



DISTRICT COURT OF MARYLAND FOR HOWARD COUNTY
3451 COURTHOUSE DRIVE
ELLCOTT CITY, MD 21043-4377
TELEPHONE NUMBER: (410) 480-7700

1001

To: WAGONER, CONNIE SUE
15802 BARCELONA COURT
WOODBIDGE, VA 22191

STATE OF MARYLAND VS. WAGONER, CONNIE SUE

Date: 09/29/14

NOTIFICATION OF RIGHT TO COUNSEL

You have been charged with the violations listed on the back of this notice.
A period of incarceration may be imposed by the judge if you are convicted.

It is important that you be represented by a lawyer. If you want a lawyer but do not have the money to hire one, the Office of the Public Defender may provide a lawyer for you. Contact the Public Defender's office immediately to apply for representation.

You will be notified of a trial date. If you do not have a lawyer on the trial date, the court could determine that you have waived counsel and proceed with trial.




Visit our website for directions and information about procedures.
Our web address is www.mdcourts.gov/district

To request a foreign language interpreter or a reasonable accommodation under the Americans with Disabilities Act, please contact the court immediately.

For further information, call the District Court Interactive Voice Response System (IVR) at 1-800-492-2656

TTY users call Maryland RELAY: 711

Possession and use of cell phones and other electronic devices may be limited or prohibited in designated areas of the court facility.

CITATION NUMBER	CHARGE	FINE/MUST APPEAR
 TA21902 A2 02JB0B1R ALCOHOL PER SE	DRIVING UNDER THE INFLUENCE OF	MUST APPEAR
 TA21902 B1 02JC0B1R HOL	DRIVING WHILE IMPAIRED BY ALCO	MUST APPEAR
 TA21902 A1 02J90B1R E INFLUENCE OF ALCOHOL	DRIVING VEHICLE WHILE UNDER TH	MUST APPEAR

Officer's Certification and Order of Suspension Please read and complete both sides.
(as provided in § 16-205.1 of the Maryland Vehicle Law)

DR-15A 08/12

(FOR OFFICIAL USE ONLY)

OCCURRENCE (MONTH/DAY/YEAR/TIME) <u>9/27/14 23:00</u> <input type="checkbox"/> A.M. <input type="checkbox"/> P.M.		COMMERCIAL LICENSE? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO COMMERCIAL VEHICLE? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO HAZARDOUS MATERIAL? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	CONTROL NUMBER AJ S26854
LOCATION (SPECIFY COUNTY OR BALTO. CITY AND ADDRESS):			
DRIVER'S NAME: LAST <u>WAGNER</u>		FIRST <u>CONNIE</u>	MIDDLE <u>SUE</u>
RESIDENCE STREET ADDRESS <u>15802 BARCELONA</u>		CITY <u>COURT WOOD</u>	STATE <u>VA</u> COUNTY <u>BRIDGE</u> ZIP CODE <u>22191-6224</u>
DRIVER'S LICENSE NUMBER <u>T61-32-0069</u>		STATE <u>VA</u> ISSUE DATE <u>07/28/12</u>	SP. CODE <u></u> RESTRICTION <u>C</u> ENDORSEMENT <u></u>
LICENSE CLASS <u>None</u>	LICENSE TYPE <u></u>	HGT. <u>5'10</u> WGT. <u>160</u>	SEX <u>F</u> RACE <u>Blk</u> BIRTH MONTH/DAY/YEAR <u></u> VEHICLE TAG NO. <u></u> STATE <u></u>

ORDER OF SUSPENSION - ISSUE DATE: (MONTH / DATE / YEAR): 9/27/12

Pursuant to Transportation Article, Section 16-205.1; of the Maryland Vehicle Law, you are hereby notified that your Maryland Driver's License/Privilege will be suspended effective on the **Forty-sixth (46)** day from the above "Issue Date" because:

- ☐ You refused to take a test to determine alcohol concentration when requested by the Police Officer.
☒ You submitted to a test indicating an alcohol concentration of 0.08 but less than .15
☐ You submitted to a test indicating an alcohol concentration of .15 or more
☐ You refused to take a blood test for drug or controlled dangerous substance content when requested by a Drug Recognition Expert.
 (See attached Drug Recognition Expert's Certification Form)

SURRENDER OF DRIVER'S LICENSE

By law, the officer is required to take your Maryland driver's license and if valid, issue a temporary license to allow you to continue driving 45 days from the above "Issue Date". ☐ License was confiscated. ☒ License was not confiscated because:

DRIVER'S CERTIFIED STATEMENT

I hereby certify under penalty of perjury, that I do not possess a Maryland driver's license to surrender to the police officer and should the license come into my possession I will immediately forward it to the Motor Vehicle Administration.

