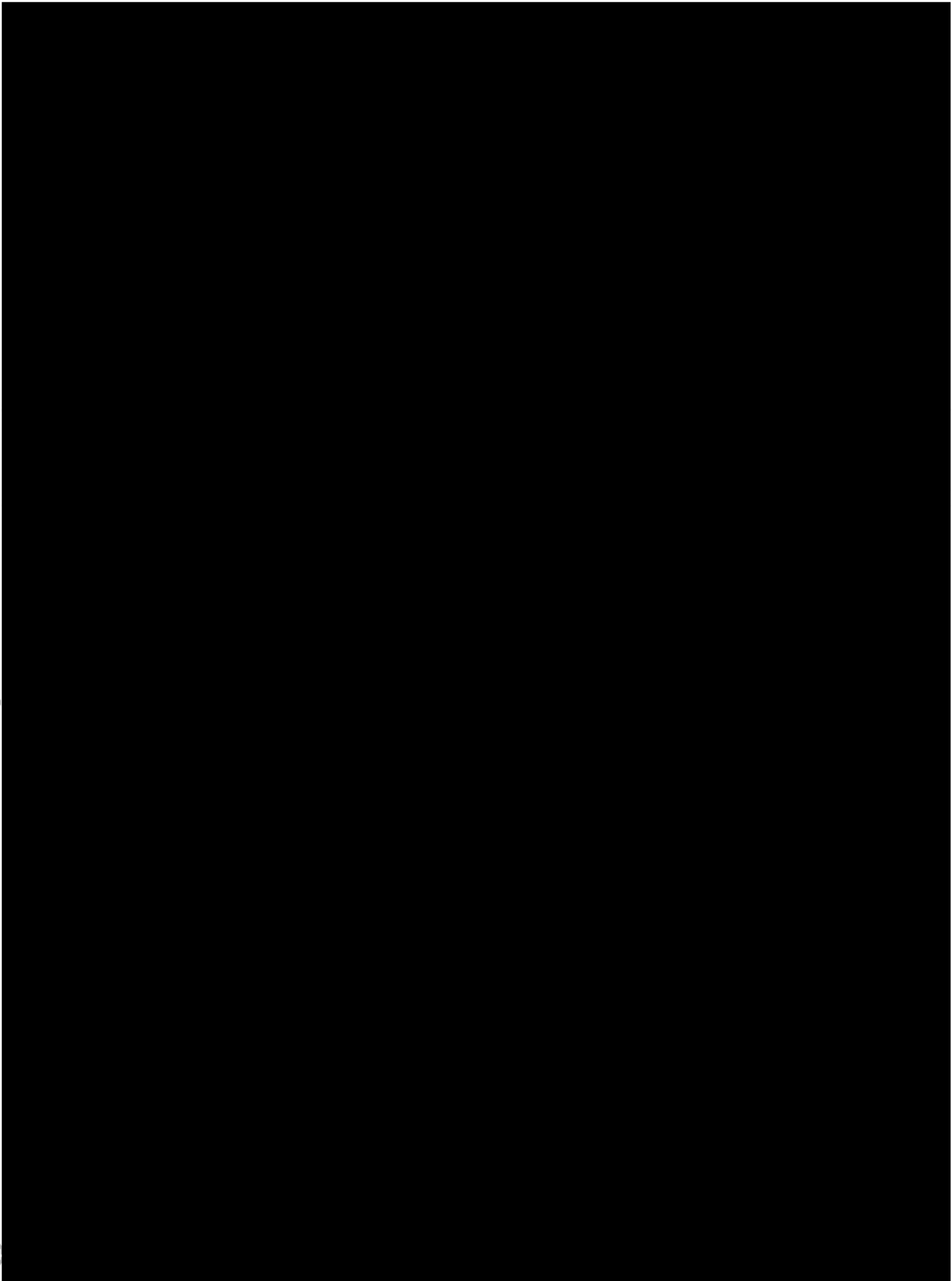
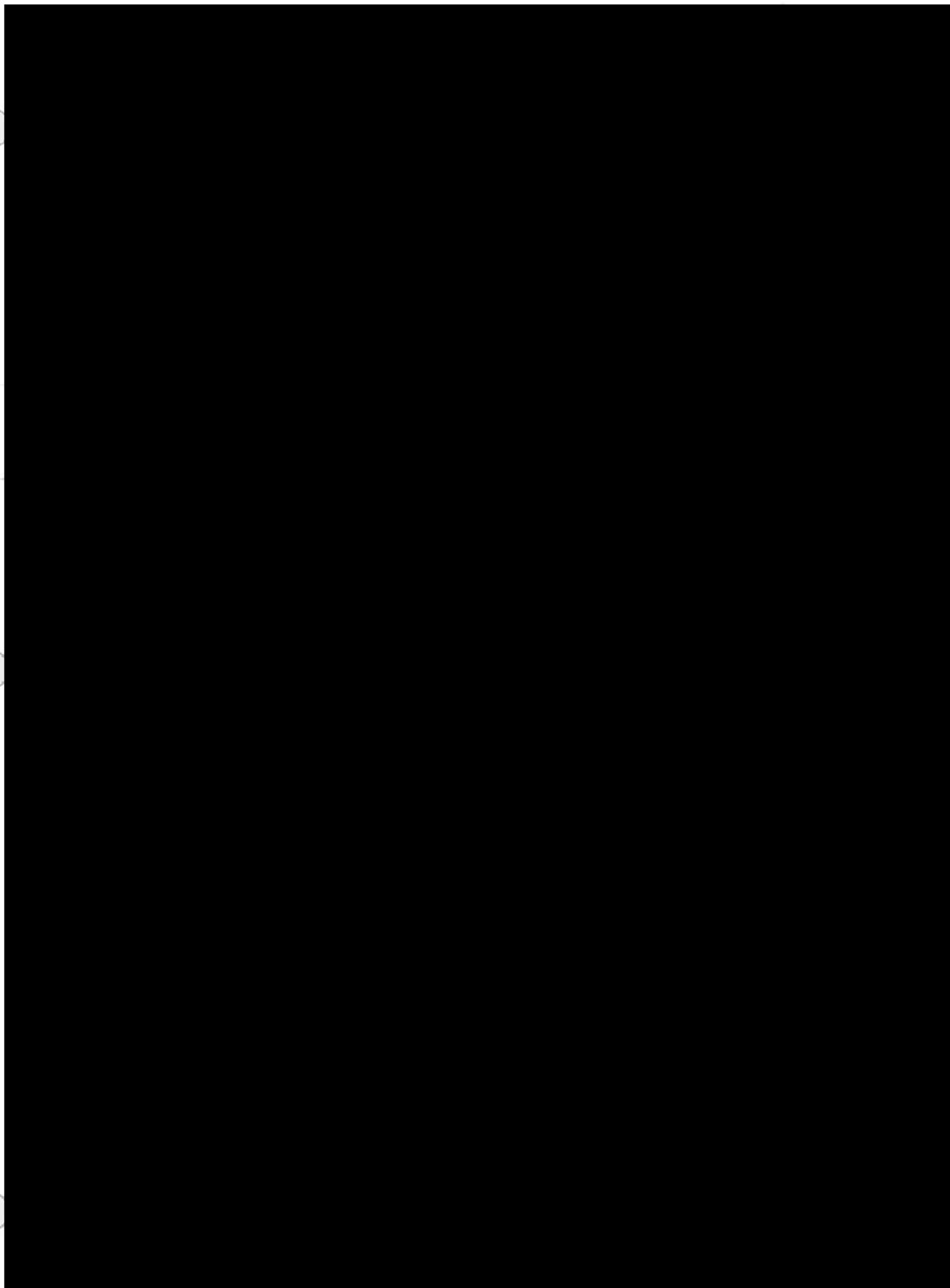


