

11A

NEVADA STATE BOARD OF PHARMACY

985 Damonte Ranch Pkwy #206 – Reno, NV 89521

APPLICATION FOR ADVANCED PRACTICE REGISTERED NURSE - PRESCRIBE

REGISTRATION FEE: \$80.00 (non-refundable money order or cashier's check only)

First: PATRICK Middle: IAN Last: SMITH
 Home Address: SHOREWOOD DR
 City: WASHINGTON State: NC Zip Code: _____
 SS# _____ Date of Birth _____ Sex: ☒ M or ☐ F
 Telephone: _____ E-mail address: _____

PRACTICING LOCATION (Required)

Practice Name (if any): NAPHCARE AT LAS VEGAS DETENTION CENTER
 Physical Address: 3300 STEWART AVE Suite #: _____
 City: LAS VEGAS State: NV Zip Code: 89101
702-229-6444 (LAS VEGAS DETENTION CENTER)
 Telephone: 205-552-1787 (NAPHCARE) Fax: 205-515-9207 (NAPHCARE FAX)
 Nursing Board #: 821781 Issued: 7/3/2019 Expires: 9/26/2020

☒ Check this box if you are a APRN who intends to apply for DEA Registration. Board Staff will notify DEA and you of the required information and provide a letter with your pending number to allow you to apply for the DEA in Nevada (Do not apply to DEA before receiving your pending letter.)

You must have a current Nevada license with your respective BOARD before we will process this application. The Nevada license must remain current to keep the controlled substance registration.

| | | | | Yes | No |
|---|-------|------------|---------|-------------------------------------|-------------------------------------|
| Been diagnosed or treated for any mental illness, including alcohol or substance abuse, or Physical condition that would impair your ability to perform the essential functions of your license? | | | | | |
| | | | | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 1. Been charged, arrested or convicted of a felony or misdemeanor in <u>any</u> state? | | | | | |
| | | | | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2. Been the subject of a board citation, administrative action whether completed or pending in <u>any</u> state? | | | | | |
| | | | | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 3. Had your license subjected to any discipline for violation of pharmacy or drug laws in <u>any</u> state? | | | | | |
| | | | | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| If you marked YES to any of the numbered questions (1-3) above, include the following information & provide an explanation & documentation: | | | | | |
| Board Administrative Action: | State | Date: | Case #: | | |
| | | <u>/ /</u> | | | |
| Criminal Action: | State | Date: | Case #: | County | Court |
| | | <u>/ /</u> | | | |

PLEASE SEE ENCLOSED DOCUMENTS.

It is a violation of Nevada law to falsify this application and sanctions will be imposed for misrepresentation. I hereby certify that I have read this application. I certify that all statements made are true and correct.

I understand that Nevada law requires a licensed APRN who, in their professional or occupational capacity, comes to know or has reasonable cause to believe, a child has been abused/neglected, to report the abuse/neglect to an agency which provides child welfare services or to a local law enforcement agency.

P. S. I A APRN
 Original Signature of APRN, no copies or stamps accepted

1/15/2020
 Date

COLLABORATING PHYSICIAN's name (If required): _____

Original Signature of Collaborating Physician, no copies or stamps accepted

Date

Board Use Only: Date Processed _____

Amount 80.00

January 14, 2020,

To Nevada State Board of Pharmacy:

Thank you for the opportunity to explain the details surrounding my arrests. I will explain each incident in the order that it occurred.

The first incident occurred in Buncombe County, North Carolina, in 1997, when I was a senior in high school. The event involved an aerosol can of computer cleaner. I was charged with inhaling toxic vapors. I sought deferred prosecution and performed community service. In 2010, the charge was expunged.

The second incident occurred in 2002. This incident involved misdemeanor possession of marijuana, and the charges were dismissed. This incident occurred in Mecklenburg County, North Carolina.

The third incident occurred in Buncombe County, in 2005, when I was charged with reckless driving. This case was dismissed.

For fourteen years now, I have abstained from using substances or alcohol. I have found that life without substances and alcohol is very rewarding and fulfilling. Also, I have not had any traffic violations since I was charged with reckless driving in 2005. I would very much look forward to the opportunity of practicing as a nurse practitioner in Nevada.

Sincerely,

PS1 H, PMHNP-BC

Patrick Smith, MSN, PMHNP-BC

100 BUNCOMBE
 031914 CRIMINAL CHECK- PENDING--DISPOSED--MOTOR V.--UNSERVED--CONVICTED
 CRITERIA- NAME: SMITH, PATRICK? E-RACE: S=SEX: DOB:

SMITH, PATRICK, IAN 836 CHUNNS C S=M R=W DOB= 98CR 000481
 OF:010898 (T) EXPIRED REGISTRATION CARD/TAG DISMISSED BY DA 030398 CR
 OF:010898 (I) EXPIRED/NO INSPECTION DISMISSED BY DA 030398 CR

 SMITH, PATRICK, IAN 51 WILKINSID S=M R=W DOB= 08CR 061709
 LID: 132198
 OF:083002 (I) KNOWLESS TRYING TO ENDSRPER DISMISSED BY DA 121875 CR

CRIMENSE DATE 075-BIRTH M WISE 8 FELONY 3 TRAFFIC

END

CERTIFIED A TRUE COPY

Glenn J. Allen
 DEPUTY CLERK OF SUPERIOR COURT
 BLANCHE COUNTY, ASHEVILLE, N.C.