SIGNATURE _____ DATE _____

The "Driver's Copy" of this entire form, signed by you and the police officer, serves as a Valid Temporary license which expires on the 45th day after issuance of the Order of Suspension or upon completion of a hearing, whichever occurs first.

SIGNATURE OF DRIVER (if Temp. Authorized)

Connie Wagner

SIGNATURE OF OFFICER (if Temp. Authorized)

I acknowledge that a temporary license was not authorized.

SIGNATURE OF DRIVER

CERTIFICATION OF POLICE OFFICER

I, the undersigned officer, had reasonable grounds to believe that the driver described and named above had been driving or attempting to drive a motor vehicle on a highway or on any private property that is used by the public in general in this State while under the influence of alcohol, while impaired by alcohol, while so far impaired by any drug, any combination of drugs, or a combination of one or more drugs and alcohol that the person could not drive a vehicle safely while impaired by a controlled dangerous substance, in violation of an alcohol restriction, or in violation of Section 16-813 of the Maryland Vehicle Law.

REASONABLE GROUNDS: WHILE ON PARADE ON I-95 SOUTH OF MONTGOMERY IN LANE 3 WHEN I OBSERVED A BLACK BUICK RENDEZVOUS, VEHICLE TRAVELING ON I-95 SOUTH IN LANE 3, CHANGING LANE FROM LANE 3 TO LANE 4, PASSING ALL THE WAY TO I-95 AT A 45 MPH TURN DROVE BACK TO LANE 3 TO LANE 2.
UPON THE OCCURRENCE, I ACTIVATED MY LASER LIDAR EQUIPMENT, UPON MY LIDAR

Odor Of Alcoholic Beverage on Driver's Breath: ☐ None ☐ Faint ☐ Moderate ☒ Strong Refer Summons No. FAIRLY HELD SUBJECT

I certify under penalty of perjury that the contents of the foregoing document are true and correct to the best of my knowledge, information and belief, and after being fully advised of sanctions that shall be imposed as provided in the Advice of Rights Form DR-15, the person described above (1) refused to take a test to determine alcohol concentration when requested by this officer, (2) was tested and the test result indicated an alcohol concentration of 0.08 or more as indicated above, or (3) refused to take a blood test for drug or controlled dangerous substance content when requested by a Drug Recognition Expert.

CONDUCTED WITH DRIVER, I DETECTED A STRONG SMELL OF ALCOHOLIC BEVERAGE FROM THE DRIVER.

OFFICER'S SIGNATURE MARYLAND STATE POLICE WATERLOO RR DATE 9/27/14 OFFICER'S PRINTED NAME 4733

LAW ENFORCEMENT AGENCY 7777 WASHINGTON RD, WATSON, MD 20196 ID NUMBER

ADDRESS

CERTIFICATION OF TEST TECHNICIAN OR ANALYST

I do solemnly declare and affirm, under penalty of perjury, and upon personal knowledge that I performed a test for alcohol concentration on the person described above and the test results were 0 from the Intox EC/IR. ☐ Testing procedure was explained. ☒ Person appeared in good health.

☐ Refusal - Insufficient Breath. I further-certify that the driver refused to take a test when the driver failed to provide sufficient breath samples for analysis.