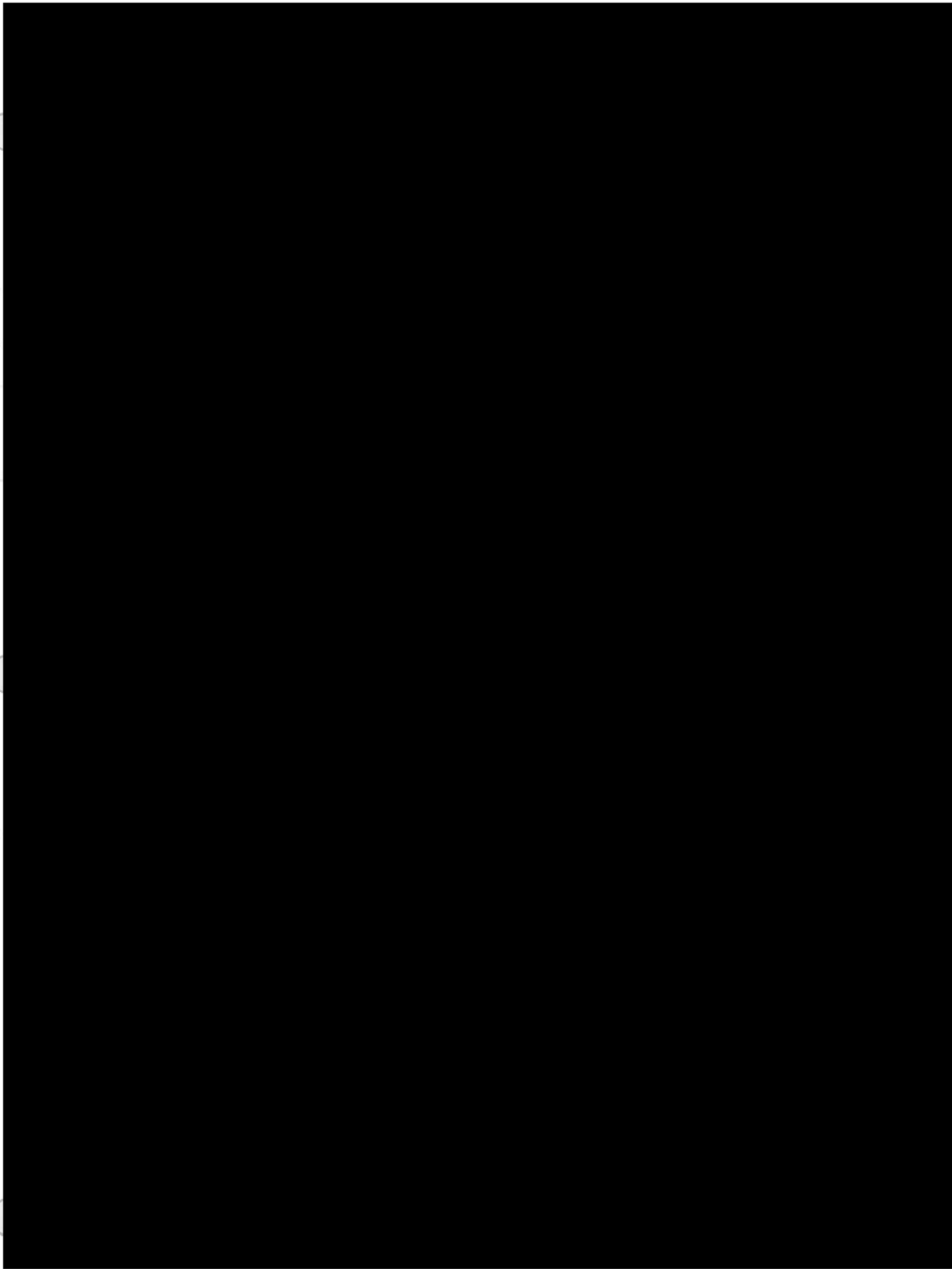


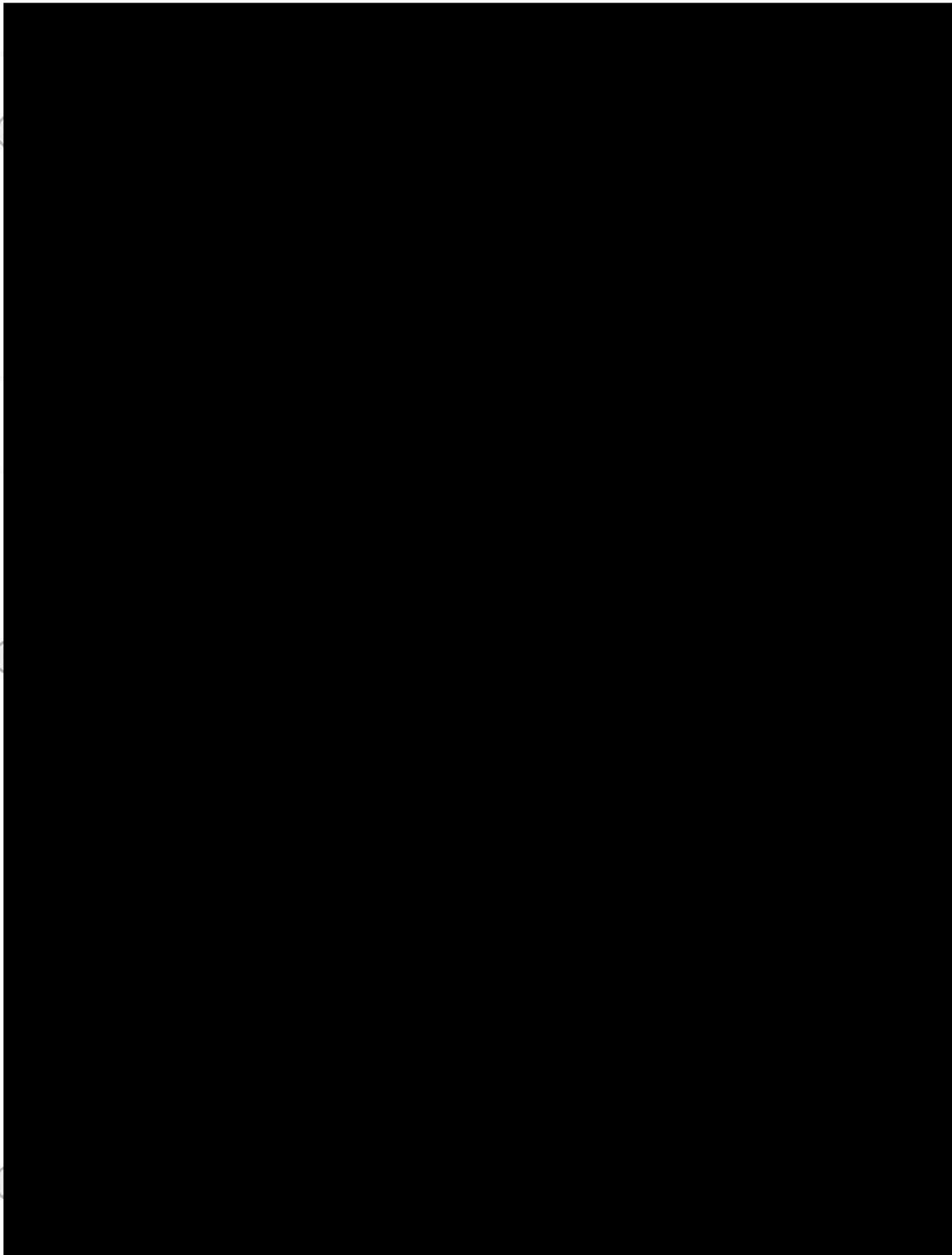




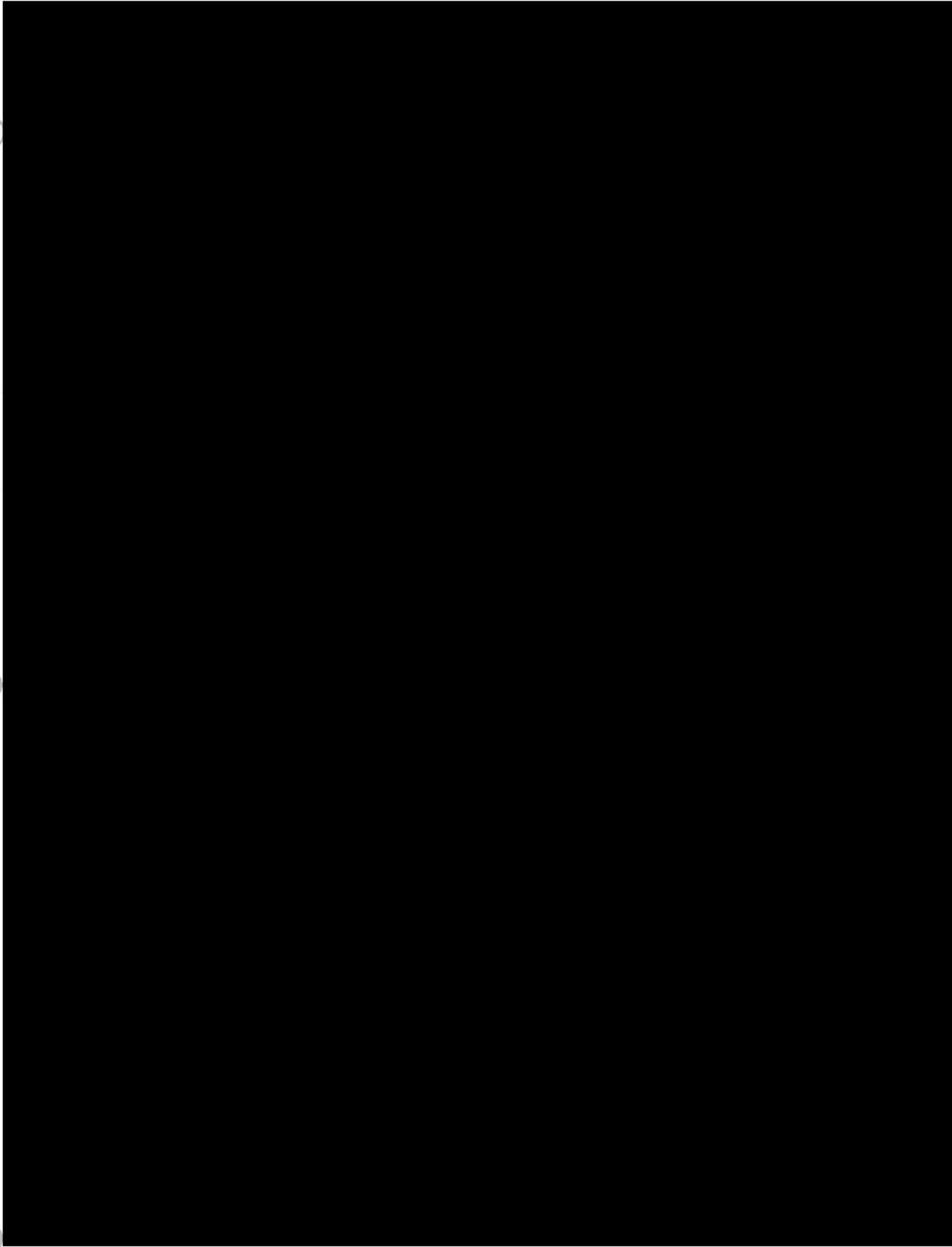






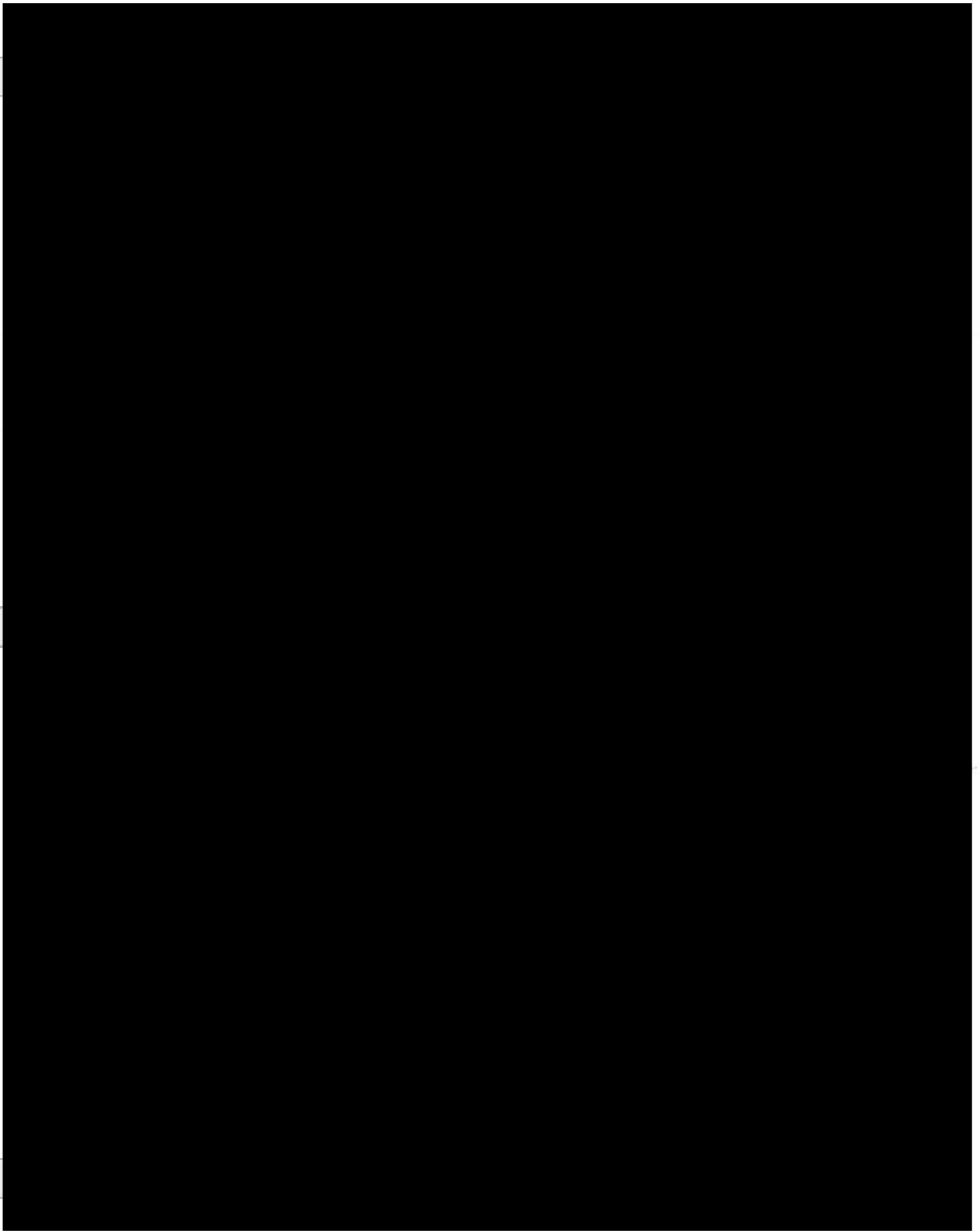






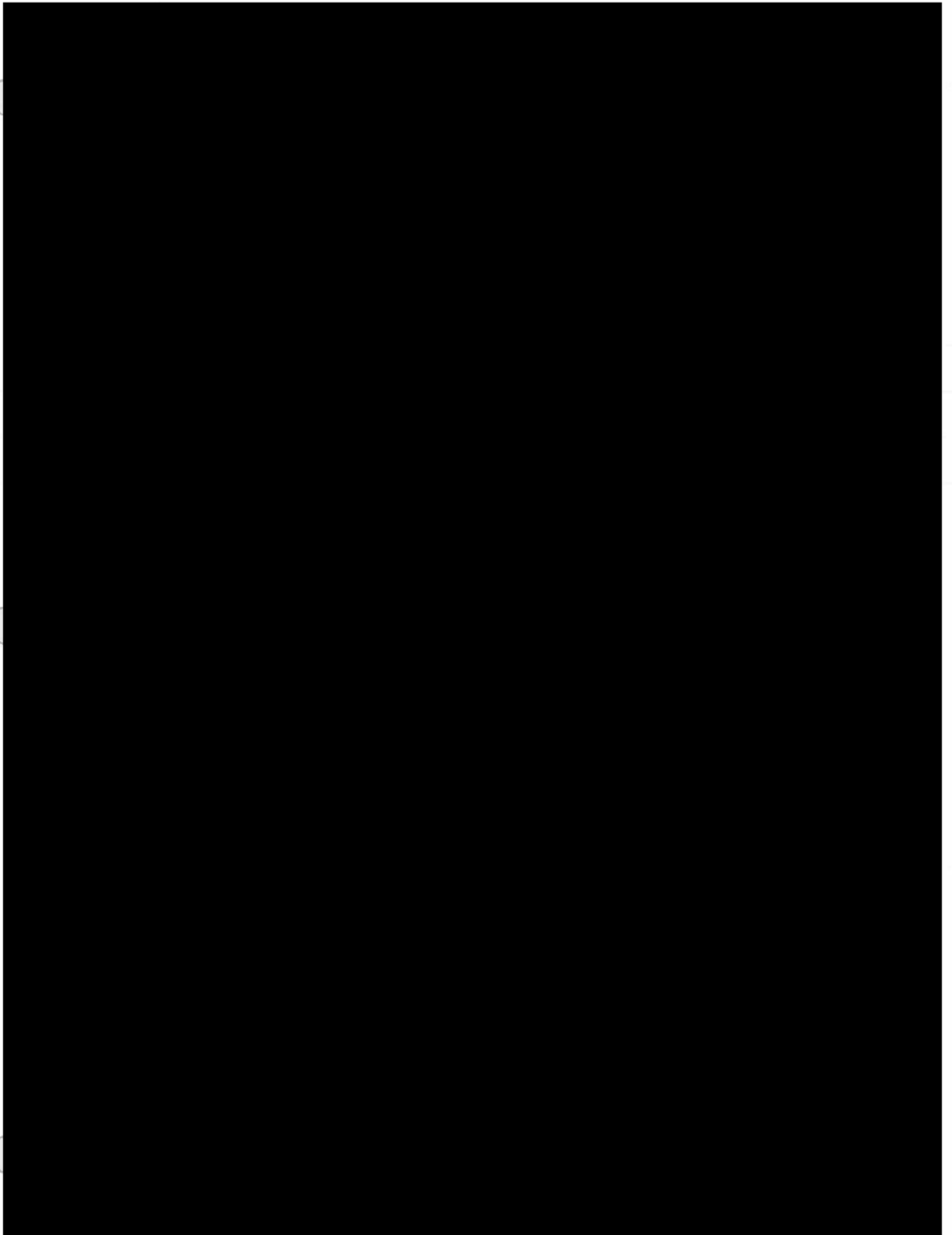