Criminal Records.Txt

590 MECKLENBURG ICA INQUIRY 01 02CR 219735 FILM:
 DISPOSED R S NOR/AGF CR FILING DATE: 050302 NC
 MAGISTRATE ORDER W M DL#: 2 CIT#: TRIAL DATE: 071802
 SMITH, PATRICK, IAN CHUNNS COVE RD CSLR: CSLRC: AM
 ASHEVILLE NC 28805 DEF ATTY: TYP: VRA:
 CHG/ARRN OFFN: M POSSESS MARIJUANA UP TO 1/2 OZ 90-95(D)(4)
 COMPLAINANT: OWEN, C, P CPD ISSUED: 050302 SERVED: 050302
 OFFN DATE: 050302 ARRN DATE: MOTIONS DATE: DISP DATE: 071802
 CONT. D: 00 S: 00 C: 00 NR: 00 INT?: FRM: RSONCO: GANG REL: DV CV: N
 PLEA VER MOD FINE COSTS WCC REST JUDGE PAID TO-BE-PAID
 VD \$ \$ \$ NBN CAB:
 CONV OFFN: SENT LEN: - SENT TYPE: CONS F/JGMT:
 PROB: WITHDRAWN: APPEALED TO SUPERIOR:
 AREA CD: ACCD: HWY: V LIC: TRANS TO SUPERIOR:
 CDL: N CMV: N HAZ: N TRP/DIST: V ST: V TYP: APPELLATE:
 HT

ARREST DATE: 050302 CHECK DIGIT: PR7624F SID: N
 NEXT#: PF2 - NAME INQUIRY

LID: 276477
 ADDL CHARGES:

A TRUE COPY

CLERK SUPERIOR COURT

By *Laurel Wilson*
 Assistant Deputy Clerk Superior Court

TYPE OR PRINT IN BLACK INK.

STATE OF NORTH CAROLINA

BUNCOMBE

County

In The General Court Of Justice
Before The Clerk

IN THE MATTER OF:

Name(s) By Which Individual To Be Searched May Be Known
Patrick Ian Smith

CRIMINAL RECORD SEARCH

G.S. 7A-109, -308(a)(17), -343(3)

☐ For DMV Hearing

REQUEST FOR CERTIFIED CRIMINAL RECORD SEARCH

I request that the Clerk of Superior Court conduct a search of the official records of the criminal cases in the courts of the county named above and certify the results of that search for the name(s) listed above. In making this request I understand and acknowledge that:

1. THE CLERK WILL SEARCH THE COURT RECORDS FOR ONLY THE COUNTY NAMED ABOVE. THIS IS NOT A STATEWIDE RECORD SEARCH.
2. Court records are indexed by name only and not by any other identifying characteristics.
3. The name(s) listed above are all the names by which, to my knowledge, the individual for whom I am requesting this search may be known.
4. The Clerk will search for records under all those names, but only for records under those names.
5. The fact that no criminal record is found under any of those names does not mean that the individual does not have a record in this county; the individual may have a record under another name.
6. The fact that a criminal record is found under one or more of those names does not mean that the record is a record for the individual for whom I am requesting this search; the record may be that of another individual with the same or a similar name.
7. I am solely responsible for any interpretation and use I make of the results of this search and I understand the Clerk is not responsible for my interpretation or use of the results.

Name And Address Of Requestor (Including City, State And Zip Code)

Robert B. Long, Jr.

Long, Parker, Warren, Anderson & Payne

14 South Pack Square, Suite 600

Asheville, NC 28801

Signature Of Requestor

CERTIFICATION

This is to certify that I have searched the indices to criminal actions in this office from 1983 to the present and

☒ I have found that no record was indexed by the name(s) given above.

☐ I have found the following excerpt(s) from the public records indexed by the name(s) given above as appears in the attached _____ page(s).

☐ This search is limited as follows: _____

Some automated system information code definitions are included on the back of this form to help you understand the record(s) that may be attached to this form.

Not Valid Without The
Clerk Of Superior Court's Raised Seal
On Each Page

Date Of Search

Signature

☒ Deputy CSC☐ Assistant CSC☐ Clerk Of Superior Court

NOTE: "Any person who without lawful authority intentionally ... alters or changes any ... official case record is guilty of a Class H felony." G.S. 14-221.2.

STATE OF NORTH CAROLINA

BUNCOMBE County

File No.

97 CR 5210

In The General Court Of Justice

☒ District ☐ Superior Court Division

STATE VERSUS

Name And Address Of Defendant/Petitioner (Type Or Print)

Patrick Ian Smith
Brookwood Road
Asheville, NC 28804PETITION AND ORDER
OF EXPUNCTION

UNDER G.S. 15A-145 AND G.S. 15A-146

G.S. 15A-145, -146

Drivers License No.

21

State

NC

Race

CAUC.

Sex

MALE

DOR

Social Security No.