EXPLANATION: (Specify instructions issued and behavior of driver):

SIGNATURE OF TEST TECHNICIAN/ANALYST

DATE

PRINTED NAME OF TEST TECHNICIAN/ANALYST

FACILITY NAME AND ADDRESS

DRIVER'S LICENSE NUMBER T61320069		CLASS NON		STATE VA	
DEPENDANT'S (FIRST) NAME CONNIE SUE WAGONER		MIDDLE	LAST	SUFFIX	
CURRENT ADDRESS IN FULL 15802 BARCELONA COURT					
CITY WOODBIDGE		COUNTY	STATE VA	ZIP CODE 22191	
HEIGHT 510	WEIGHT	RACE 1	GENDER F	BIRTHDATE 08/03/1958	TELEPHONE NO.
VEHICLE REGISTRATION JDE5831		STATE VA	YEAR 2007		
MAKE BUICK	MODEL RENDEZVOUS	TYPE 02	COLOR BLACK		
VIOLATION DATE / TIME 9/28/2014 00:30					
LOCATION OF OFFENSE S/B I-95 S/O MD100 LN3 & LN4					
COUNTY CODE HOWARD - 13		AREA MD 1	ARREST TYPE B	CVID	

CITATION NO.	ART/SEC/CHARGE	PAYABLE FINE AMOUNT
1. 2J80B1R	TA - 21-901.1(b) NEGLIGENT DRIVING VEHICLE IN CARELESS AND IMPRUDENT MANNER ENDANGERING PROPERTY, LIFE AND PERSON	PAYABLE FINE OF \$140
2. 2J90B1R	TA - 21-902(a1) DRIVING VEHICLE WHILE UNDER THE INFLUENCE OF ALCOHOL	MUST APPEAR
3. 2JB0B1R	TA - 21-902(a2) DRIVING UNDER THE INFLUENCE OF ALCOHOL PER SE	MUST APPEAR
4. 2JC0B1R	TA - 21-902(b1) DRIVING WHILE IMPAIRED BY ALCOHOL	MUST APPEAR

I SOLEMNLY AFFIRM UNDER THE PENALTY OF PERJURY THAT THE CONTENT OF THE FOREGOING DOCUMENT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION, AND BELIEF AND I PERSONALLY SERVED THIS SUMMONS ON THE DEFENDANT NAMED ABOVE.

☒ VISUAL COMPARISON WAS MADE BETWEEN DEFENDANT AND THEIR ID/LICENSE

DISTRICT 10 NO 01 AGENCY MSP SUB-AGENCY 9050 ID NO. 4833

RADAR/LASER/VASCAR OPERATOR
AGENCY SUBAGENCY ID NO.

I ACKNOWLEDGE RECEIPT OF A COPY OF THIS SUMMONS. I UNDERSTAND THAT ACCEPTANCE OF THIS SUMMONS IS NOT AN ADMISSION OF GUILT BUT MY FAILURE TO APPEAR MAY RESULT IN THE ISSUANCE OF A WARRANT FOR MY ARREST.

ISSUED ELECTRONICALLY -- SIGNATURE NOT REQUIRED

NOTE: Failing to comply with option 1, 2, or 3 or failing to appear for a scheduled trial/waiver hearing will result in the suspension of your license and privilege to drive by the Motor Vehicle Administration. Driving on a suspended license is a criminal offense for which you may be incarcerated.

SUMMONS TO APPEAR / NOTICE TO DEFENDANT

IMPORTANT INFORMATION: This citation is a summons to appear. If you request a trial or waiver hearing, you will be notified by the Circuit or District Court through a trial/waiver hearing notice setting the date, time, and place to appear. It is your obligation to know your trial/hearing date and appear on that date. It may take several weeks before a trial/hearing date is set. If your name or address on the citation is not correct, you must notify the Court in writing of any changes. The Post Office does NOT forward Court mail.

IF ANY OF YOUR VIOLATIONS ARE MARKED "MUST APPEAR": You must appear in District Court as directed.

You will automatically be mailed a notice of your trial date by the Court. Failure to appear may result in a warrant for your arrest.

TO THE PERSON CHARGED:

- This paper charges you with committing a crime.
- If you have been arrested and remain in custody, you have the right to have a judicial officer decide whether you should be released from jail until your trial.
- If you have been served with a citation or summons directing you to appear before a judicial officer for a preliminary inquiry at a date and time designated or within five days of service if no time is designated, a judicial officer will advise you of your rights, the charges against you, and penalties. The preliminary inquiry will be cancelled if a lawyer has entered an appearance to represent you.
- You have the right to have a lawyer.
- A lawyer can be helpful to you by:
 - explaining the charges in this paper;
 - telling you the possible penalties;
 - helping you at trial;
 - helping you protect your constitutional rights; and
 - helping you get a fair penalty if convicted.
- Even if you plan to plead guilty, a lawyer can be helpful.
- If you are eligible, the Public Defender or a court-appointed attorney will represent you at any initial appearance before a judicial officer and at any proceeding under Rule 4-216.1 to review an order of a District Court commissioner regarding pretrial release. If you want a lawyer for any further proceeding, including trial, but do not have the money to hire one, the Public Defender may provide a lawyer for you. The court clerk will tell you how to contact the Public Defender.
- If you want a lawyer but you cannot get one and the Public Defender will not provide one for you, contact the court clerk as soon as possible.
- DO NOT WAIT UNTIL THE DATE OF YOUR TRIAL TO GET A LAWYER. If you do not have a lawyer before the trial date, you may have to go to trial without one.

IF ANY OF YOUR VIOLATIONS ARE MARKED "PAYABLE FINE": You must comply with one of the following within 30 days after receipt of the citation. Provide any change of address if applicable.

OPTION #1 - PAYMENT: Pay the full amount of the fine for each violation within 30 days at any District Court of Maryland, by mail, or by credit card (fees apply) using the IVR system or Court Website. If paying by mail, make check or money order payable to District Court of MD and include citation number(s) on front of check or money order. On the option form below, check "Pay Fine Amount" for each violation being paid and mail the form with your payment to the address shown for the District Court of MD. An additional \$10 service fee will be imposed for each dishonored check.

OPTION #2 - REQUEST A WAIVER HEARING REGARDING SENTENCING AND DISPOSITION INSTEAD OF A TRIAL: On the option form below, check "Request Waiver Hearing" for each violation where hearing is requested, sign and date at the bottom and mail the form within 30 days to the address shown below. DO NOT SEND PAYMENT at this time.

OPTION #3 - REQUEST TRIAL: On the option form below, check "Request Trial" for each violation where Trial is requested, sign and date at the bottom and mail the form within 30 days to the address shown below. DO NOT SEND PAYMENT at this time.

FOR MORE INFORMATION AND TO PAY CITATIONS

Visit the MD Judiciary Website at www.mdcourts.gov/district or call the Interactive Voice Response (IVR) System for trial dates, court locations and directions. From all areas including out-of-state call: 1-800-492-2656. TTY users call Maryland Relay: 711

DISTRICT COURT OF MARYLAND COMPLAINT & CITATION OPTION FORM

Return To:
District Court of MD
P.O. Box 6676
Annapolis, MD 21401-0676

NAME: CONNIE SUE WAGONER		DISTRICT/NO: 10/01
<input type="checkbox"/> Check if change from address on citation.		
ADDRESS		
City, State, Zip		
Telephone No.		

2J80B1R		<input type="checkbox"/> PAY FINE AMOUNT \$140 OR <input type="checkbox"/> REQUEST WAIVER HEARING
2J90B1R		<input type="checkbox"/> REQUEST TRIAL
2JB0B1R		YOU MUST APPEAR
2JC0B1R		YOU MUST APPEAR

Check the appropriate box and sign below to request a Waiver Hearing or Trial for any citations listed above.

☐ **Request Waiver Hearing** - I admit that I committed the violation(s) charged in this citation. I am requesting a waiver hearing at which I may explain the circumstances to a judge. I know this is not a trial, the officer and witnesses will not be present, and that my appearance in court is for sentencing only.

☐ **Request Trial** - I request a trial date for the violation(s) charged.

T61320069		NON		VA	
DEFENDANT'S (FIRST) NAME: CONNIE SUE WAGONER					
CURRENT ADDRESS FULL: 15802 BARCELONA COURT					
CITY: WOODBIDGE		COUNTY:		STATE: VA ZIP CODE: 22191	
HEIGHT: 510	WEIGHT:	RACE: 1	GENDER: F	BIRTH DATE: 08/03/1958	TELEPHONE NO:
VEHICLE REGISTRATION: JDE5831		STATE: VA		YEAR: 2007	
MAKE: BUICK	MODEL: RENDEZVOUS	TYPE: 02	COLOR: BLACK		
VIOLATION DATE / TIME: 9/28/2014 00:30					
LOCATION OF OFFENSE: S/B I-95 S/O MD100 LN3 & LN4					
COUNTY CODE: HOWARD - 13		AREA: MD 1		ADDRESS TYPE: B	
DID UNLAWFULLY VIOLATE MOTOR VEHICLE LAWS(S)					