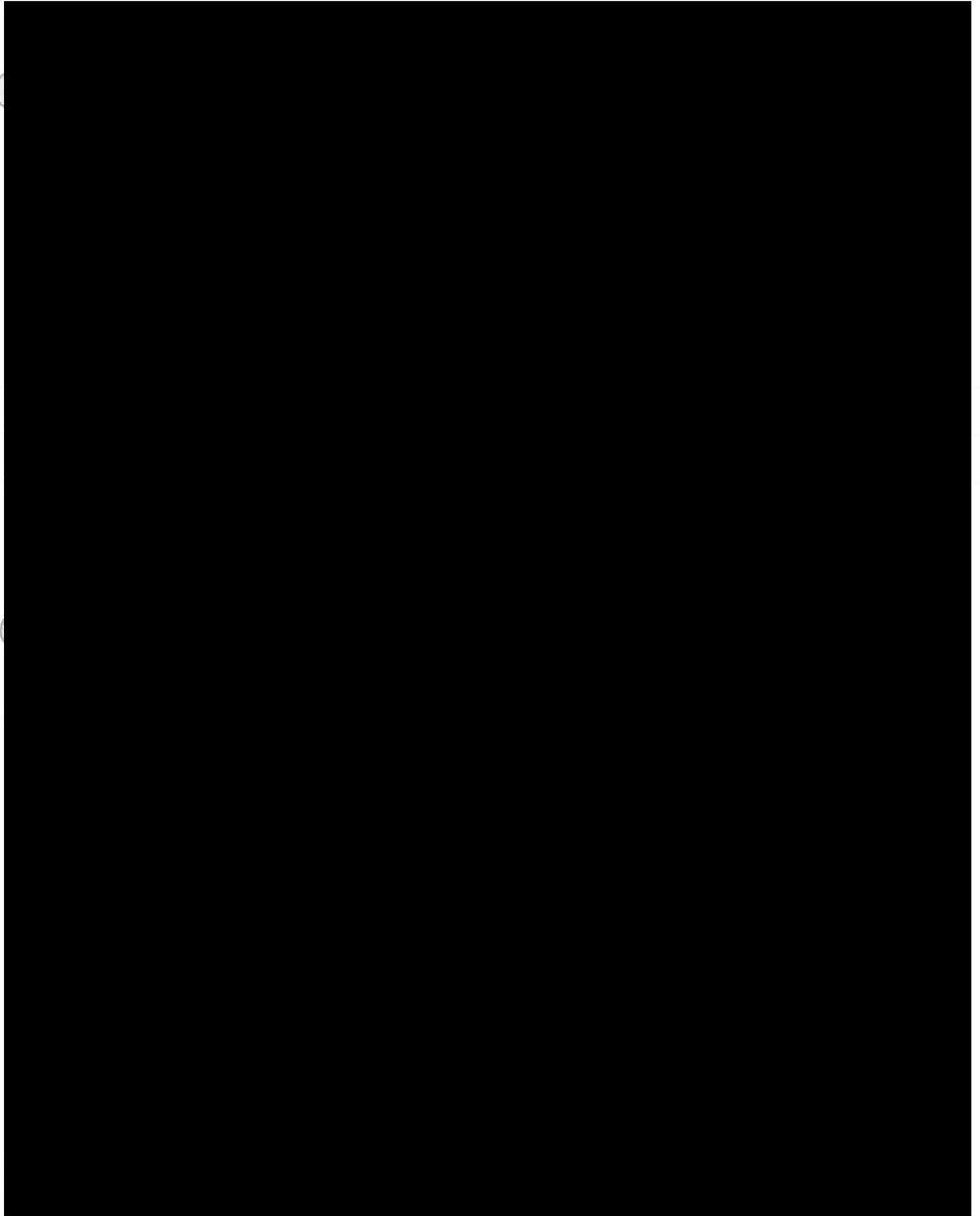






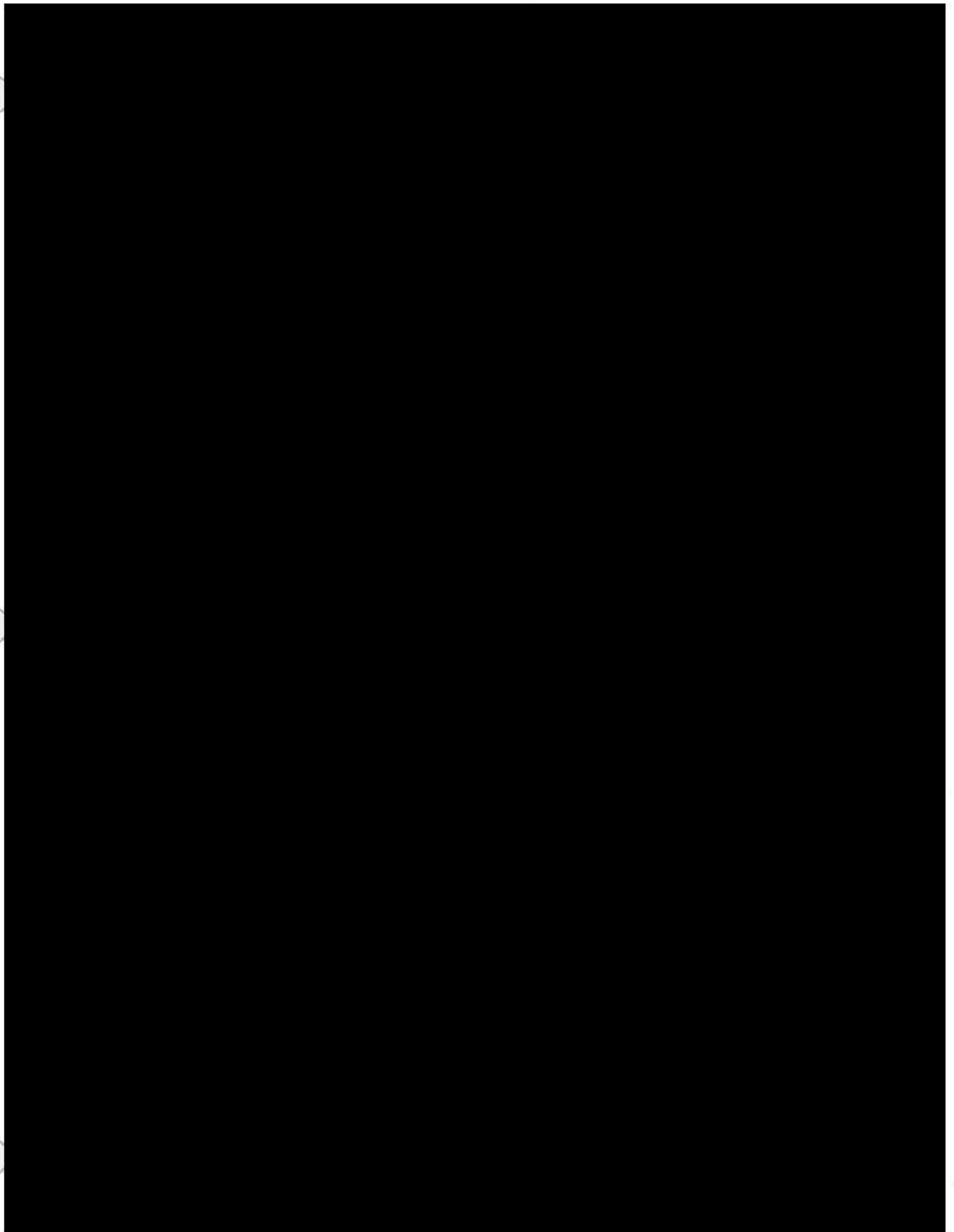




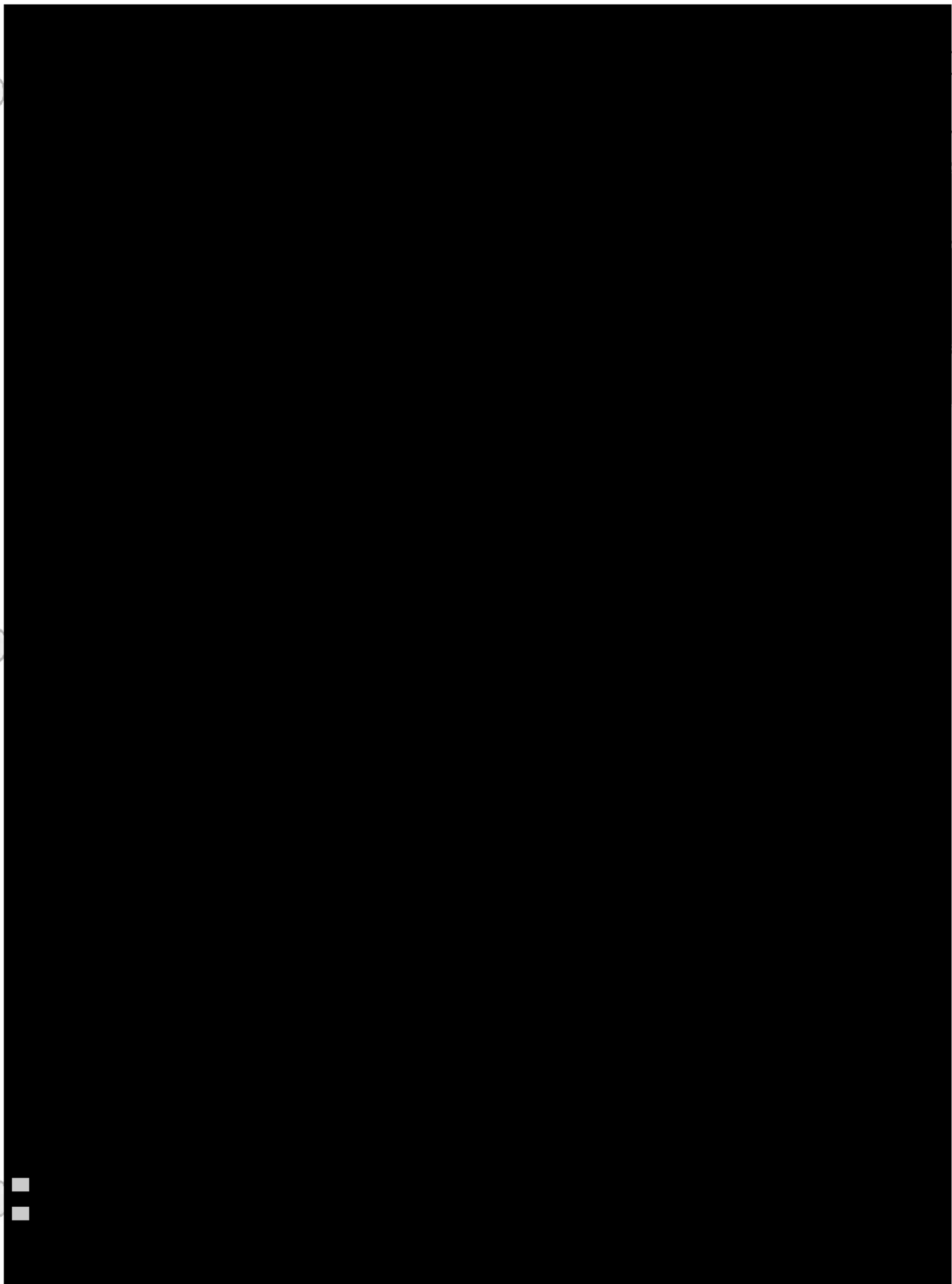








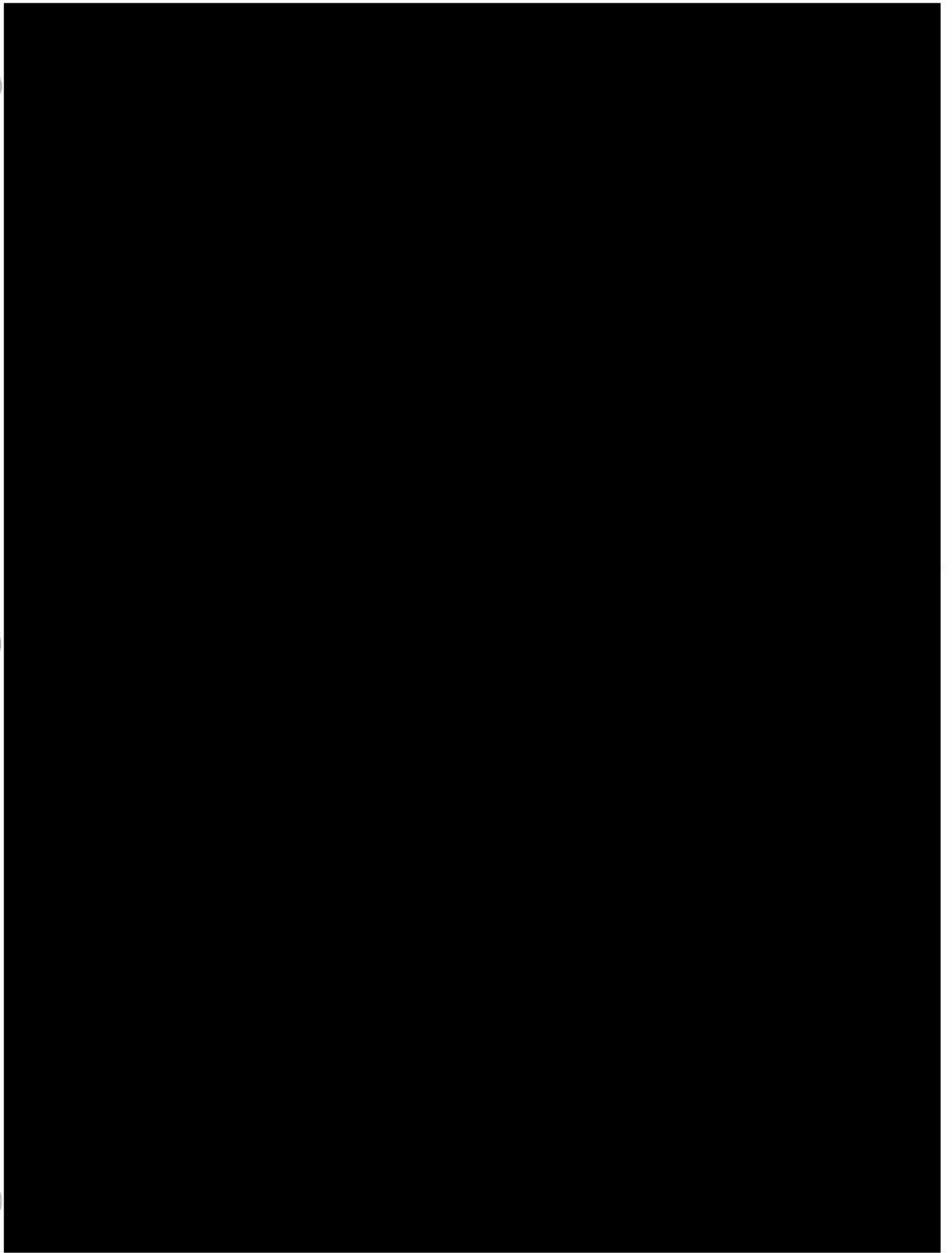


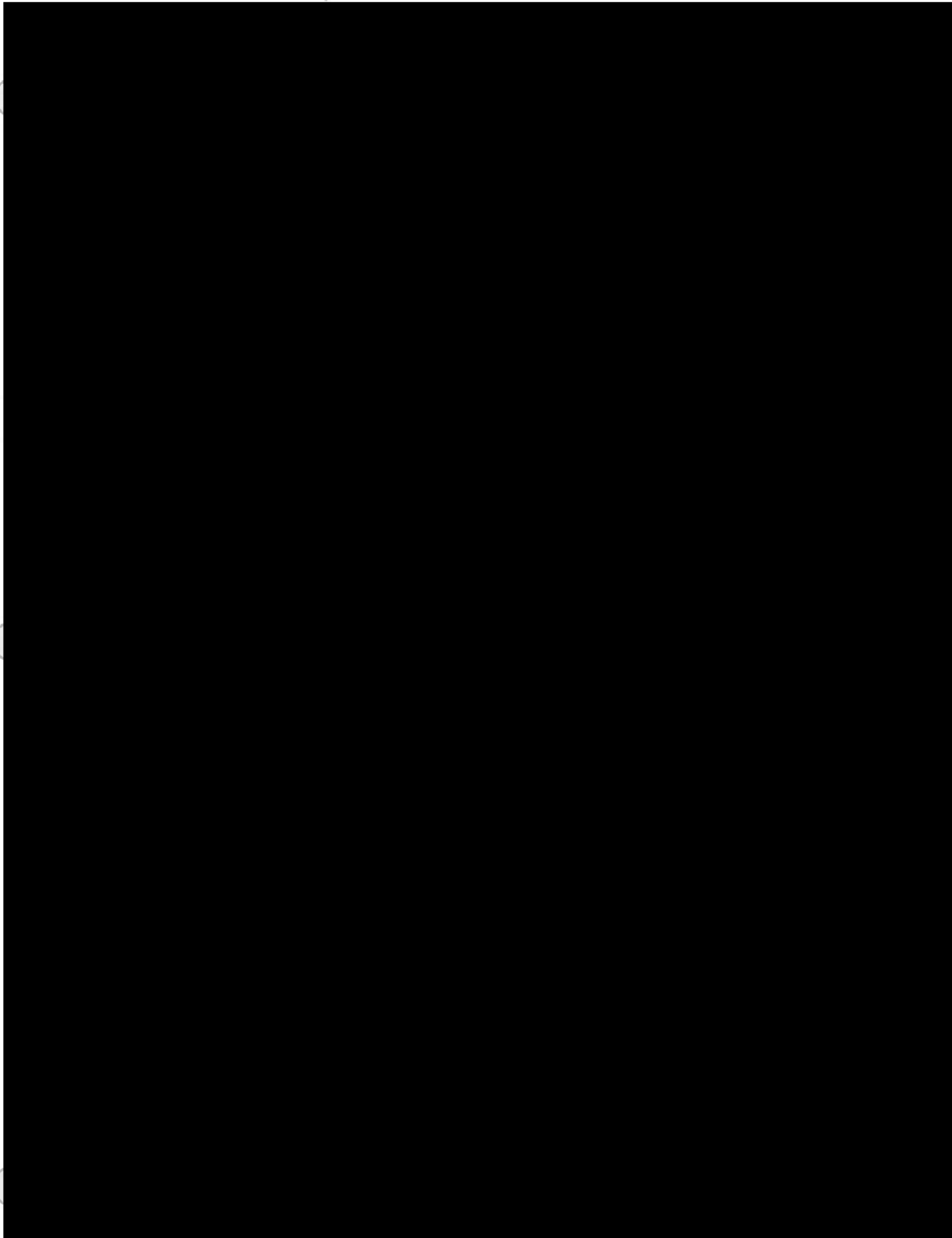