Age At Time Of Offense

18

Name And Address Of Arresting Agency

Asheville City Police Department
100 Court Plaza (A)
Asheville, NC 28801

Name And Address Of Defendant's Attorney

Robert B. Long, Jr.
P. O. Box 7216
Asheville, NC 28802

| File Nos. | Date Of Arrest | Offense Description | Date Of Offense | Disposition | Date Of Disposition/ Conviction |
|------------|----------------|---------------------|-----------------|-------------|---------------------------------|
| 97 CR 5210 | 05/16/1997 | Inhale Toxic Vapors | 05/16/1997 | Dismissed | 10/20/1997 |

PETITION/MOTION TO EXPUNGE

☐ I hereby move for an expungement pursuant to G.S. 15A-145 and certify as follows:

1. I was charged with a misdemeanor(s), other than a traffic violation, the file number(s) of which is/are set out above.
2. The charge(s) listed above resulted in a conviction and at the time the offense was committed, I was under the age of 18 (or under the age of 21 if the charge is misdemeanor possession of alcohol in violation of G.S. 18B-302(b)(1)).
3. I have not previously been convicted of any felony or misdemeanor, other than a traffic violation.
4. Those affidavits and statements required by G.S. 15A-145 are incorporated and are attached.
5. I have no outstanding restitution orders, or civil judgments representing amounts ordered for restitution, against me.
6. I have served a copy of this form on the District Attorney.

☐ 7. There is a civil revocation record that resulted from the offense(s) I am seeking to expunge.

Service of this petition is accepted by the District Attorney pursuant to statute. (Applies only to G.S. 15A-145.)

Date

Signature Of District Attorney

☒ I hereby move for an expungement pursuant to G.S. 15A-146 and certify as follows:

1. I was charged with a misdemeanor(s) or felony(ies) (or an infraction under G.S. 18B-302(i) prior to December 1, 1999), the file number(s) of which is/are set out above.
2. The charge(s) listed above was/were disposed of by a dismissal, finding of not guilty or finding of not responsible.
3. I have not previously been convicted of a felony.
4. I have not previously received an expungement under G.S. 15A-145, G.S. 15A-146, G.S. 90-96, or G.S. 90-113.14.

☐ 5. There is a civil revocation record that resulted from the offense(s) I am seeking to expunge.☒ I certify that an application under the statute identified above and all affidavits required under that statute have been filed in this case and that the information set forth above is a complete and accurate statement of the information on file in the office of the Clerk of Superior Court.

Date

Signature

☒ Attorney☐ Defendant

REQUEST BY JUDGE

To The State Bureau Of Investigation, P.O. Box 29500, Raleigh, NC 27626:

Please prepare, certify on the reverse side, and attach to this Request any Criminal History Record Information for the petitioner. Then forward this Request with Criminal History Record Information attached, confidentially to: Records Officer, Administrative Office of the Courts.

To The Records Officer, Administrative Office of the Courts, P.O. Box 2448, Raleigh, NC 27602:

Please complete the report on the reverse side and return it, along with the information attached to this Request by the SBI, to the Clerk of Superior Court.

Date

Name Of Presiding Judge (Type Or Print)

Signature Of Presiding Judge

AOC-CR-264, Rev. 4/08

© 2008 Administrative Office of the Courts

(Over)

CRIMINAL HISTORY RECORD INFORMATION

To Any Presiding Judge In The Above Named County And Court: (Confidential)

I have conducted a search of the criminal records of the North Carolina State Bureau of Investigation and the Federal Bureau of Investigation, based on the information provided by you, which has not been verified by fingerprint comparisons, and certify that

- ☐ there is no criminal record for the defendant identified on the reverse of this form.
☒ the Criminal History Record Information which is attached is a true and accurate statement of all information contained in the criminal records of the State and Federal Bureaus of Investigation for the defendant identified on the reverse side of this form.

Date 1-15-2010 SID No. NC0971069A Signature Of SBI Official [Signature]
REPORT BY ADMINISTRATIVE OFFICE OF THE COURTS

To Any Presiding Judge In The Above Named County And Court: (Confidential)

I have searched the confidential file which contains the names of all persons granted an expunction or dismissal and discharge in North Carolina and certify that

- ☒ there is no record under the name of the defendant of any expunction under any statute of North Carolina
☐ there is a record under the name of the defendant identified on the reverse side and it is attached to this form

Date JAN 21 2010 Signature Of Records Officer [Signature]

FINDINGS OF FACT

After a hearing on the petition/motion the Court makes the following findings of fact:

1. Petitioner was charged with those offenses indicated on Side One.
2. Said charges were disposed of as indicated in the Petition on Side One.
- ☐ 3. The above referenced charges are related in that they all arose out of the same occurrence or transaction or they were joined for trial and judgment.
- ☐ 4. The above referenced charges occurred within the same 12-month period of time or the charges were dismissed or findings made at the same term of court. (Applies only to G.S. 15A-146.)
- ☐ 5. Petitioner is seeking an expungement under G.S. 15A-145.
 - ☐ The district attorney has been served with a copy of this petition at least ten (10) days prior to this date, has received notice of the hearing ☐ and has no objection. _____ (Prosecutor's Initials)
 - ☐ Petitioner has not previously been convicted of any felony or misdemeanor offense other than a traffic violation
 - ☐ Petitioner was not convicted of any felony or misdemeanor during the first two years following the date of disposition indicated on Side One.
 - ☐ Petitioner provided affidavits as required by G.S. 15A-145.
 - ☐ Petitioner has no outstanding restitution orders or civil judgments representing amounts ordered for restitution entered against him/her
- ☒ 6. Petitioner is seeking an expungement under G.S. 15A-146
 - ☒ Petitioner has not previously been convicted of a felony
 - ☒ Petitioner has not previously received an expungement under G.S. 15A-145, G.S. 15A-146, G.S. 20-56 or G.S. 90-113.14.
- ☐ 7. Other: _____
- ☒ 8. Petitioner ☒ is ☐ is not eligible for an expungement under ☐ G.S. 15A-145. ☒ G.S. 15A-146.
 If not eligible, it is because: _____