CITATION NO.	ART/SEC/CHARGE	PAYABLE FINE AMOUNT
1. 2JD0B1R	TA - 21-309(d)	PAYABLE FINE OF \$90
DRIVER FAILURE TO OBEY DESIGNATED LANE DIRECTIONS		

I SOLEMNLY AFFIRM UNDER THE PENALTY OF PERJURY THAT THE CONTENT OF THE FORE-GOING DOCUMENT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF AND I PERSONALLY SERVED THIS SUMMONS ON THE DEFENDANT NAMED ABOVE.

☒ VISUAL COMPARISON WAS MADE BETWEEN DEFENDANT AND THEIR ID/LICENSE.

DISTRICT 10 NO 01 AGENCY MSP SUBAGENCY 9060 ID NO 4833

RADAR/LASER/VASCAR OPERATOR
AGENCY SUBAGENCY ID NO

I ACKNOWLEDGE RECEIPT OF A COPY OF THIS SUMMONS. I UNDERSTAND THAT ACCEPTANCE OF THIS SUMMONS IS NOT AN ADMISSION OF GUILT BUT MY FAILURE TO APPEAR MAY RESULT IN THE ISSUANCE OF A WARRANT FOR MY ARREST.

ISSUED ELECTRONICALLY -- SIGNATURE NOT REQUIRED

NOTE: Failing to comply with option 1, 2, or 3 or failing to appear for a scheduled trial/waiver hearing will result in the suspension of your license and privilege to drive by the Motor Vehicle Administration. Driving on a suspended license is a criminal offense for which you may be incarcerated.

10R-45E (Rev 7/2014)

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TO THE PERSON CHARGED:

1. This paper charges you with committing a crime.

2. If you have been arrested and remain in custody, you have the right to have a judicial officer decide whether you should be released from jail until your trial.

3. If you have been served with a citation or summons directing you to appear before a judicial officer for a preliminary inquiry at a date and time designated or within five days of service if no time is designated, a judicial officer will advise you of your rights, the charges against you, and penalties. The preliminary inquiry will be cancelled if a lawyer has entered an appearance to represent you.

4. You have the right to have a lawyer.

5. A lawyer can be helpful to you by:

A. explaining the charges in this paper,

B. telling you the possible penalties,

C. helping you at trial,

D. helping you protect your constitutional rights, and

E. helping you get a fair penalty if convicted.

6. Even if you plan to plead guilty, a lawyer can be helpful.

7. If you are eligible, the Public Defender or a court-appointed attorney will represent you at any initial appearance before a judicial officer and at any proceeding under Rule 4-216.1 to review an order of a District Court commissioner regarding pretrial release. If you want a lawyer for any further proceeding, including trial, but do not have the money to hire one, the Public Defender may provide a lawyer for you. The court clerk will tell you how to contact the Public Defender.

8. If you want a lawyer but you cannot get one and the Public Defender will not provide one for you, contact the court clerk as soon as possible.

9. DO NOT WAIT UNTIL THE DATE OF YOUR TRIAL TO GET A LAWYER. If you do not have a lawyer before the trial date, you may have to go to trial without one.

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Return To:
District Court of MD
P.O. Box 6676
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NAME: CONNIE SUE WAGONER		DISTRICT/NO: 10/01
<input type="checkbox"/> Check if change from address on citation		
ADDRESS		
City, State, Zip		
Telephone No		
2JD0B1R		<input type="checkbox"/> PAY FINE AMOUNT \$90 OR <input type="checkbox"/> REQUEST WAIVER HEARING <input type="checkbox"/> REQUEST TRIAL

Check the appropriate box and sign below to request a Waiver Hearing or Trial for any citations listed above.

<input type="checkbox"/> Request Waiver Hearing - I admit that I committed the violation(s) charged in this citation. I am requesting a waiver hearing at which I may explain the circumstances to a judge. I know this is not a trial, the officer and witnesses will not be present, and that my appearance in court is for sentencing only.
<input type="checkbox"/> Request Trial - I request a trial date for the violation(s) charged.

DATE

DEFENDANT'S SIGNATURE