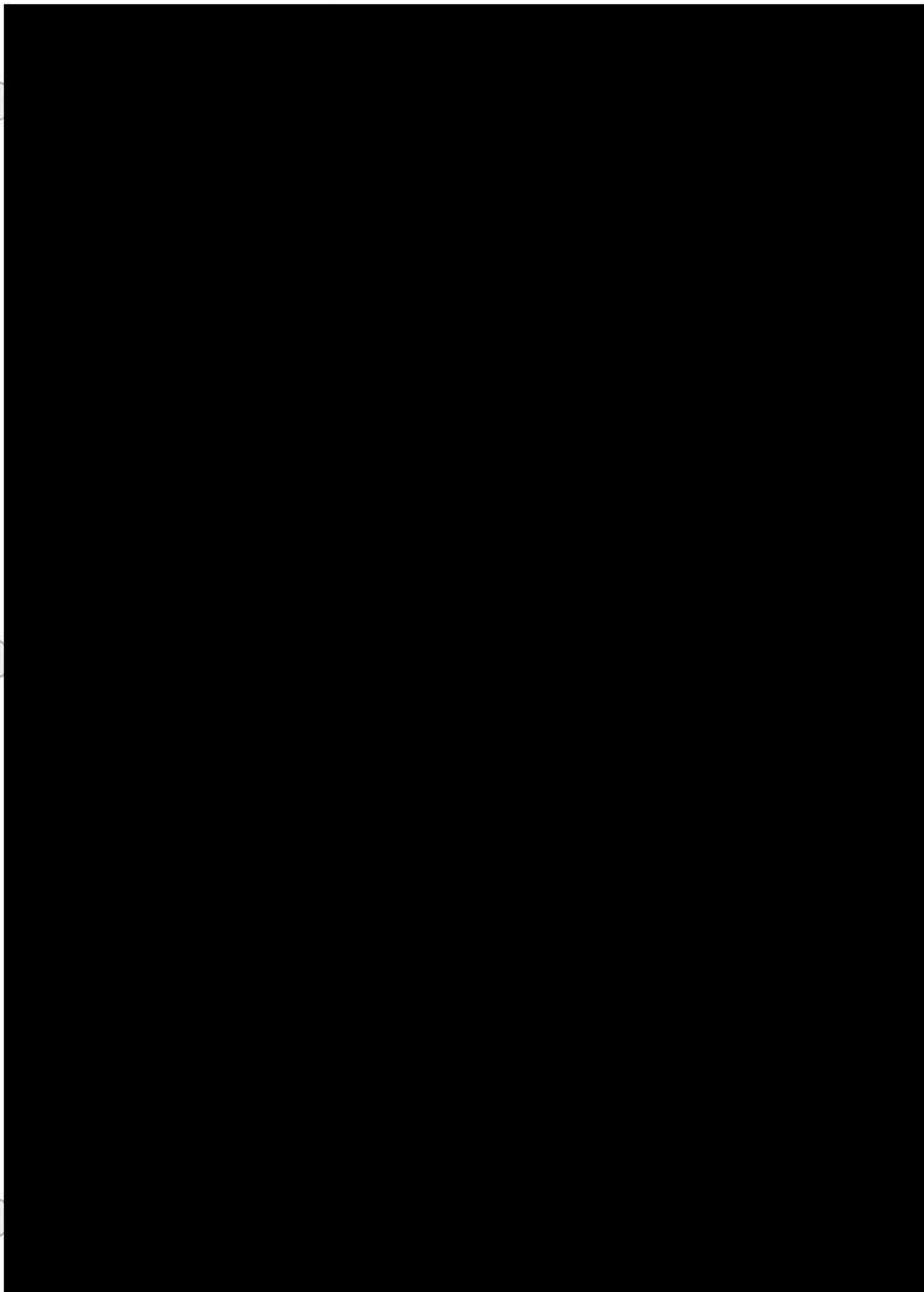




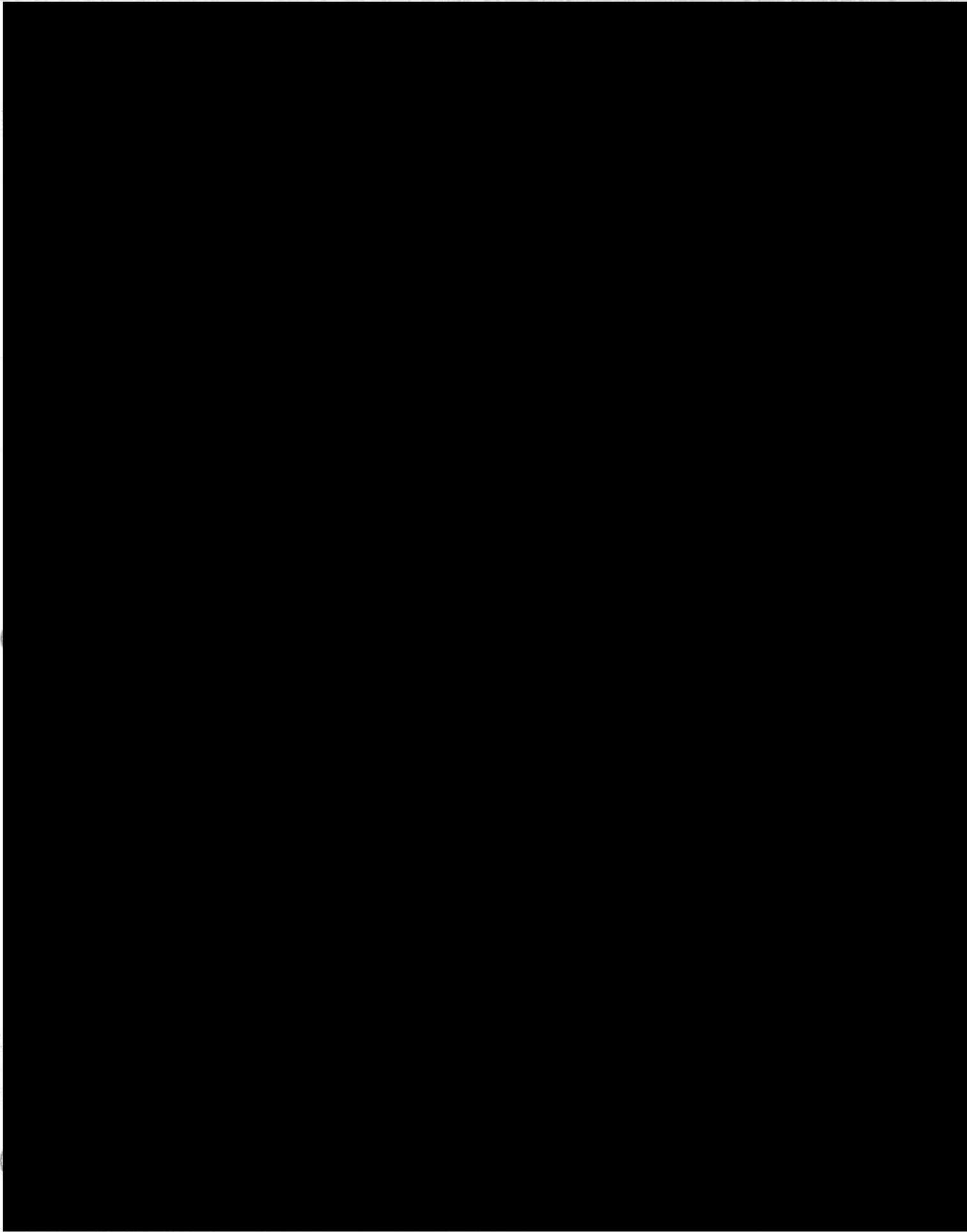


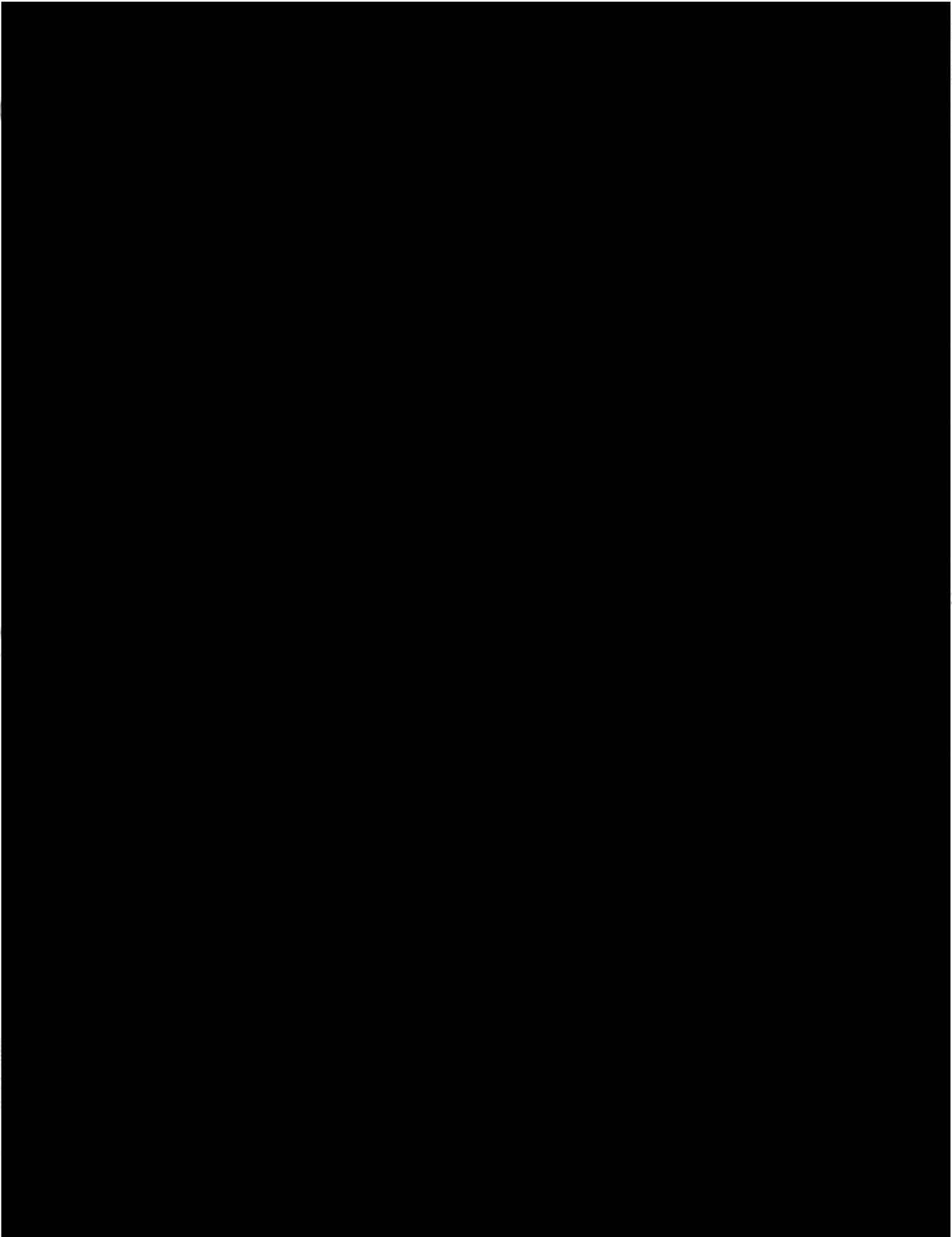


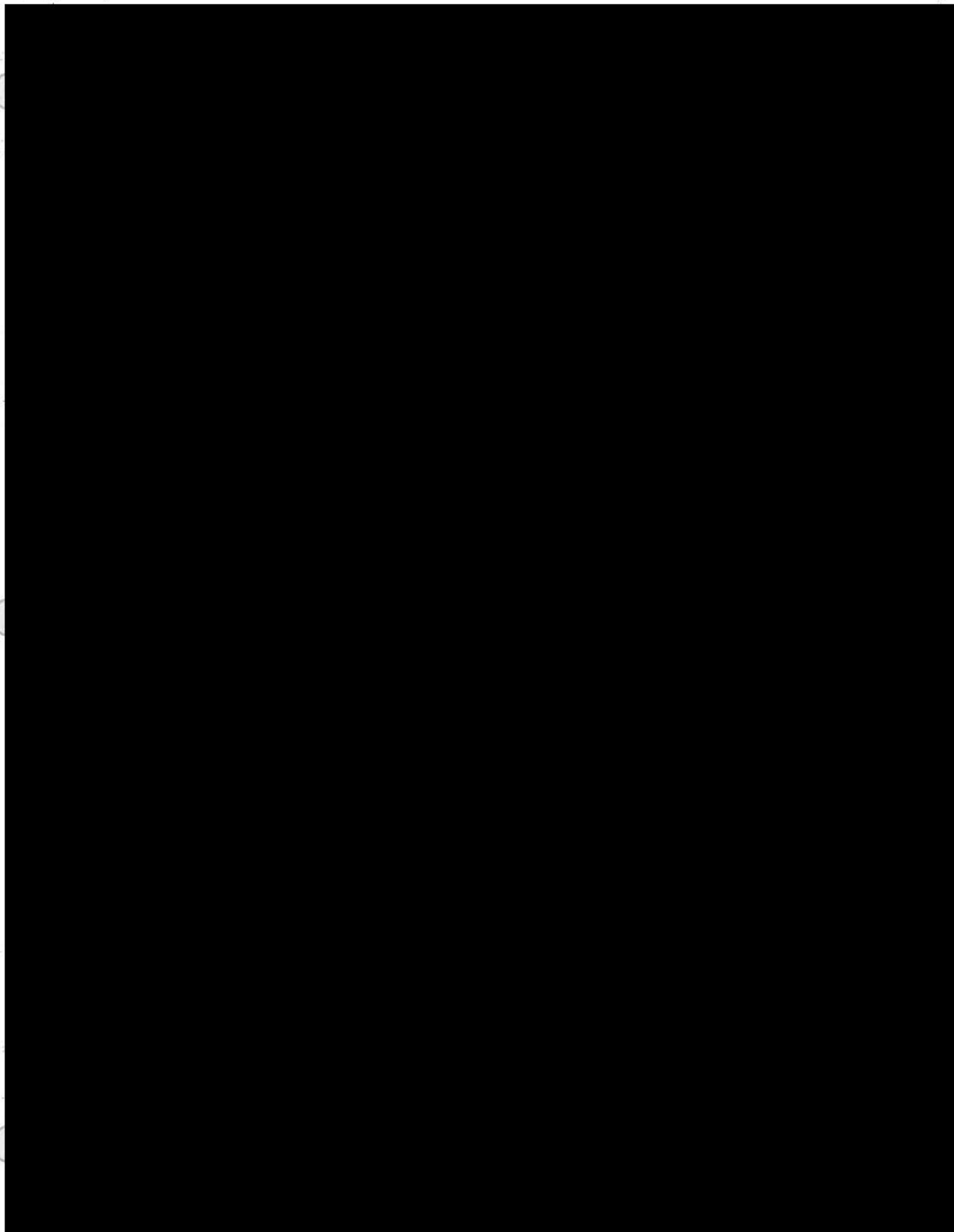


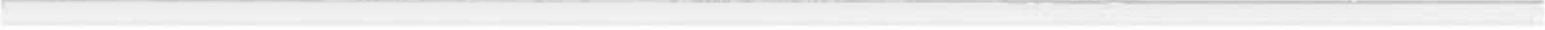
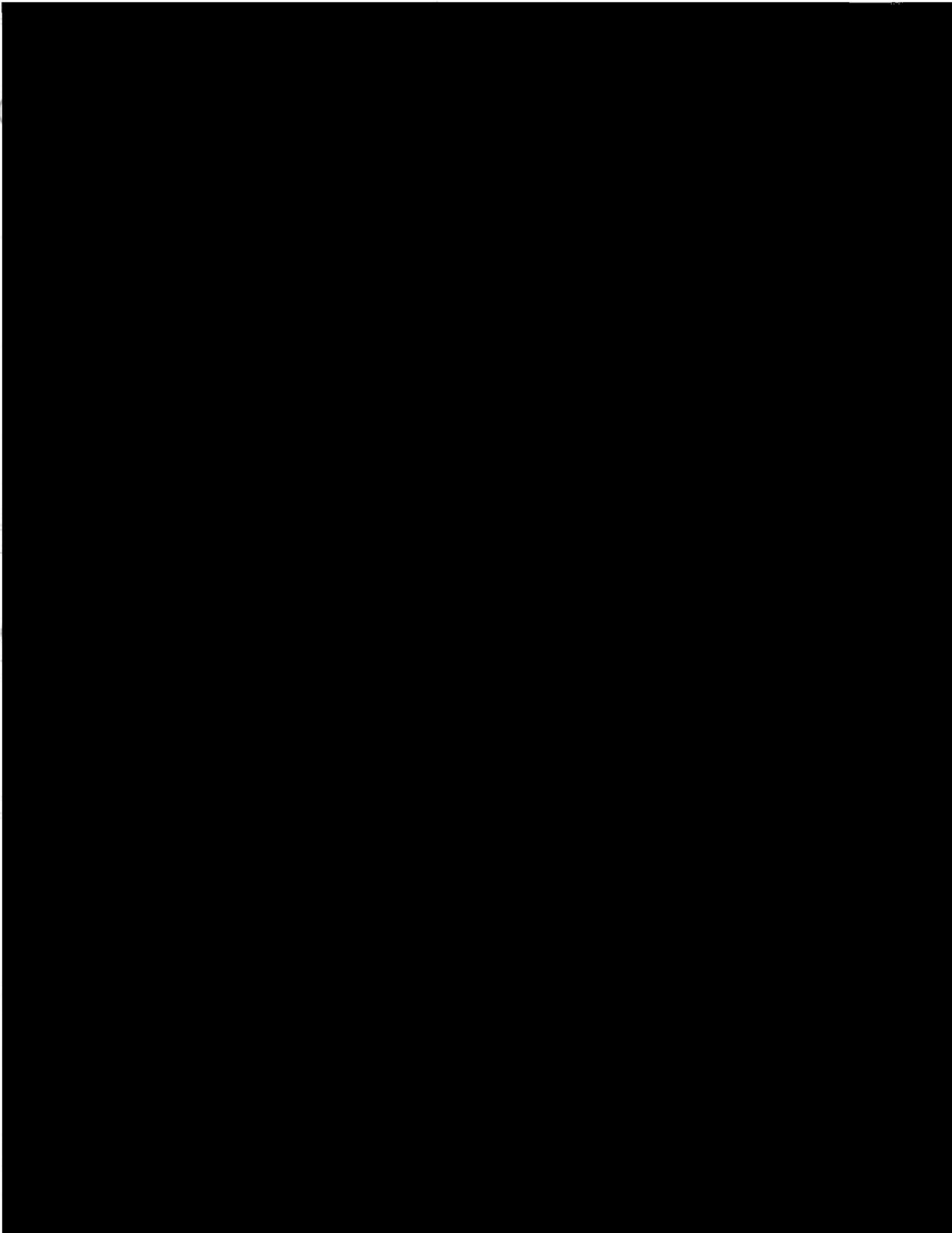