ORDER

Therefore, the Court hereby ORDERS:

- ☒ 1. The petition is granted and it is ordered that all entries relating to the defendant/petitioner's apprehension, charge or trial shall be expunged from the records of the court, and all law-enforcement agencies bearing record of the same. It is further ordered that the clerk is to forward a certified copy of this order to the AOC, sheriff, chief of police or other arresting agency.
- ☐ 2. The petition is denied.
- ☒ 3. It is also ordered that all entries relating to the civil revocation that resulted from the expunged offense(s) be expunged from the records of the court, and all law enforcement agencies, including the NC Division of Motor Vehicles, bearing record of the same, and the clerk shall forward a certified copy of this order to the Division of Motor Vehicles.

Date 2-10-10 Name Of Presiding Judge (Type Or Print) J. Calvin Hill Signature [Signature]
CERTIFICATION BY CLERK

I certify that this Order is a true and complete copy of the original in this case and it is being forwarded in compliance with the Order.

Date 2-15-10 Signature [Signature]
 Name (Type Or Print) Janelle Benson
☐ Deputy CSC ☐ Assistant CSC ☐ Clerk Of Superior Court

NOTE TO DEFENDANT/PETITIONER: The expungement of your case information from the court's records does not guarantee your case information will be expunged from other sources. Private companies routinely acquire copies of criminal records to sell. Once the record is removed from the court system it may still be available for sale by the private companies. When this happens neither the Court nor the AOC can require the companies to stop selling the information. One course of action you might take is to send the company a certified record check from the clerk's office showing you have no record. Then request the company correct the inaccurate record in its database.

January 14, 2020

Dear Nevada State Board of Pharmacy,

I have spoken with Patty from the Nevada State Board of Nursing. Patty has received a letter from my past employer indicating 2000 prescribing hours, and that letter has also been enclosed in this envelope. Patty mentioned that she would change my prescribing status to "active prescribing C2."

I have enclosed the pharmacy application, supporting documents, and payment. Please let me know if you need any other documents or if anything is incomplete. Thank you for helping to process my pharmacy application.

Sincerely,

PS I +, PMHNP-BC

Patrick Smith, PMHNP-BC

8328-



Mental Health Resource Center

P. O. Box 19249, Jacksonville, FL 32245-9249

Phone: (904) 743-1883 ♦ Fax: (904) 493-5910

January 13, 2020

Re: Employment Verification

This verification is being sent at Patrick Smith's request.

Patrick Smith was employed with the Mental Health Resource Center (MHRC) as a Psychiatric Nurse Practitioner for Adults from November 19, 2018-November 19, 2019.

He was a full time employee and provided additional weekend, on-site services as part of an on-call rotation. He worked 2,000 hours with MHRC providing these services.

If you have any questions, please feel free to contact the Human Resource Department at (904) 743-1883 or at humanresources@mhrcflorida.com.

Sincerely,

Jessica Java

Jessica Java M.B.A., PHR
Vice President- Human Resources

11B

NEVADA STATE BOARD OF PHARMACY

985 Damonte Ranch Pkwy #206 – Reno, NV 89521

APPLICATION FOR ADVANCED PRACTICE REGISTERED NURSE - PRESCRIBE

REGISTRATION FEE: \$80.00 (non-refundable money order or cashier's check only)

First: Natalie Middle: Rae Last: Lynn
 Home Address: Milpas Lane
 City: Las Vegas State: NV Zip Code: 89101
 S _____ Date of Birth: _____ Sex: ☐ M or ☒ F
 Telephone: _____ E-mail address: gmail.com

PRACTICING LOCATION (Required)

Practice Name (if any): Dispatch Health Urgent Care
 Physical Address: 3411 W Charleston Blvd #203 Suite #: 203
 City: Las Vegas State: NV Zip Code: 89102
 Telephone: 720-647-5329 702-848-4443 Fax: 720-603-9592
 Nursing Board #: 815950 Issued: 12/17/2018 Expires: 12/21/2021

☒ Check this box if you are a APRN who intends to apply for DEA Registration. Board Staff will notify DEA and you of the required information and provide a letter with your pending number to allow you to apply for the DEA in Nevada-(Do not apply to DEA before receiving your pending letter.)

