000; Agency 1601783-2323 Agency Telephone 2109 JESSIE HALL ROAD, MAGNOLIA, MS 39652 Address \* END OF RECORD \* \* \*

4 Arrest(s)

Incident Date Agency

Role Offense(s)

Statute(s) Source

CCRP 202 SPEEDING

https://icjis.ebrso.org/icjis/dosearch?rk=0|P&providertimeout=90&region=LOCAL\_... 9/7/2012

Notes:

Not Available	3/15/2010	LIVINGSTON, I SO (LA032000		WIND	WO		FT N9119068			LA- CCH
<u>Not</u> Available	2/5/2011	GONZALES, LA PD (LA0030200		THEF	TOF	GOOD	s	14:67.1	IOM	<u>LA-</u> CCH
Not Available	3/2/2011	EAST FELICIANA, LA SO (LA0190000		SUSF	END	NG VEH ED LIC FFENSE	-	32:415		<u>LA-</u> CCH
<u>Not</u> <u>Available</u>	9/6/2012	LIVINGSTON, L SO (LA0320000		WHIL DRIV	E INT	NG A VE TOXICA DN ROA PR TRAI	TED; \DWAY	14:98N 32:79	1;	<u>LA-</u> CCH
5 Alias(es)										
Name		Date of Birth	SSN			DL Sta	ite/Numbe	er	Sou	rce
				6	7	N/A / N	1/A		LA-	CCH
						N/A / N	I/A		LA-	CCH
						N/A / N	√A		111	
						N/A / N			Ш	
Cody M Bo	wlin					N/A / N	1/A		Ш	
3 Contact(s	)		The second secon			ŀ				
Address/Ph	one	Type	Info					Sou	rce	
Address		-	29651 Livings			1		LA-C	OMV	
Address			29800 Livings			1		LA-[	OMV	
Address								MS-	CCH	I
			MS							
Profile on C	ody Matth	new Bowlin So	urce: M	S-CCH	l; LA-	РМV				
Race:	White	Height:	6'01"		Addr	ess:	29651 Jo	oe Albin	Roa	d
Gender:	Male	Weight:	180 lb	S.			Livingsto			
DOB:	2/7/1990	SSN:	426-69	9-7641	Phor	ne:				
Birth Place:	: N/A	Nationality:	N/A							
Hair:		Eyes:	Green		Com	plexion:				
Marks	N/A									
DL State	LA	DL Type/Status	: E / VA	LID		ountry:				
DL #:		DL Issued:	04000	4DD0		l'	2/7/2014			
SID:	N/A	FBI ID:	24898	4000	D.U.	ψ. ID:	N/A			

https://icjis.ebrso.org/icjis/dosearch?rk=0|P&providertimeout=90&region=LOCAL\_...

Profile on Cody Matthew Bowlin Source: MS-CCH; LA-DMV

Race:

White

Height:

6'01"

Address:

29651 Joe Albin Road

Gender:

Male

Weight:

200 lbs.

Livingston, LA 70754

DOB:

2/7/1990

SSN: Nationality:

N/A

ne:

Birth Place: N/A Hair:

Marks

N/A

Eyes:

Green

Complexion:

LA

DL State

DL Type/Status: I / VALID 10269358 DL Issued:

DL Country: US

DL Expires: 10/16/2013

DL #: SID:

N/A

248984DD0 D.O.C. ID: N/A

Notes:

Profile on Cody M Bowlin Source: MS-CCH; LA-CCH

FBI ID:

Race:

White

Height:

6'01"

Address:

Gender:

Male

Weight:

Nationality:

180 lbs.

MS

DOB:

2/7/1990

SSN:

Phone:

Birth Place: LA Hair:

Blond or Strawberry Eyes:

Hazei

Complexion:

Marks

DL State

N/A LA

DL Issued:

DL Type/Status: N/A / unknown DL Country:

DL #: SID:

LA02672822

9208819

FBI ID:

248984DD0

DL Expires:

D.O.C. ID: N/A

Notes:

Profile on Cody Bowlin Source: III; MS-CCH

Race:

White

Height:

6'00"

Address:

Gender:

Male

Weight:

180 lbs.

MS

DOB:

2/7/1990

SSN:

Eyes:

hone:

Birth Place: LOUISIANA Nationality:

N/A Hazel

Complexion:

Hair: Marks

N/A N/A

DL Type/Status: N/A / N/A

DL Country:

DL #: SID:

DL State

N/A

Brown

DL Issued: LA2672822 FBI ID:

DL Expires: 248984DD0 D.Q.C. ID: N/A

Notes:

https://icjis.ebrso.org/icjis/dosearch?rk=0|P&providertimeout=90&region=LOCAL\_...