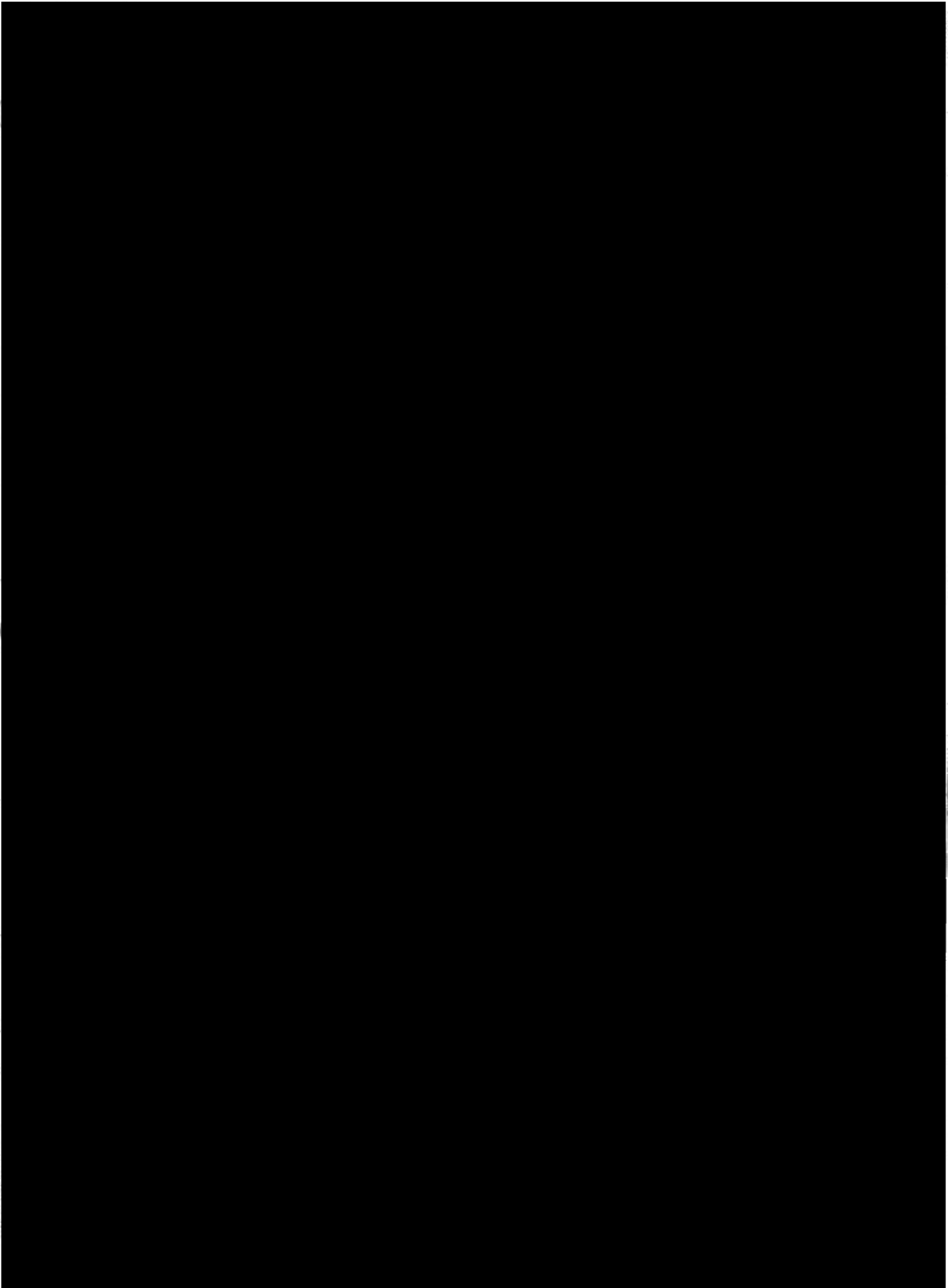




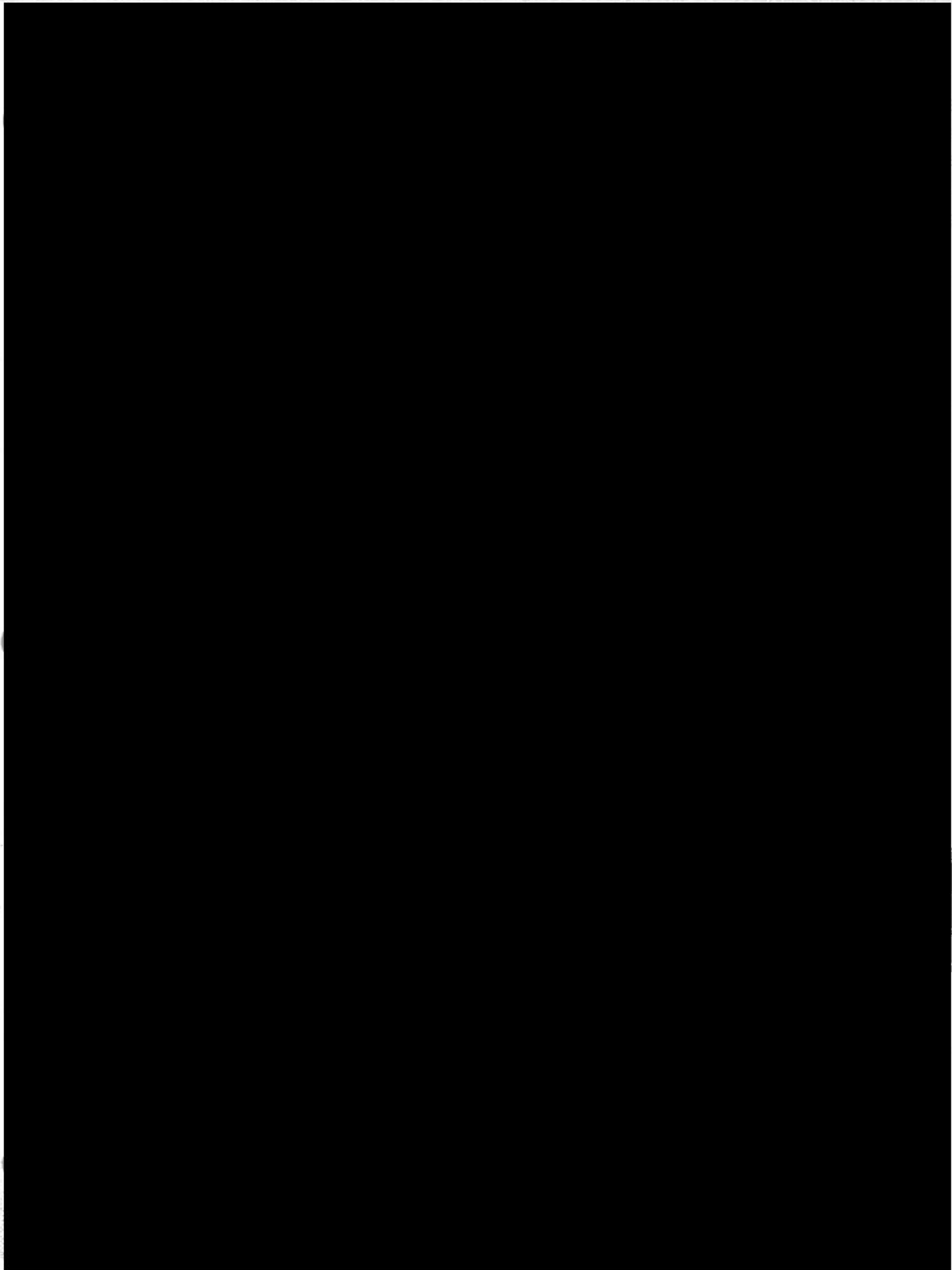






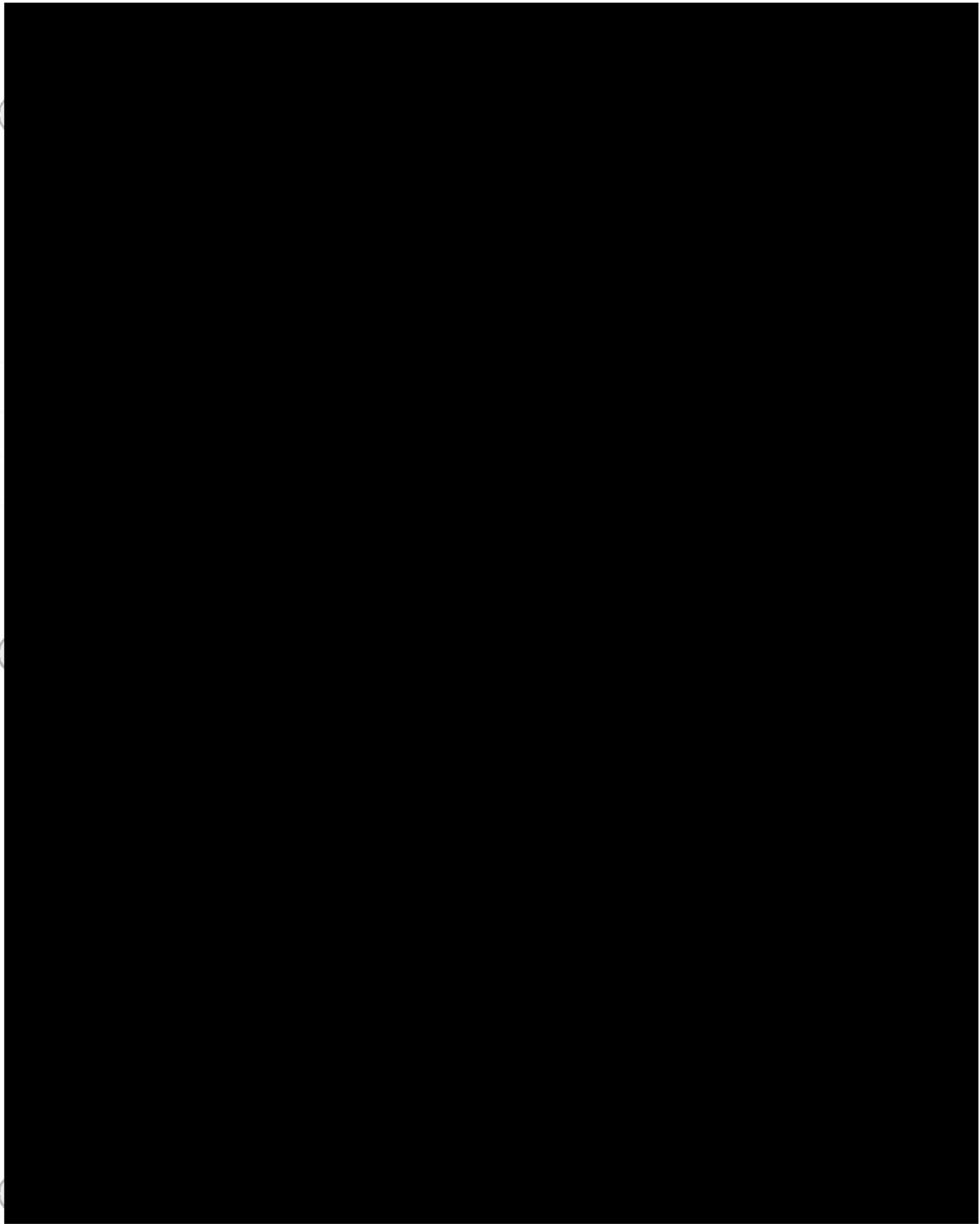










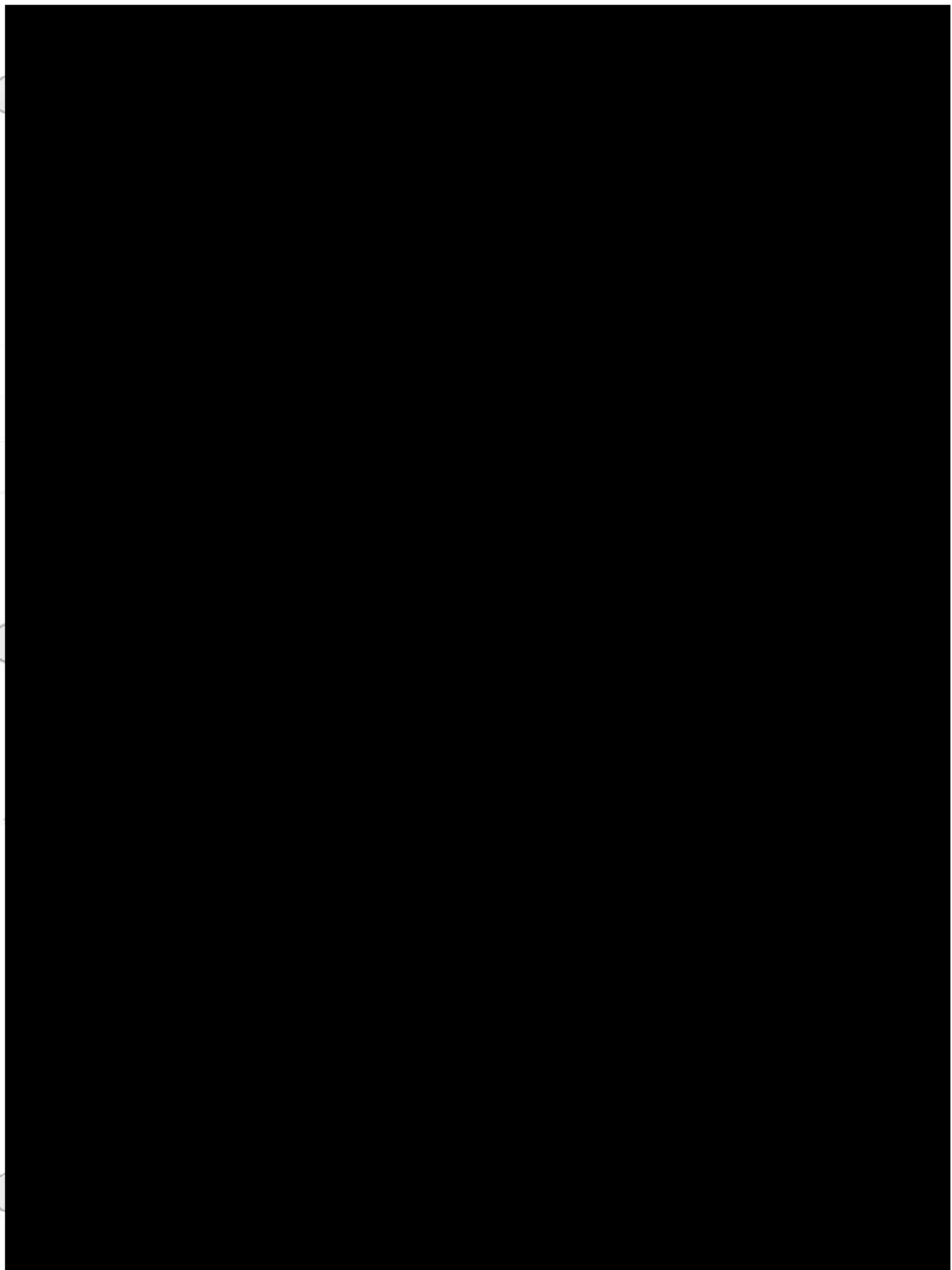


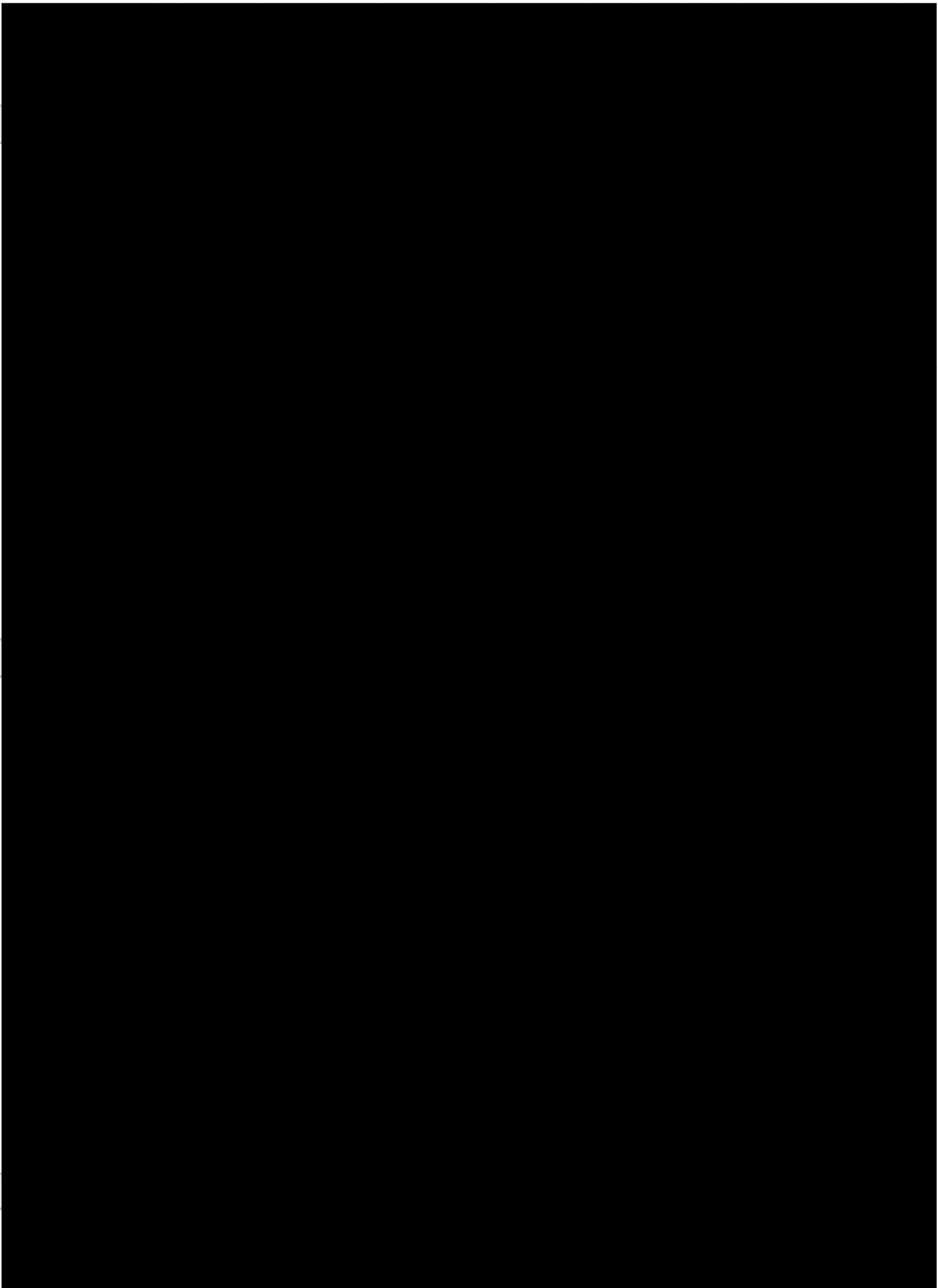


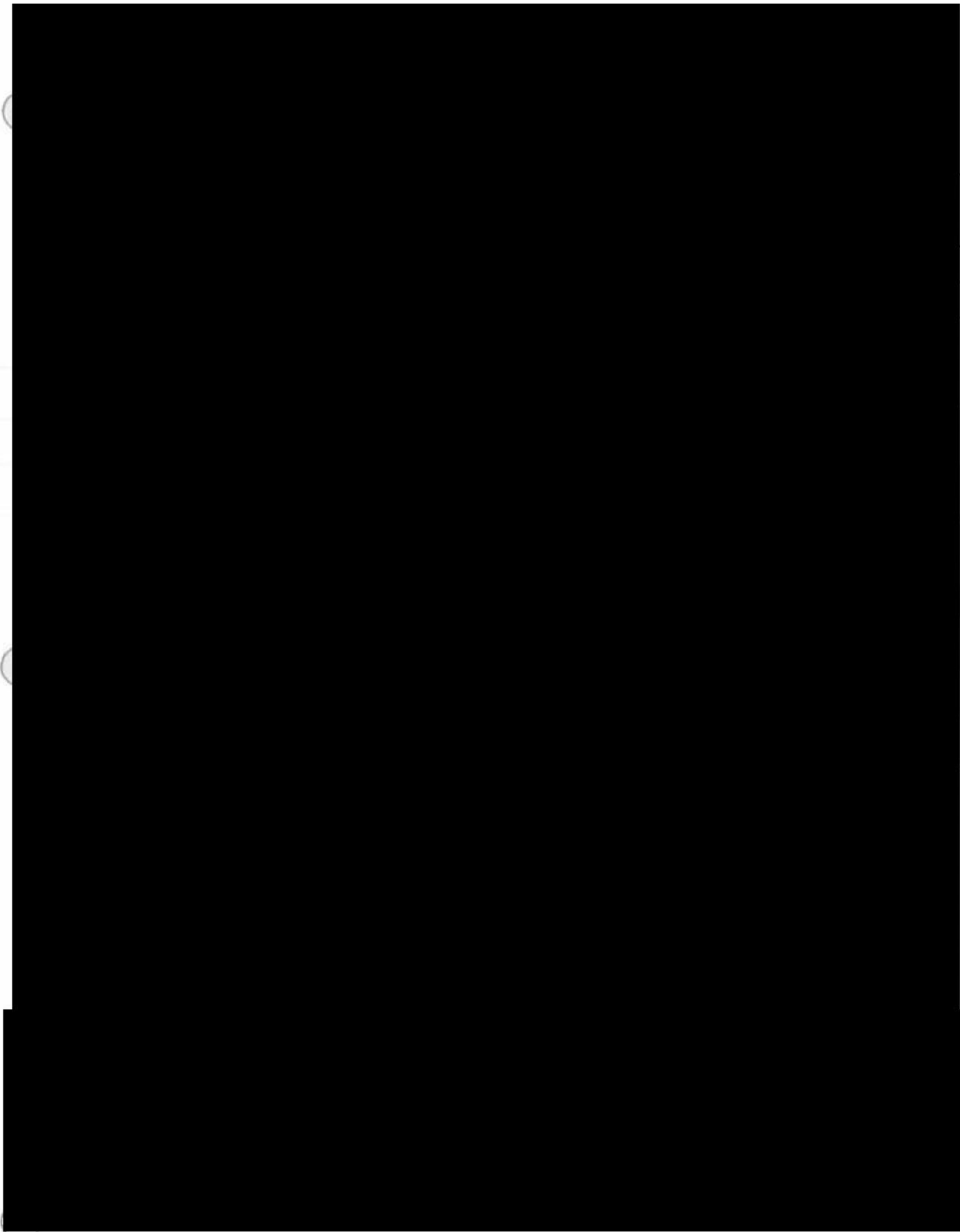


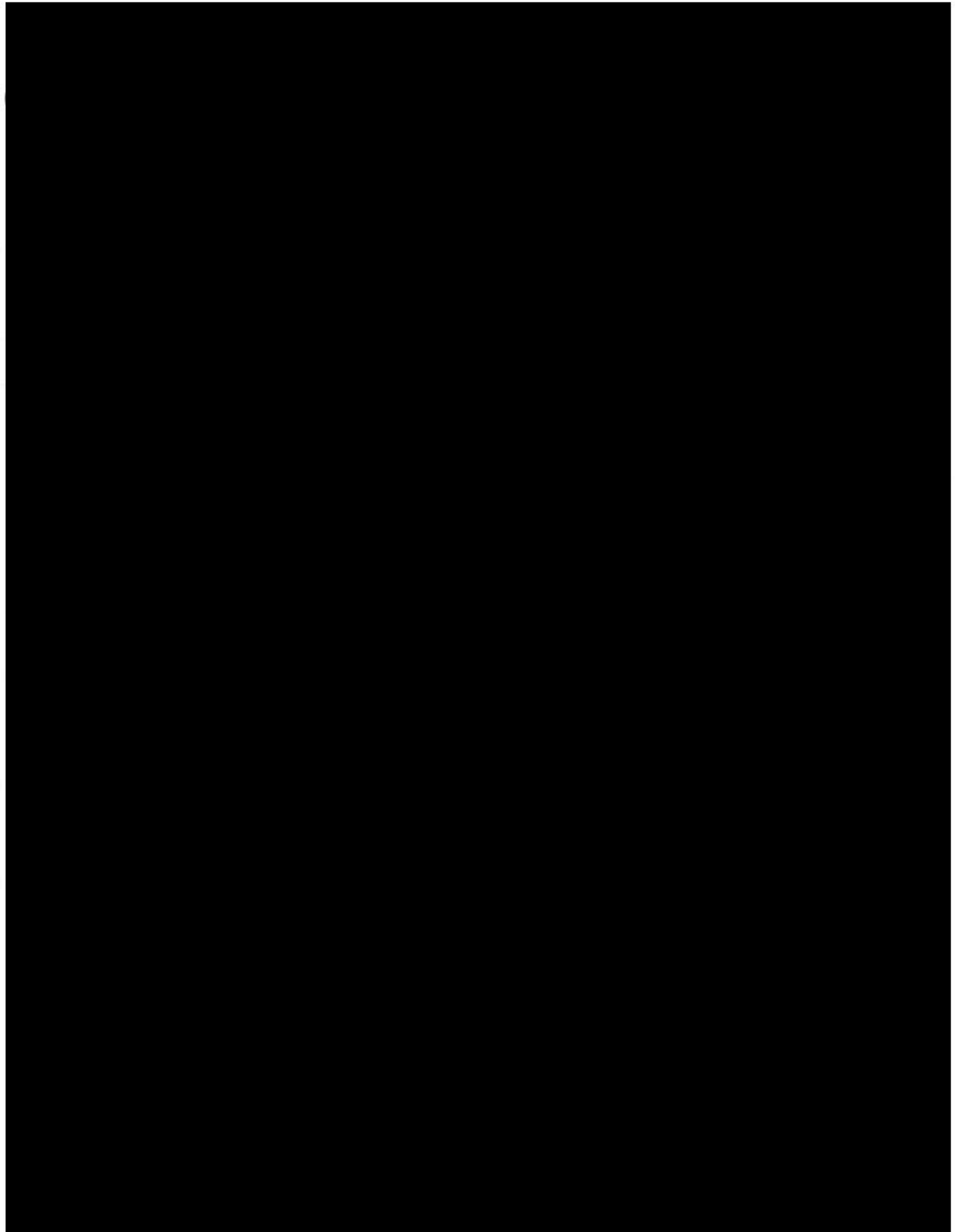




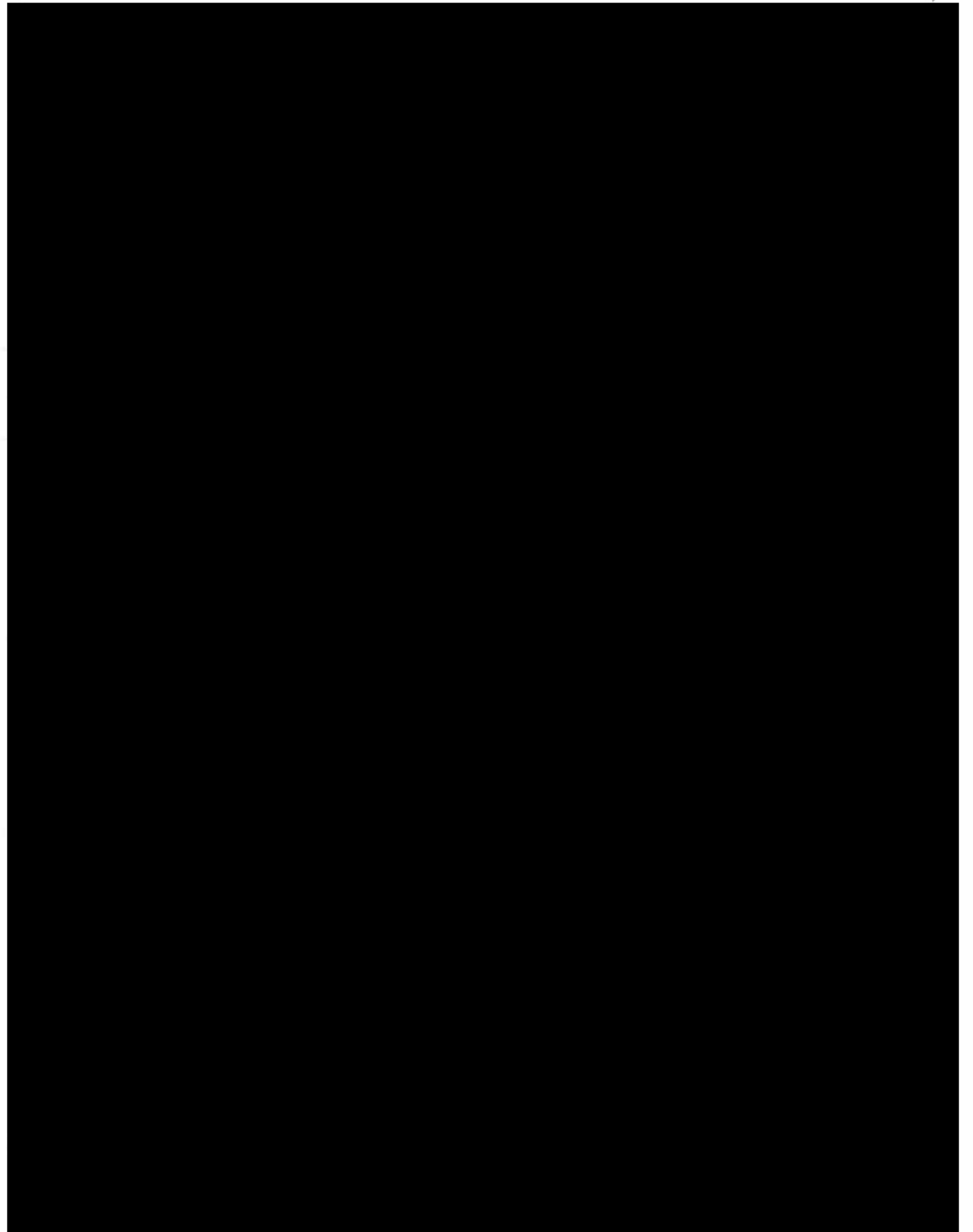


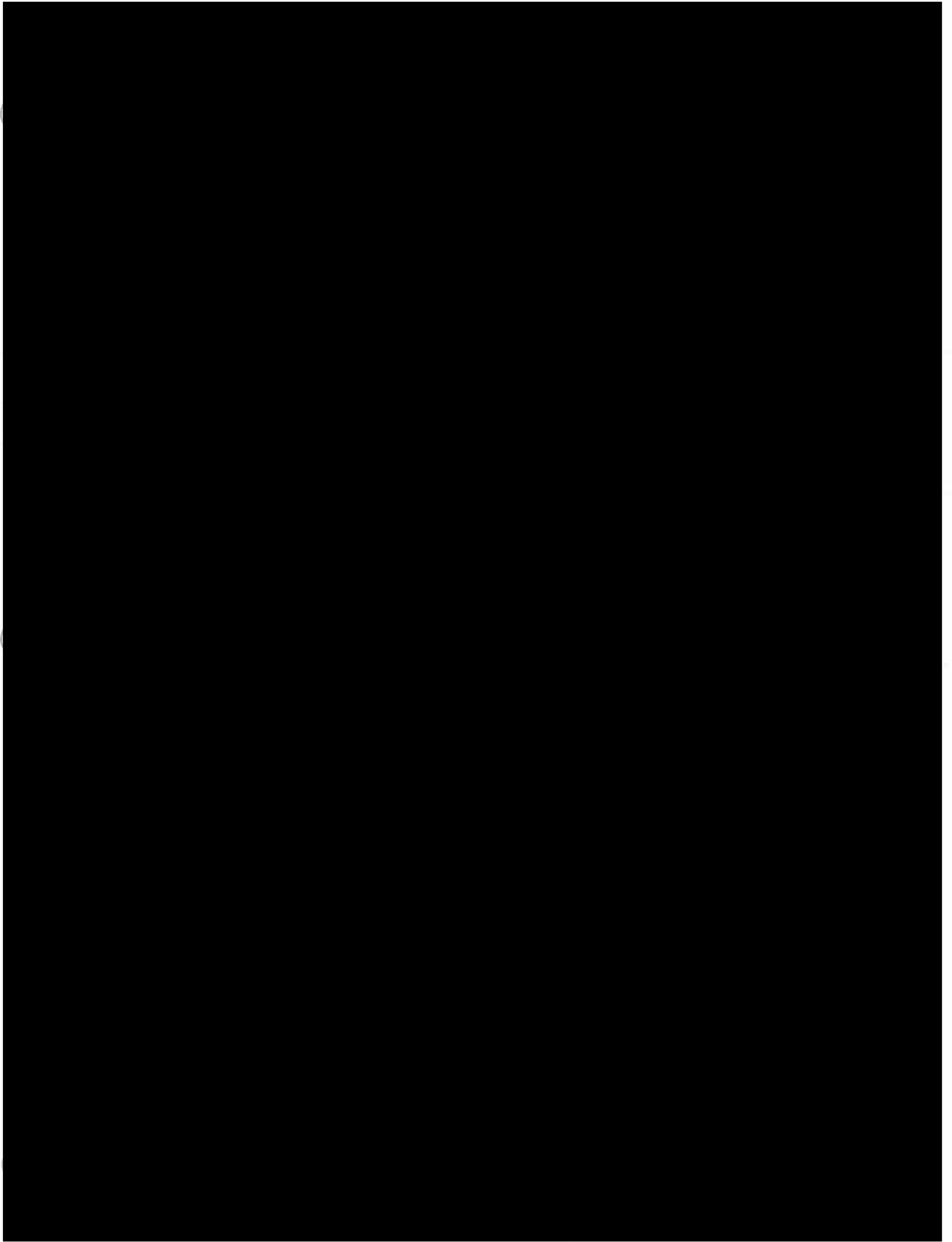




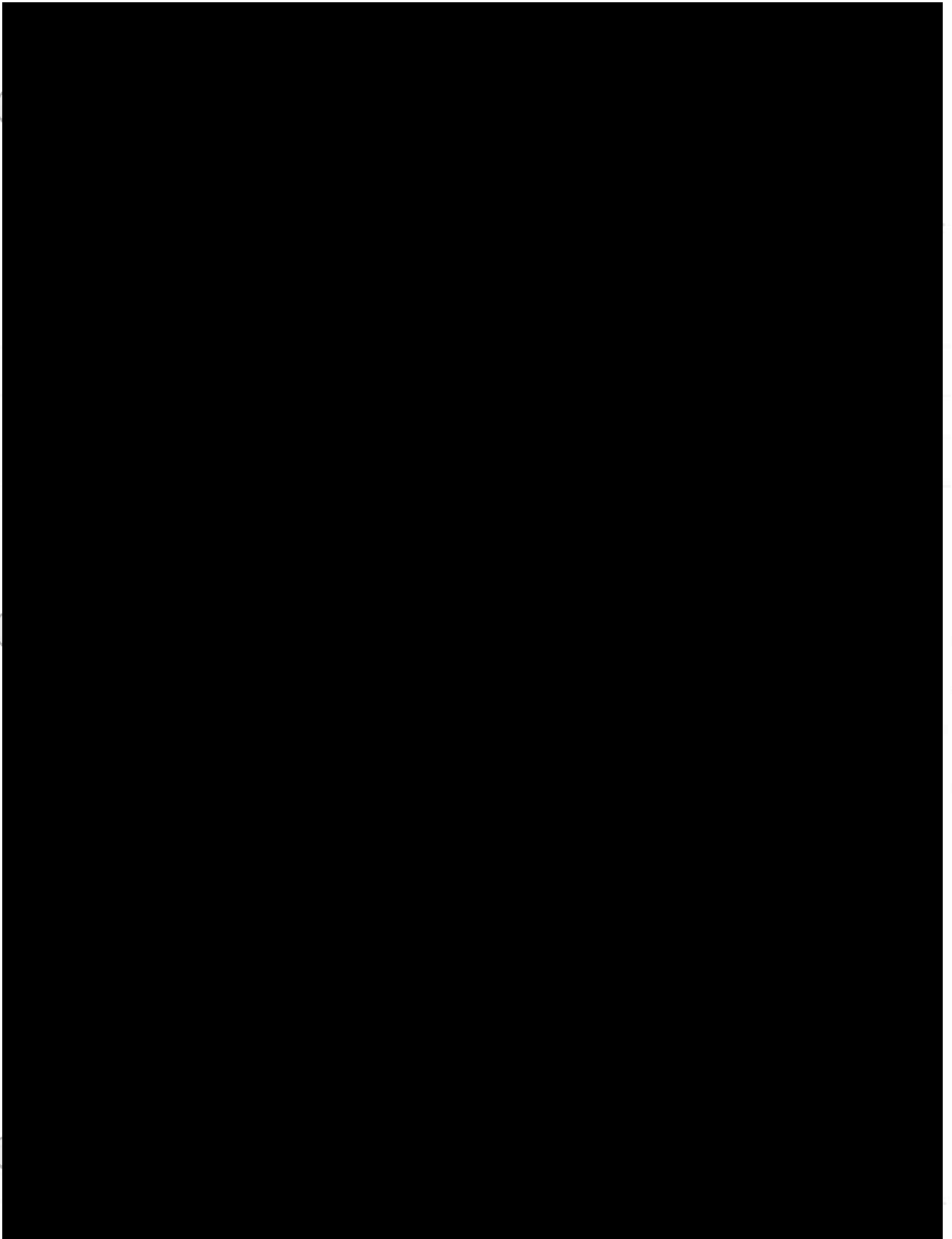


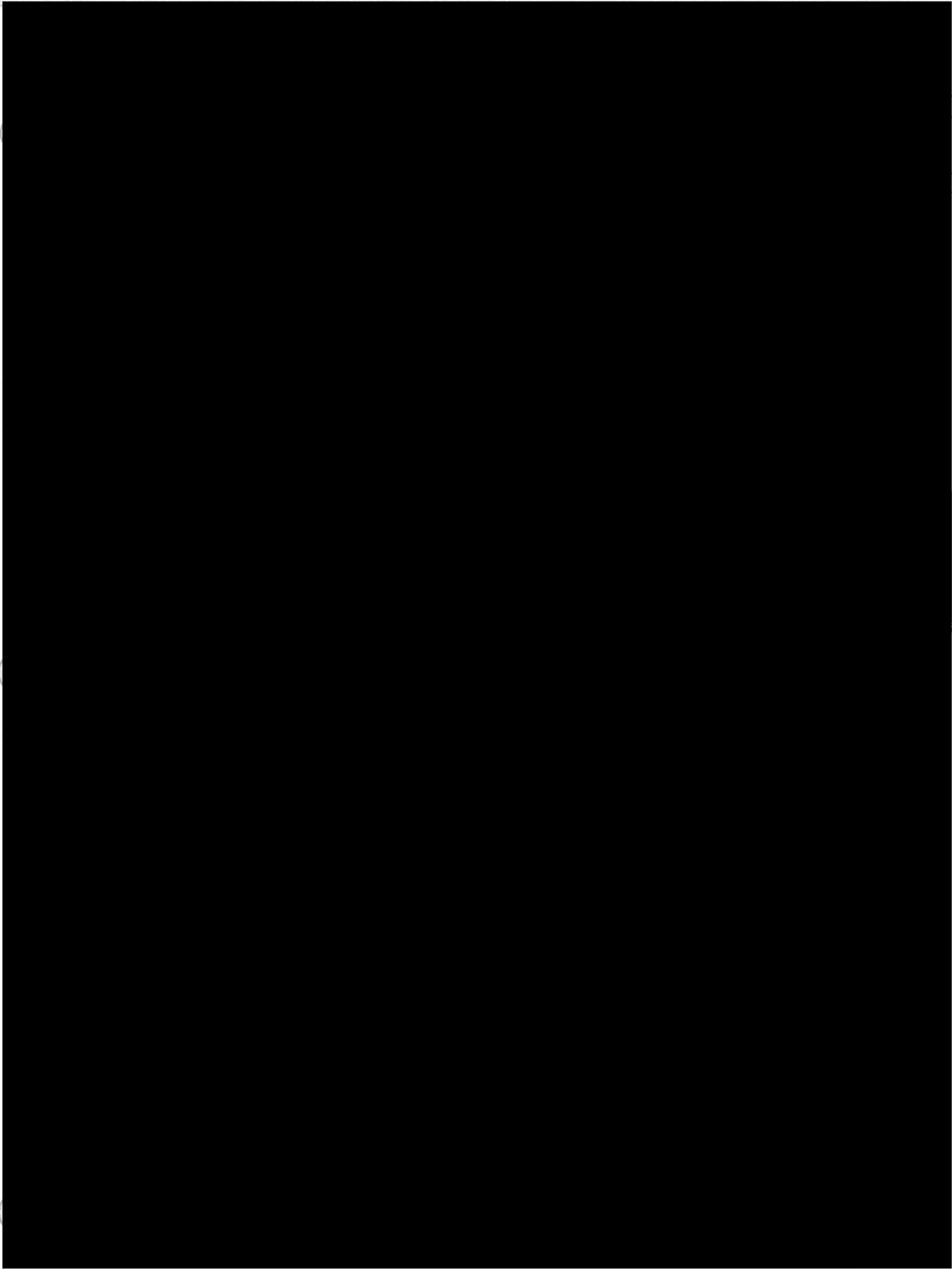


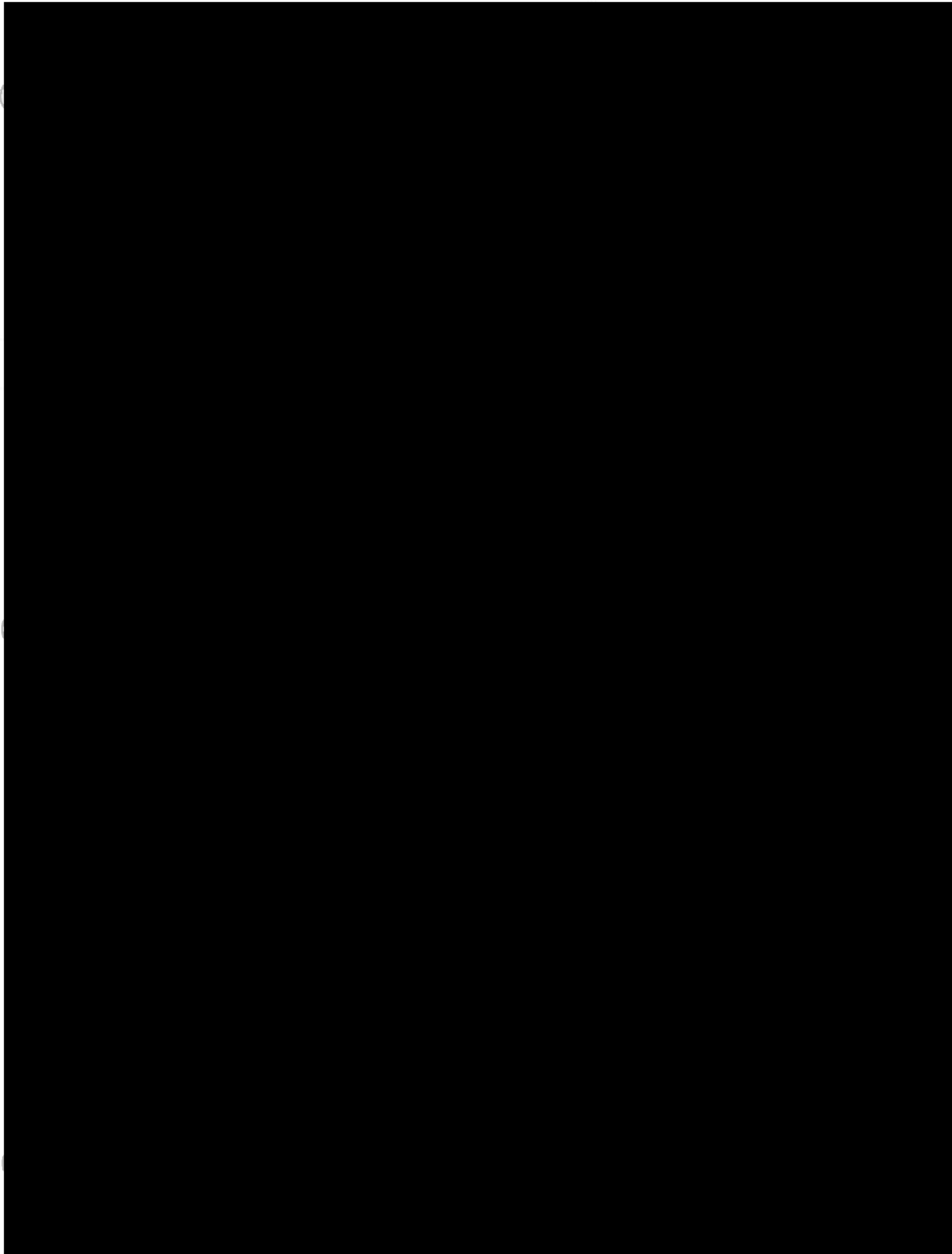


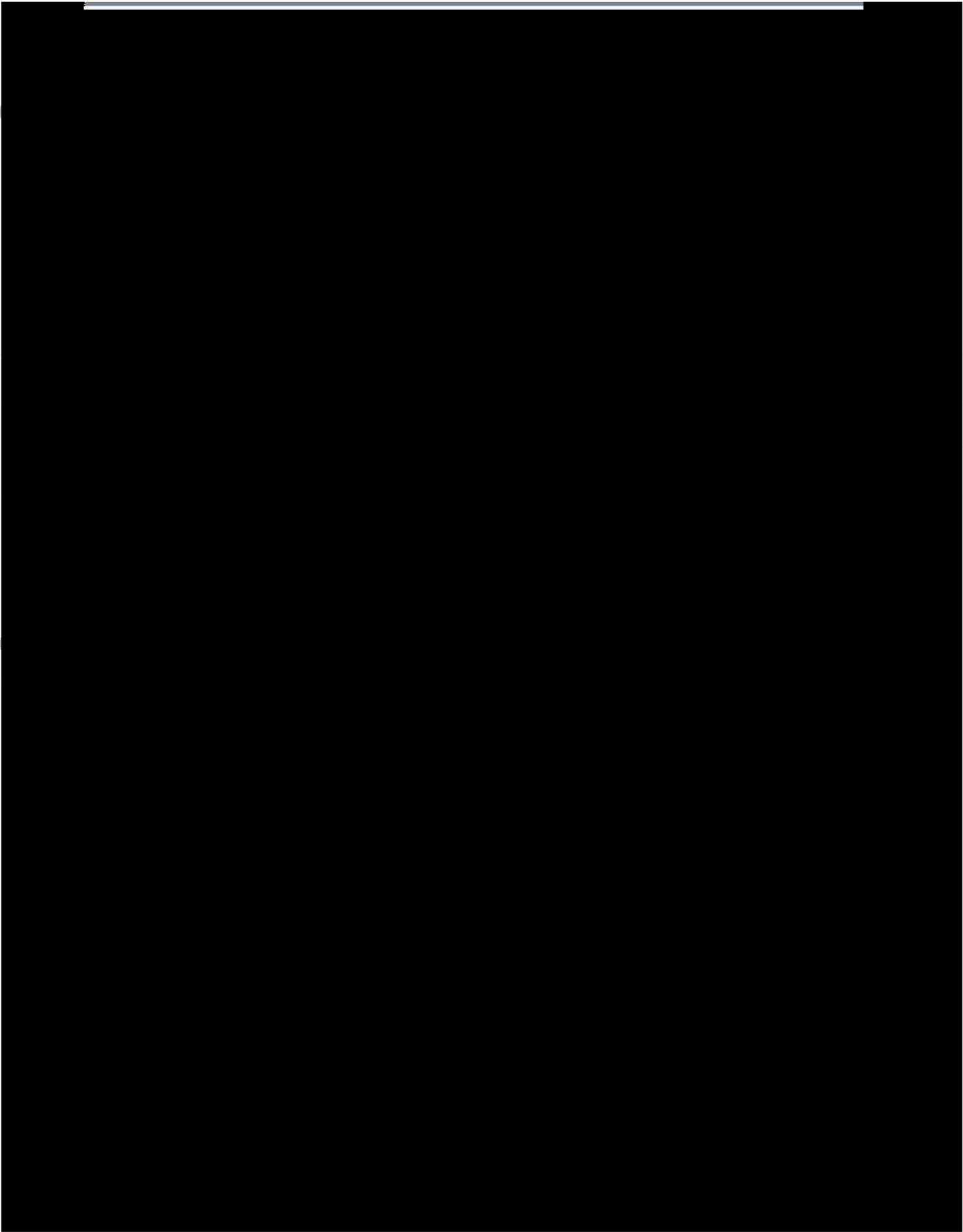




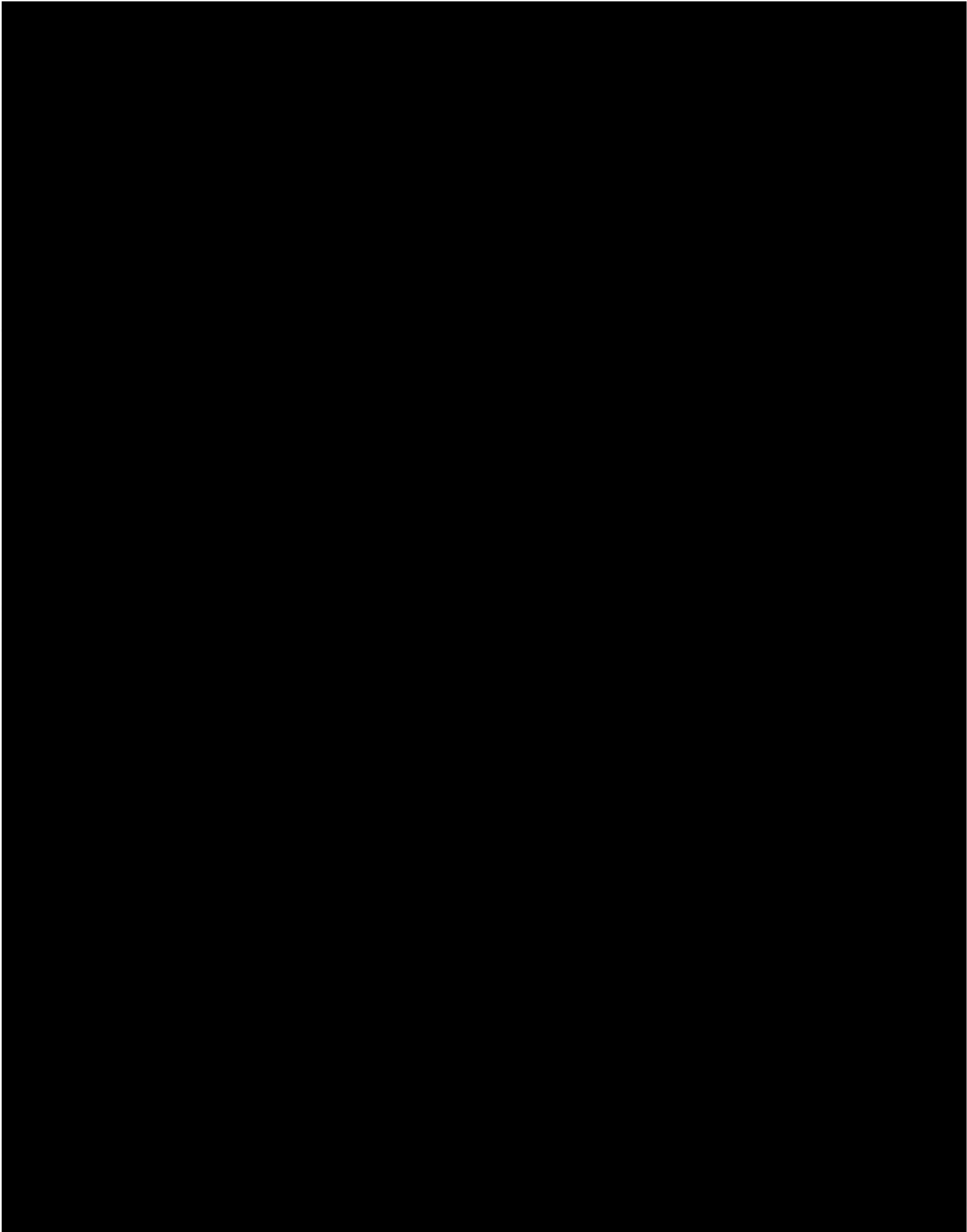


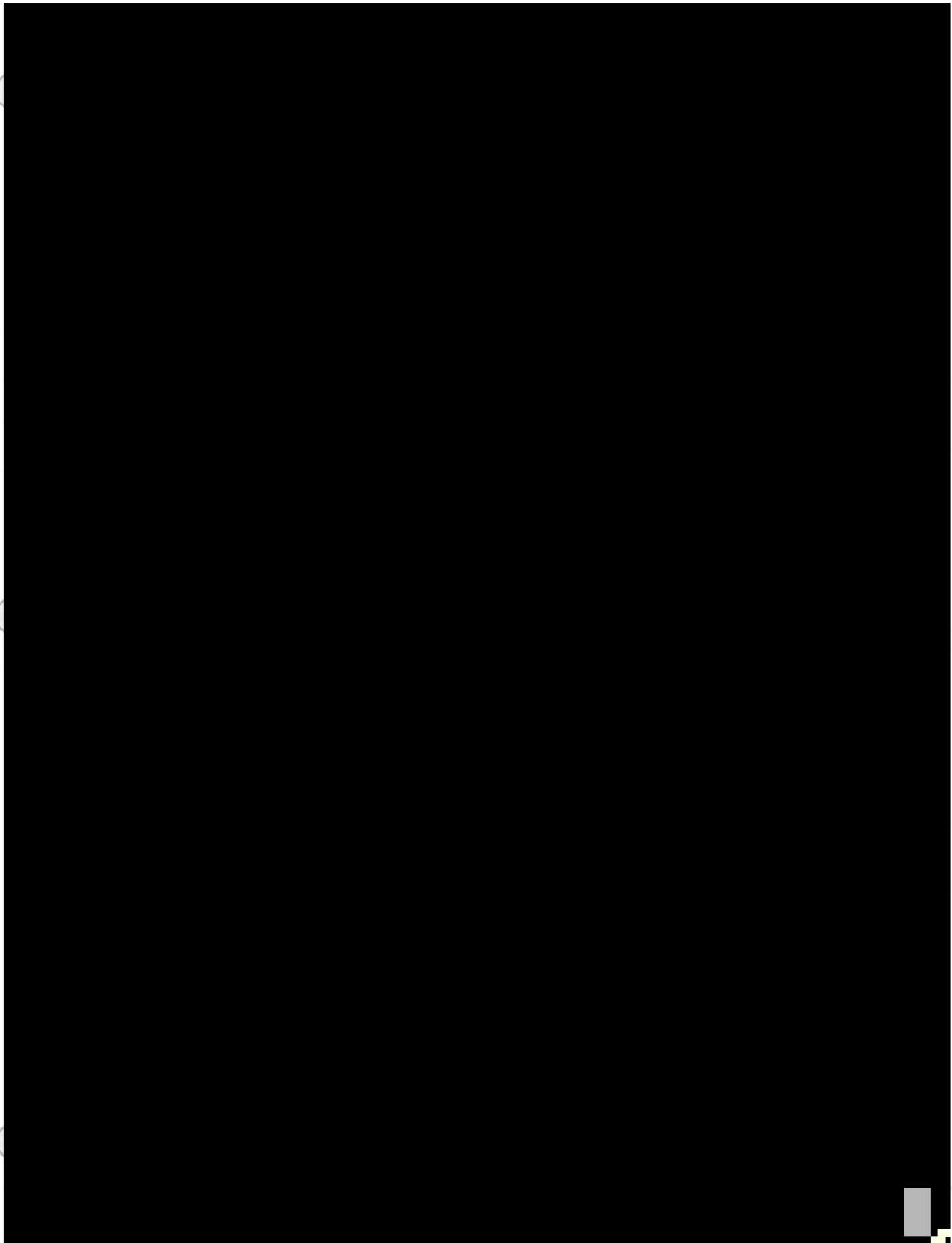




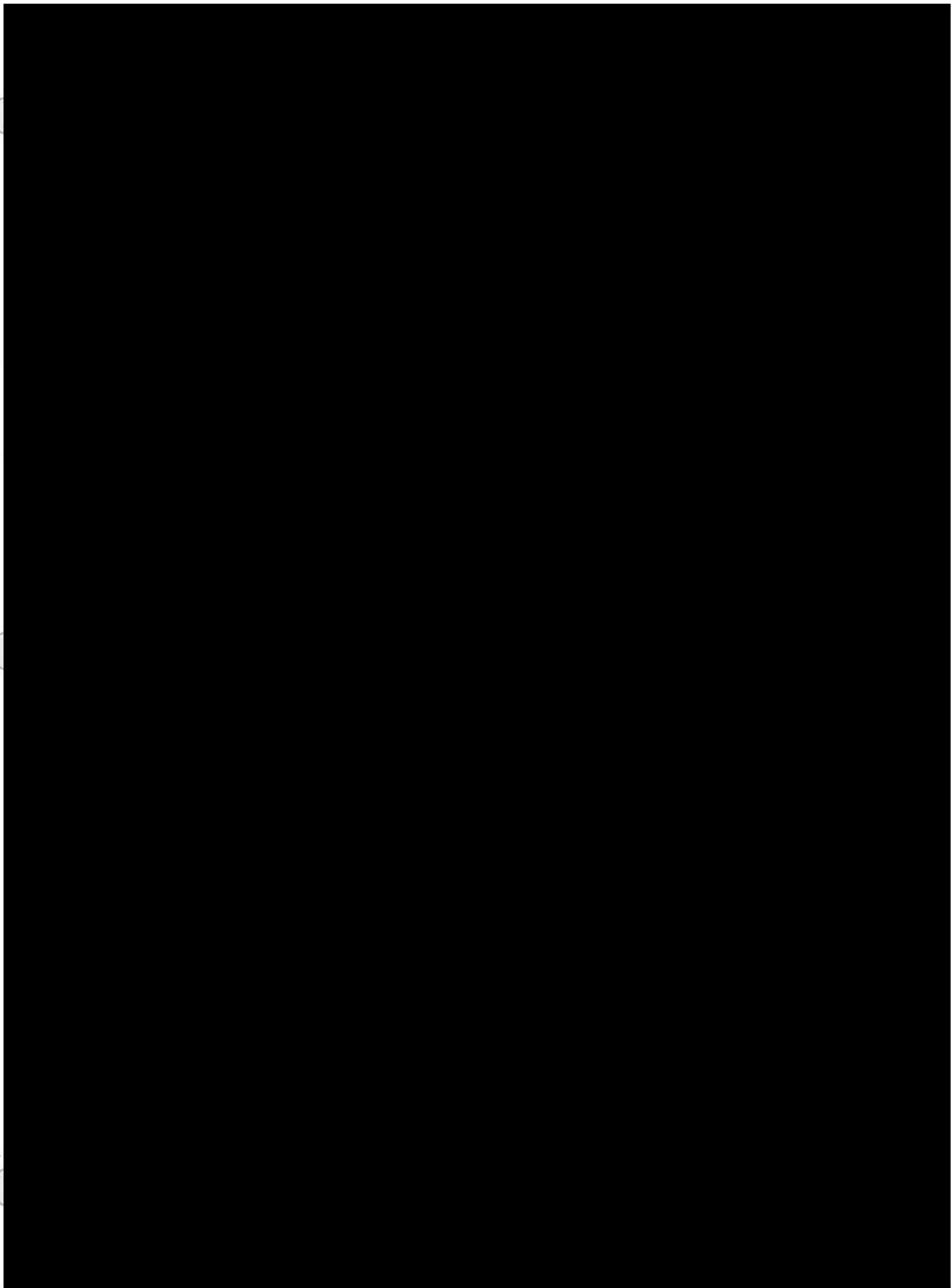








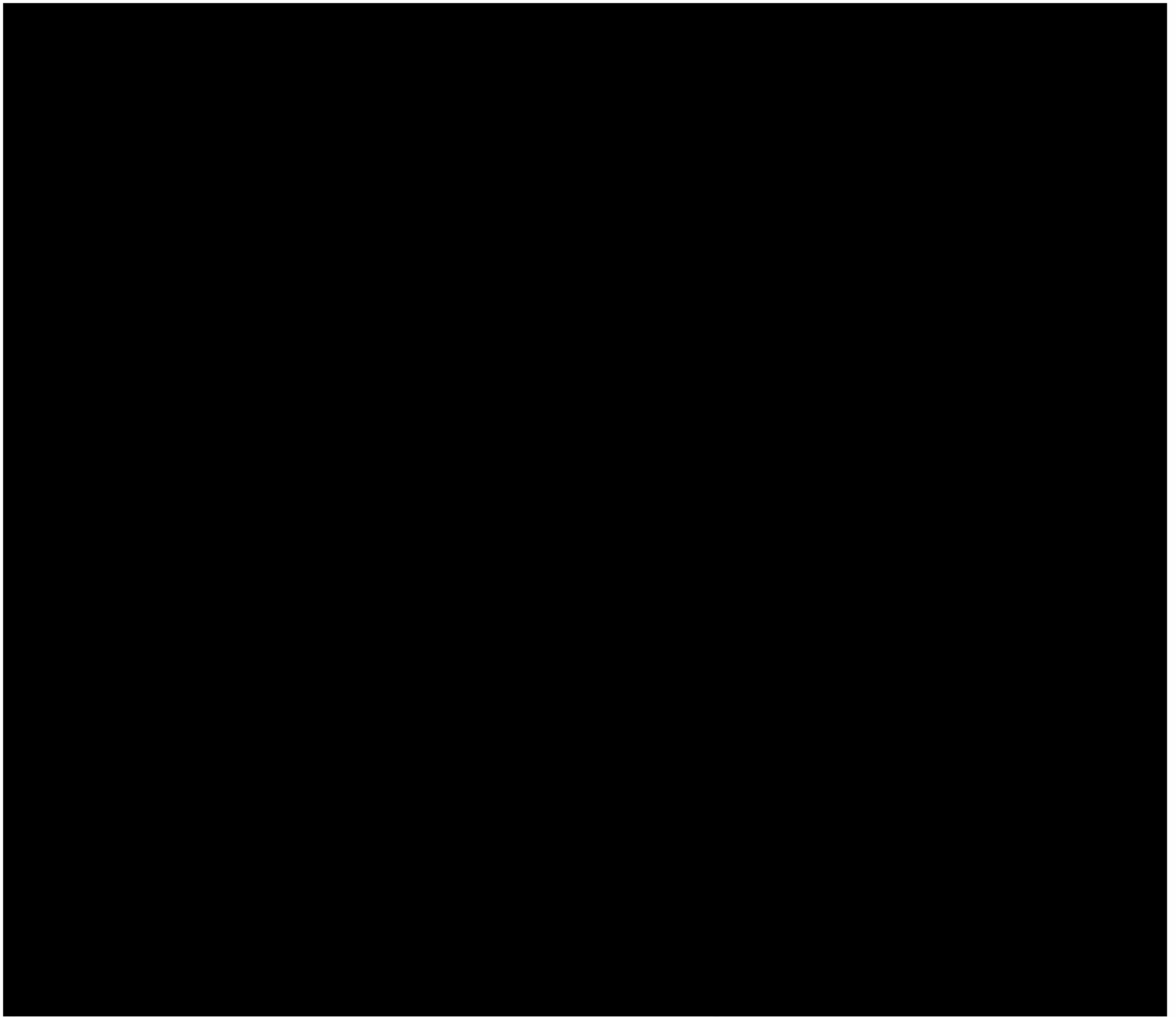














## 3 YEAR DRIVER RECORD



Customer No: 32497212 Driver License No: [REDACTED]  
Name: COOK, CONNOR MARTIN  
Address: [REDACTED] LURAY HWY  
City: HAMPTON State: SC Zip: 299246401  
County: HAMPTON  
DOB: [REDACTED] 999 Sex: M Driver Training: Y  
Height: [REDACTED] Weight: [REDACTED] Eye Color: Race: WHITE  
Status - DL: NO SUSPENSION CDL: NO DISQUALIFICATION

### License Information

| Type    | Class | Function | Issued     | Expires    | First Issued | Restr. | Endor. | Document Identifier (ACN / DDN) |
|---------|-------|----------|------------|------------|--------------|--------|--------|---------------------------------|
| Current |       |          |            |            |              |        |        |                                 |
| CPDL    | D     | BP to DL | 09/19/2014 | 03/15/2019 | 09/19/2014   | N      | N      | 1011327500053723                |
| Prior   |       |          |            |            |              |        |        |                                 |
| CPDL    | D     | BP to DL | 09/19/2014 | 03/15/2019 | 09/19/2014   | Y      | N      | 1011327500053723                |
| BP      | D     | Returned | 03/17/2014 | 03/17/2015 | 03/17/2014   | N      | N      | N/A                             |
| BP      | D     | Original | 03/17/2014 | 03/17/2015 | 03/17/2014   | N      | N      | 1011317100022926                |

### Point Summary

Total Current Points: 0  
Driver Credit: -0  
Adjusted Current Points: 0

### ACC: REPORTABLE

Accident: 06/01/2018  
Accident Case Number: 18575188  
Accident Jurisdiction: SC Acc Loc Ref: SCHDPT  