You must have a current Nevada license with your respective BOARD before we will process this application. The Nevada license must remain current to keep the controlled substance registration.

| | | Yes | No |
|---|--------|-------------------------------------|-------------------------------------|
| Been diagnosed or treated for any mental illness, including alcohol or substance abuse, or Physical condition that would impair your ability to perform the essential functions of your license? | | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 1. Been charged, arrested or convicted of a felony or misdemeanor in <u>any</u> state? | | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2. Been the subject of a board citation, administrative action whether completed or pending in <u>any</u> state? | | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 3. Had your license subjected to any discipline for violation of pharmacy or drug laws in <u>any</u> state? | | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| If you marked YES to any of the numbered questions (1-3) above, include the following information & provide an explanation & documentation: | | | |
| Board Administrative Action: | State | Date: | Case #: |
| | | / / | |
| Criminal Action: | State | Date: | Case #: |
| | | / / | |
| | County | | Court |
| | | | |

It is a violation of Nevada law to falsify this application and sanctions will be imposed for misrepresentation. I hereby certify that I have read this application. I certify that all statements made are true and correct.

I understand that Nevada law requires a licensed APRN who, in their professional or occupational capacity, comes to know or has reasonable cause to believe, a child has been abused/neglected, to report the abuse/neglect to an agency which provides child welfare services or to a local law enforcement agency.

[Signature]
 Original Signature of APRN, no copies or stamps accepted

1/29/2020
 Date

COLLABORATING PHYSICIAN's name (If required): _____

Original Signature of Collaborating Physician, no copies or stamps accepted

Date _____
 Amount 80

Board Use Only: Date Processed _____

Explanation

1. *Been charged, arrested or convicted of a felony or misdemeanor in any state?*

YES.

On February 26, 2019, I was arrested in Las Vegas on suspicion of driving under the influence, possession of a dangerous drug without a prescription, possession of a controlled substance without a prescription, and failing to maintain a travel lane. On July 19, 2019, I was charged with misdemeanor driving under the influence and failing to maintain a travel lane only. That case (No. 19M12821X) is currently pending before the Las Vegas Justice Court. Arrest records and the criminal complaint are attached.

On the night of February 25-26, 2019, I was pulled over while driving and taken into custody on suspicion of driving under the influence. Due to my pending criminal matter, I have been advised by my counsel not to provide further details on that issue.

As part of that arrest, my vehicle and purse were searched. The officer discovered a prescription bottle in my purse with twenty (20) pills of zolpidem tartrate, 10mg (generic for Ambien), a Schedule IV controlled substance. The bottled was labeled for my mother, Patricia Mortel, and dated September 20, 2010. I was in the process of moving, and my mother had left her prescription at my house. I had her prescription in my purse so that I could return it to her. It is obviously an old prescription of hers, and given that twenty (20) pills remained in the bottle, it was pretty clear that her prescription was not being abused or diverted. The early charges of possession of a dangerous drug without a prescription and possession of a controlled substance without a prescription were dropped with no complaint filed.

As stated above, my criminal case on the remaining charges is pending. I have had no other felony or misdemeanor charges, arrests, or convictions in any other state.

JUSTICE COURT, LAS VEGAS TOWNSHIP
CLARK COUNTY, NEVADA

THE STATE OF NEVADA,

Plaintiff,

-vs-

NATALIE RAE WYNN, aka,
Natalie Rae Mortel #5686794,

Defendant.

CASE NO: 19M12821X

DEPT NO: 13

CRIMINAL COMPLAINT

The Defendant above named having committed the crimes of DRIVING UNDER THE INFLUENCE (Misdemeanor - NRS 484C.110, 484C.400, 484C.105 - NOC 53900) and FAILURE TO MAINTAIN TRAVEL LANE (Misdemeanor - NRS 484B.223 - NOC 53788), in the manner following, to wit: That the said Defendant, on or about the 26th day of February, 2019, at and within the County of Clark, State of Nevada,

COUNT 1 - DRIVING UNDER THE INFLUENCE

did then and there willfully and unlawfully drive and/or be in actual physical control of a motor vehicle on a highway or on premises to which the public has access at U.S. Highway 95 and Craig, Las Vegas, Clark County, Nevada, Defendant being responsible in one or more of the following ways and/or under one or more of the following theories, to wit: 1) while under the influence of intoxicating liquor to any degree, however slight, which rendered her incapable of safely driving and/or exercising actual physical control of a vehicle, 2) while she had a concentration of alcohol of .08 or more in her blood, and/or 3) when she was found by measurement within two (2) hours after driving and/or being in actual physical control of a vehicle to have a concentration of alcohol of .08 or more in her blood.

COUNT 2 - FAILURE TO MAINTAIN TRAVEL LANE

did then and there willfully and unlawfully fail to drive a motor vehicle as nearly as practicable entirely within a single lane while operating a motor vehicle at U.S. Highway 95 and Craig, Las Vegas, Clark County, Nevada, a highway with two or more clearly marked lanes for traffic traveling in one direction.

1 All of which is contrary to the form, force and effect of Statutes in such cases made and
2 provided and against the peace and dignity of the State of Nevada. Said Complainant makes
3 this declaration subject to the penalty of perjury.