# TWENTY-FIRST JUDICIAL DISTRICT COURT FOR THE PARISH OF LIVINGSTON

STATE OF LOUISIANA

Peever-H M 691171

12/12/12

FILED:

DEPUTY CLERK:

NUMBER

STATE OF LOUISIANA

**VERSUS** 

CODY MATTHEW BOWLIN W/M DOB: 02/07/1990 29651 JOE ALBIN ROAD LIVINGSTON, LA 70754

SURFTY

D.L.# 009208819 LA Alcohol Test Reading: .%

SCOTT M PERRILLOUX, DISTRICT ATTORNEY for the TWENTY-FIRST JUDICIAL DISTRICT, PARISH OF LIVINGSTON, STATE OF LOUISIANA **CHARGES THAT** 

the person named and identified above, in the Parish of LIVINGSTON and within the jurisdiction of the 21st Judicial District, Parish of LIVINGSTON, State of Louisiana and contrary to the form of the Statutes of the State of Louisiana in such cases made and provided, and against the peace and dignity of the same, did violate:

R.S. 14:98.A.(1)(C) OPERATING A VEHICLE WHILE UNDER THE INFLUENCE OF A

Cody Matthew Bowlin, on or about September 6, 2012, did dperate any motor vehicle, aircraft, watercraft, vessel, or other means of conveyance while under the influence of a controlled dangerous substance.

## COUNT 2

R.S. 32:71.B. DRIVING LEFT OF CENTER

Cody Matthew Bowlin, on or about September 6, 2012, did operate a motor vehicle on a public highway left of the center line of said highway.

## COUNT 3

R.S. 32:58 CARELESS OPERATION OF A MOTOR VEHICLE

Cody Matthew Bowlin, on or about September 6, 2012, while operating a vehicle on the public roads of this state, did fail to drive in a careful and prudent manner so as not to endanger the life, limb or property of any person,

> SCOTT M PERRILLOUX DISTRICT ATTORNEY 21st JUDICIAL DISTRICT STATE OF LOUISIANA

BY: ASSISTANT DISTRICT ATTORNEY

otherine Yum

21st JUDIC!AL DISTRICT PARISH OF LIVINGSTON, LA A true copy of the original

this

# SHERIFF'S OFFICE

Parish of Livingston Livingston, Louisiana

STATE OF LOUISIANA VS.

BOWLIN, CODY	
You are hereby ordered to be and appear in Court at the Li	vingston Parish Courthouse at 9:00 A.M. on
the <u>12<sup>TH</sup></u> day of <u>DECEMBER</u> . 20 <u>12</u> . In	regard to the above-captioned matter.
Notice Please Read:	
"WE FURTHER UNDERTAKE THAT YOU MAY LEAVE TAND BE PRESENT IN COURT ON THE DATE GIVEN YOU ADVISE YOUR LEAVING, THAT SAID PRINCIPAL WILL PROCEEDINGS IN THE TWENTY-FIRST JUDICIAL DISTRICH HOLD HIMSELF AMENDABLE TO THE ORDER AND CONVICTED, WILL APPEAR FOR PRONOUNCEMENT OF THE SENTENCE INCLUDES A JAIL TERM FOR PAYMENT WILL REAPPEAR FOR SERVING OF SENTENCE OR PAYMENT PLACE ORDERED BY THE COURT, AND THAT IF HE IS CONDITIONS, WE OR I WILL PAY UNTO THE STATE OF LOUISIANA THE SUM OF \$ \$1,208.00	J. YOU DO NOT NEED TO CALL AND APPEAR AT ALL STAGES OF THE CT COURT, AND WILL AT ALL TIMES PROCESS OF THE COURT AND, IF HE VERDICT AND SENTENCE, AND IF HAS BEEN GRANTED, THE PRINCIPAL NT OF FINE ON THE DATE, TIME AND
Fail not under penalty of the Law, or forfeiture of your bond.	
PRINCIPAL  JASO	N ARD, ivingston Parish
THE DISTRICT ATTORNEY'S OFFICE SHOULD HAVE YOU CASE IN THEIR OFFICE WITHIN SIX (6) WEEKS OF YOUR ARREST. PHONE: (225)686-3070	
MUST ENPOLL AND COMPLET	E HOME OF GRACE
90 DAY PROGRAM IN MISSI	SSIPPI AND FOLLOW
THEIR RECOMENDATIONS. TO	TIS IS TO BE
DONE IMMEDIATELY UPON RI	ELEASE.

\* PER JUDGE WAGUES PACK \*