Contributed: Y Bodily Injury: Y

Posted: 06/18/2018  
FR-10 Audit Number: L-253380  
History: N  
Property Damage: >= \$1000

### ACC: REPORTABLE

Accident: 01/21/2017  
Accident Case Number: 17507582  
Accident Jurisdiction: SC Acc Loc Ref: SCHDPT  
Contributed: N Bodily Injury: Y

Posted: 01/30/2017  
FR-10 Audit Number: R-040495  
History: N  
Property Damage: >= \$1000

## Damian Yongue

**From:** RadioRoom  
**Sent:** Tuesday, March 12, 2019 9:40 AM  
**To:** Damian Yongue  
**Subject:** Connor Cook Inhouse

Customer ID: C00010514754

Name: CONNORMARTINCOOK

Physical address:

██████████ LURAY HWY

HAMPTON, SOUTH CAROLINA (SC) 29924

HAMPTON UNITED STATES OF AMERICA

Mailing address:

██████████ LURAY HWY

HAMPTON, SOUTH CAROLINA (SC) 29924

UNITED STATES OF AMERICA

Primary Phone #: (803) ██████████

Alternate Phone #: (803) ██████████

Date of Birth: ██████████

Gender: Male

Ethnicity: WHITE

Email Address: ██████████

Tax ID Number:

Tax ID Type:

| License # | Privilege Name                                 | Privilege Status | Sold Date  | Act |
|-----------|------------------------------------------------|------------------|------------|-----|
| 27720553  | ANNUAL SALTWATER FISHING LICENSE (RES)         | CLOSED           | 8/14/2018  | 8/1 |
| 27720552  | SEASONAL WILD TURKEY TAGS (RES)                | CLOSED           | 8/14/2018  | 3/2 |
| 27720551  | SEASONAL WILD TURKEY TAGS (RES)                | CLOSED           | 8/14/2018  | 3/2 |
| 27720550  | SEASONAL WILD TURKEY TAGS (RES)                | CLOSED           | 8/14/2018  | 3/2 |
| 27720549  | ANNUAL MIGRATORY WATERFOWL PERMIT (RES)        | CLOSED           | 8/14/2018  | 9/1 |
| 27720548  | ANNUAL MIGRATORY BIRD PERMIT (RES)             | CLOSED           | 8/14/2018  | 9/1 |
| 27720547  | ANNUAL COMBINATION LICENSE (RES)               | CLOSED           | 8/14/2018  | 8/1 |
| 26417671  | ELECTRONIC FEDERAL WATERFOWL STAMP ENDORSEMENT | CLOSED           | 11/22/2017 | 11/ |
| 26417670  | ANNUAL MIGRATORY WATERFOWL PERMIT (RES)        | CLOSED           | 11/22/2017 | 11/ |
| 25452121  | SEASONAL WILD TURKEY TAGS (RES)                | CLOSED           | 8/14/2017  | 3/2 |
| 25452118  | ANNUAL MIGRATORY BIRD PERMIT (RES)             | CLOSED           | 8/14/2017  | 9/1 |
| 25452117  | ANNUAL COMBINATION LICENSE (RES)               | CLOSED           | 8/14/2017  | 8/1 |