4
5
6 07/19/19
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26

27 19M12821X/ml
28 NHP EV# 190202314
(TK12)

NOTICE OF INTENT TO USE AFFIDAVIT OR DECLARATION

Please be advised that, pursuant to NRS 50.315 and 50.325, upon the trial of this matter, the State of Nevada intends to offer into evidence the affidavit or declaration made under penalty of perjury of the person who withdrew the sample of whole blood from the Defendant for the purposes set forth in NRS 50.315(4). A copy of said affidavit or declaration is included in the discovery provided in this matter.

The person who withdrew the sample of whole blood in this matter is:

S. WILSON

LABCORP

UNIVERSITY MEDICAL CENTER

1800 West Charleston Boulevard

Las Vegas, Nevada 89102

LAS VEGAS METROPOLITAN POLICE DEPARTMENT
TEMPORARY CUSTODY RECORD
 ("DENOTES OFFICER REQUIRED FIELD")

*PAGE 1 OF 1 UOF ☐ BODY CAM ☐ NEW ID ☐ DNA SAMPLE TAKEN ☐ DNA NOT REQ'D
 *ARREST DATE: 2/26/2019 *ARREST TIME: 0245
 *EVENT #: 190202314
 *CO-DEF: N
 *DETAINER: ☐ COURTSHIP HOLD ☐ NLV ☐ HND ☐ LVC ☐ EXT TO LAS VEGAS ☐ NDOC ☐ FORM 6 ☐ ABSENTIA ☐ REBOOK ☐ SGT APPROVAL

| | | | | | | | | | | | | | | | | | |
|--|--|--------------|--|---------------------|--|------------|--|--------------------------|--|-------------------------------------|--|--|--|------------|--|--|--|
| *INTAKE NAME (AKA, ALIAS, ETC.) | | LAST WYNN | | FIRST NATALIE | | MIDDLE RAE | | TRUE NAME NATALIE | | MIDDLE NATALIE | | LAST Mortel | | MIDDLE kae | | | |
| *ADDRESS (STREET # AND STREET NAME) QUAL PRAIRIE ST | | | | | | | | | | *CITY LAS VEGAS | | *STATE NV | | *ZIP 89131 | | *PLACE OF BIRTH CARMICHAEL, CALIFORNIA | |
| *DATE OF BIRTH 1 | | *RACE W | | *HISP ETHN NH | | *SEX F | | *HEIGHT 505 | | *WEIGHT 155 | | *HAIR BLN | | *EYES BLU | | *SOCIAL SECURITY # | |
| *LOCATION OF CRIME (STREET ADDRESS, CITY, STATE, ZIP) <input checked="" type="checkbox"/> CC | | | | | | | | | | *CITY LAS VEGAS | | *STATE NV | | *ZIP 89131 | | *CITIZENSHIP USA | |
| *LOCATION OF ARREST (STREET ADDRESS, CITY, STATE, ZIP) US95/CRAIG LAS VEGAS, NV 89129 | | | | | | | | | | *CITY LAS VEGAS | | *STATE NV | | *ZIP 89131 | | *CITIZENSHIP USA | |
| *ARR # | | *COURT JURIS | | *WARRANT # / CASE # | | *# CNTS | | *MOC CODE | | *M GM F | | *CHARGE LITERAL | | *ORD / NRS | | *EVENT# / NC# | |
| PC | | JC | | 1 | | 51358 | | <input type="checkbox"/> | | <input checked="" type="checkbox"/> | | POSS DANG DRUG W/O P-SCRIPT (19072ND) | | 454.316.1 | | 190202314 | |
| PC | | JC | | 1 | | 51127 | | <input type="checkbox"/> | | <input checked="" type="checkbox"/> | | POSS SCH I, II, III, IV C/S, (1ST/2ND) | | 463.336.2A | | 190202314 | |
| PC | | JC | | 1 | | 53800 | | <input type="checkbox"/> | | <input checked="" type="checkbox"/> | | RIZ HR HOUSE DRUG (1ST) alcohol/drugs | | 484C.110 | | 190202314 | |
| PC | | JC | | 1 | | 53708 | | <input type="checkbox"/> | | <input checked="" type="checkbox"/> | | FAIL MAINT LANE/IMPROPER LANE CHANGE | | 484B.223.1 | | 190202314 | |

**ARREST TYPES:

PC - PROBABLE CAUSE BS - BONDSMAN SURRENDER BW - BENCH WARRANT AW - ARREST WARRANT RM - REMAND GJI - GRAND JURY INDICTMENT

*OTHER JURISDICTION:

| | | | | | | | | | |
|--|--|---------------|--|-----|--|---------|--|--|--|
| TIME STAMP AT BOOKING 2/26/2019 7:36 AM | | C BLACK | | 434 | | NHP | | OT | |
| *ARRESTING OFFICER SIGNATURE | | *PRINTED NAME | | *# | | *AGENCY | | *SECTION/BEAT OF ARREST | |
| *TRANSFERRING OFFICER SIGNATURE | | C BLACK | | 434 | | NHP | | OTHER | |
| *EMERGENCY CONTACT | | Patricia | | mom | | 702 | | DATE AGENCY LAS VEGAS METROPOLITAN POLICE DEPARTMENT | |
| *RELATIONSHIP | | mom | | 702 | | 702 | | BY: 1:1 | |
| *PHONE NUMBER | | 702 | | 702 | | 702 | | RELEASE TO: DNA REQ | |
| *EMAIL ADDRESS | | 702 | | 702 | | 702 | | DATE AGENCY LAS VEGAS METROPOLITAN POLICE DEPARTMENT | |