| 25452122  | ANNUAL SALTWATER FISHING LICENSE (RES)         | CLOSED           | 8/14/2017  | 8/1 |

|          |                                         |        |            |      |
|----------|-----------------------------------------|--------|------------|------|
| 25452120 | SEASONAL WILD TURKEY TAGS (RES)         | CLOSED | 8/14/2017  | 3/2  |
| 25452119 | SEASONAL WILD TURKEY TAGS (RES)         | CLOSED | 8/14/2017  | 3/2  |
| 23217946 | SEASONAL WILD TURKEY TAGS (RES)         | CLOSED | 8/15/2016  | 3/2  |
| 23217947 | SEASONAL WILD TURKEY TAGS (RES)         | CLOSED | 8/15/2016  | 3/2  |
| 23217948 | ANNUAL SALTWATER FISHING LICENSE (RES)  | CLOSED | 8/15/2016  | 8/2  |
| 23217945 | SEASONAL WILD TURKEY TAGS (RES)         | CLOSED | 8/15/2016  | 3/2  |
| 23217944 | ANNUAL MIGRATORY WATERFOWL PERMIT (RES) | CLOSED | 8/15/2016  | 9/2  |
| 23217943 | ANNUAL MIGRATORY BIRD PERMIT (RES)      | CLOSED | 8/15/2016  | 9/2  |
| 23217942 | ANNUAL JUNIOR SPORTSMAN LICENSE (RES)   | CLOSED | 8/15/2016  | 8/2  |
| 21297025 | ANNUAL JUNIOR SPORTSMAN LICENSE         | CLOSED | 8/14/2015  | 8/2  |
| 21297026 | ANNUAL MIGRATORY BIRD PERMIT (RES)      | CLOSED | 8/14/2015  | 9/2  |
| 21297027 | ANNUAL MIGRATORY WATERFOWL PERMIT (RES) | CLOSED | 8/14/2015  | 9/2  |
| 21297029 | SEASONAL WILD TURKEY TAGS-YOUTH (RES)   | CLOSED | 8/14/2015  | 8/2  |
| 21297030 | SEASONAL WILD TURKEY TAGS-YOUTH (RES)   | CLOSED | 8/14/2015  | 8/2  |
| 21297028 | SEASONAL WILD TURKEY TAGS-YOUTH (RES)   | CLOSED | 8/14/2015  | 8/2  |
| 20588947 | ANNUAL SALTWATER FISHING LICENSE (RES)  | CLOSED | 5/13/2015  | 5/2  |
| 20588946 | ANNUAL FRESHWATER FISHING LICENSE (RES) | CLOSED | 5/13/2015  | 5/2  |
| 27347362 | DEER TAGS (RES)                         | CLOSED | 7/10/2018  | 8/2  |
| 25084036 | DEER TAGS (RES)                         | CLOSED | 8/15/2016  | 8/2  |
| 16803746 | INDIVIDUAL ANTLERLESS DEER TAGS (RES)   | CLOSED | 10/27/2008 | 10/2 |
| 16803745 | INDIVIDUAL ANTLERLESS DEER TAGS (RES)   | CLOSED | 10/27/2008 | 10/2 |
| 16146342 | INDIVIDUAL ANTLERLESS DEER TAGS (RES)   | CLOSED | 10/27/2008 | 10/2 |
| 16639339 | INDIVIDUAL ANTLERLESS DEER TAGS (RES)   | CLOSED | 10/27/2008 | 10/2 |
| 16635258 | INDIVIDUAL ANTLERLESS DEER TAGS (RES)   | CLOSED | 9/24/2007  | 9/2  |
| 16308592 | INDIVIDUAL ANTLERLESS DEER TAGS (RES)   | CLOSED | 9/24/2007  | 9/2  |