| | | | | | | | |
|-------------------------|--|-----------------|--|-----------|--|-----------|--|
| TIME STAMP AT RELEASING | | FIRST APP DATE: | | COURT: | | JUDGE: | |
| TIME: | | TIME: | | COURT: | | JUDGE: | |
| COURT: | | COURT: | | COURT: | | COURT: | |
| MUNICIPAL | | MUNICIPAL | | MUNICIPAL | | MUNICIPAL | |
| STD BAIL | | STD BAIL | | STD BAIL | | STD BAIL | |
| Q.R. REL | | Q.R. REL | | Q.R. REL | | Q.R. REL | |
| PC | | PC | | PC | | PC | |
| I.A.D. | | I.A.D. | | I.A.D. | | I.A.D. | |

REL REV #

075496

NO HT

RU

LI

SCORE:

1:1

RT

LT

POLICE RECORDS COPY

COURTS COPY

DSD RECORDS COPY

PROCESSING COPY

DOC DIST #

1:1

RT

LT

POLICE RECORDS COPY

COURTS COPY

DSD RECORDS COPY

PROCESSING COPY

DOC DIST #

1:1

RT

LT

POLICE RECORDS COPY

COURTS COPY

DSD RECORDS COPY

PROCESSING COPY

DOC DIST #

1:1

RT

LT

POLICE RECORDS COPY

COURTS COPY

DSD RECORDS COPY

PROCESSING COPY

DOC DIST #

1:1

RT

LT

POLICE RECORDS COPY

COURTS COPY

DSD RECORDS COPY

PROCESSING COPY

DOC DIST #

1:1

RT

LT

POLICE RECORDS COPY

COURTS COPY

DSD RECORDS COPY

PROCESSING COPY

DOC DIST #

1:1

RT

LT

POLICE RECORDS COPY

COURTS COPY

DSD RECORDS COPY

PROCESSING COPY

NEVADA HIGHWAY PATROL DECLARATION OF ARREST

PAGE 1

ID: 5696794EVENT: 190202314

| | | |
|--|-------------------------------|-------------------------|
| TRUE NAME: WYNN, NATALIE RAE | DATE OF ARREST: 02/26/2019 | TIME OF ARREST: 0245 |
| OTHER CHARGES RECOMMENDED FOR CONSIDERATION: NONE | | |

THE UNDERSIGNED MAKES THE FOLLOWING DECLARATIONS SUBJECT TO THE PENALTY FOR PERJURY AND SAYS: That I am a State Trooper with the Nevada Department of Public Safety, Highway Patrol, Las Vegas, being so employed for a period of 16 months.

That I learned the following facts and circumstances which lead me to believe that **Natalie Rae Wynn** committed (or was committing) the offense(s) of (see TCR) at the location of US95/Craig.

That the offense(s) occurred at approximately 0226 hours on the 26th day of February, 2019.

On February 26th, 2019 at approximately 0226, I, Trp. C. Black P#434, was patrolling US 95 southbound near Craig when I observed a silver Kia Sorento bearing NV registration 416YMU failing to maintain its lane. I observed the vehicle cross from the #3 to the #4 travel lane before correcting back to the #3. The vehicle then crossed back from the #3 travel lane to the #4 travel lane and was straddling the lane line. The vehicle corrected back into the #3 travel lane and crossed into the #4 travel lane once more. I initiated a traffic stop on the vehicle using emergency lights and siren. The vehicle pulled to the right shoulder.

I made a passenger side approach to the vehicle and contacted the driver, identified by her NV driver license as Natalie Rae Wynn, DOB [REDACTED] NV license # [REDACTED]. I immediately noticed an odor of unknown intoxicating beverage coming from within the vehicle. I also noticed Wynn had bloodshot eyes. Wynn stated that she and her passenger were on their way down the road to get some food. I asked how much Wynn had to drink tonight and she said one beer a few hours ago. I asked Wynn if she would be willing to step out to perform field sobriety tests to which she agreed.

I asked Wynn to sit on the front push bumper of my patrol car. Wynn stated she was not currently seeing a doctor for any reason, had no physical injuries that would keep her from walking or balancing normally, was not taking any over the counter medications and was not diabetic or taking insulin for any reason. Wynn stated that she was taking a few different prescription medications including Xanax, Topamax, Seroquel, Ambien, Omeprazole and "Zomig" (Zolmitriptan). I asked how often she takes those medications and she stated "as needed thru ought the day". I asked what the last medication she took was and she stated she took a Xanax at about 7pm yesterday. Wynn stated that she saw an optometrist about three months ago and was currently wearing glasses because she was far sighted and had stigmatism in both eyes. Wynn stated that both her eyes were real but that she was "clinically blind" without her glasses. I asked her to

**NEVADA HIGHWAY PATROL
DECLARATION OF ARREST**

PAGE 2

ID: 5686794EVENT: 190202314

explain what that meant and she stated that her optometrist told her she was clinically blind without her glasses but could see with them on and could drive with her glasses. Wynn also stated that she had been diagnosed with natural nystagmus in both eyes by her optometrist about three months ago. I asked her if she could explain to me what nystagmus, which she did. I asked if she could still see me without her glasses on and she said "vaguely". I asked her to put her glasses back on.

I explained the horizontal gaze nystagmus test. Wynn stated that she understood my instructions and had no questions regarding the test. I observed equal pupil size and equal tracking in both eyes. After the first two passes, Wynn did not follow my finger. She appeared to just be looking at my chest. I asked if she understood what I was asking her to do and she said yes. I continued the test and observed lack of smooth pursuit in both eyes. I attempted three more passes but Wynn would not follow my finger. (2 clues)

I instructed and demonstrated the walk and turn test. Wynn stated she felt comfortable attempting the test on the flat dry asphalt surface we were standing on in the sneakers she was wearing. Wynn stated she understood my instructions and had no questions regarding the test. I observed Wynn exit the instructional stance, begin the test before being instructed to do so, raise her arms for balance, fail to touch heel to toe multiple times and step off line multiple times. (5 clues)

I instructed and demonstrated the one leg stand test. Wynn stated she understood my instructions and had no questions regarding the test. I observed Wynn raise her right leg. Wynn raised her arms for balance and swayed while balancing. Wynn hopped and then put her foot down after approximately 18 seconds and looked at me. I asked if she understood what I was asking her to do. Wynn stated she would like me to explain the test again. I explained and demonstrated the test again. Wynn stated she understood my instructions and had no questions regarding the test. I observed Wynn raise her right foot and raise her arms for balance. After approximately 10 seconds I stopped the test for her safety. Wynn was swaying while balancing and hopped towards the travel lanes. (4 clues)

I asked if Wynn would be willing to continue with further tests which were not standardized field sobriety tests. Wynn agreed to continue. I instructed the Romberg balance test. Wynn stated she understood my instructions and had no questions regarding the test. Wynn estimated the passage of 30 seconds in approximately 22 seconds. During the test, I observed distinct eyelid tremors in both eyes. I also observed Wynn swaying side to side during the test.

I asked Wynn to sit on the front push bumper of my patrol car and instructed the lack of convergence test. Wynn stated she understood my instructions and had no questions regarding the test. I performed the test twice. On the first attempt, Wynn did not follow my finger in towards her face. On the second attempt, I observed distinct lack of convergence in her left eye.

**NEVADA HIGHWAY PATROL
DECLARATION OF ARREST**

PAGE 3

ID: 5686794EVENT: 190202314

I asked if Wynn would be willing to take a preliminary breath test. Wynn stated that she would rather just get her blood drawn and refused the PBT.

At approximately 0245, I placed Wynn in my custody using a rear passive technique, checked the handcuffs for tightness and double locked them. I performed a rear-standing search for weapons and contraband with negative findings. Wynn was then placed in the rear of my patrol car. I asked Wynn if there was anything in the car that she would like to take with her and she stated that she wanted her purse.

I retrieved her purse from the vehicle, which was the only purse in the vehicle and performed a search of the contents. In the bottom of her purse was an orange prescription pill bottle addressed to a "Patricia Mortel" dated 09/20/2010 containing 20 round white pills stamped "74" on one side and "TEVA" on the other. A drugs.com search of the pill identified it as "Zolpidem Tartrate 10mg", used to treat insomnia. Drugs.com classified the pill as a schedule 4 controlled substance and listed the pill availability as by prescription only. Wynn was then transported to the City of Las Vegas Detention Center.

Upon arrival to the jail, I read Wynn her rights for a DUI arrest to which she agreed to take a blood test. After several failed attempts by the medical staff at the jail to draw blood, Wynn was transported to UMC Trauma Center. At the hospital, I observed lab technician Sabrina Wilson draw two vials of blood from Wynn's right forearm at approximately 0417. I took custody of the vials and sealed them appropriately in the blood kit box. Wynn was then transported back to the City of Las Vegas Detention Center.

Upon arrival to the jail, I realized I had made a mistake regarding the type of charges on Wynn. The city jail will not accept felony charges. Due to the state statutes regarding possession of a controlled substance, Wynn was then transported to the Clark County Detention Center where she was booked appropriately without incident. The blood kit and pill bottle were both booked appropriately at the NHP Southern Command Evidence Vault.

Wherefore, the declarant prays that a finding be made by a magistrate that probable cause exists to hold said person for preliminary hearing (if charges are a felony or gross misdemeanor) or for trial (if charges are misdemeanor).

DECLARANT: 

Trp. C. Black #434

Involvements

| Date | Type | Description | Relationship |
|----------|----------|-----------------------------------|-----------------|
| 03/02/19 | Name | WYNN, NATALIE RAE | Arrestee |
| 03/02/19 | Vehicle | SIL 2013 KIA SOR NV | Vehicle |
| 02/26/19 | Offense | 51358 454.316.1 - G - 1 count | Charged With |
| 02/26/19 | Offense | 51127 453.336.2a - F - 1 count | Charged With |
| 02/26/19 | Offense | 53900 484C.110.1a - M - 1 count | Charged With |
| 02/26/19 | Offense | 53788 484B.223.1 - M - 1 count | Charged With |
| 02/26/19 | Cad Call | 02:26:27 02/26/19 TRAFFIC STOP PS | Initiating Call |