| 16473037 | INDIVIDUAL ANTLERLESS DEER TAGS (RES)   | CLOSED | 9/24/2007  | 9/2  |
| 16636839 | INDIVIDUAL ANTLERLESS DEER TAGS (RES)   | CLOSED | 9/24/2007  | 9/2  |

# Field Sobriety Test Performance Report

Subject Name Come Cook

Start time 0705

## PRE-TEST QUESTIONS

### Notes:

- Do you have any physical defects or disabilities? Y N
- Do you have any defects with your eyes? Y N
- Are you sick or injured? Y N
- Are you under the care of a doctor or dentist? Y N
- Are you taking any medication or drugs? Y N

## GENERAL INSTRUCTIONS:

Please sit straight at the front edge of your seat. Put your arms down at your sides. Place your feet shoulder-width apart so you are comfortable and stable. Are you stable? (Response) Do not move your feet until the tests are over. Stay in this position and do not do anything else until I tell you to do so. Do you understand? (Response)

## HORIZONTAL GAZE NYSTAGMUS

Have the subject remove their eyeglasses, if worn.

Are you wearing contact lenses? Yes No

Keep your head still and look at the stimulus. Follow the movement of the stimulus with your eyes only. Keep looking at the stimulus until told the test is over. Do you understand? (Response)

Elevate the stimulus about 12-15" from the subject's nose. Check for equal pupil size, resting nystagmus and equal tracking.

### Clues

Lack of smooth pursuit

Distinct & sustained nystagmus at max. deviation

Onset of nystagmus prior to 45-degrees

Total Clues

Vertical nystagmus: Yes    No   

Evaluation Criteria: 4 or more clues

## FINGER TO NOSE

• Make a fist with both hands, extend your index fingers and turn your palms forward. Remain in this position while I explain the test.

(Demonstrate) Do you understand? (Response)

• When I say begin, tilt your head back to about a 45° angle and close your eyes. (Demonstrate)

• When I tell you to, touch the tip of your nose with the tip of your index finger and immediately return it to your side. (Demonstrate and explain the fingertip, pad and side of fingers and demonstrate touching tip of the nose)

• When I say right, you must touch your right index finger to your nose; when I say left, you must touch your left index finger to your nose. Do you understand? (Response)

• Begin. (After head tilt...) Left...Right...Left...Right...Right...Left (After performance...) Open your eyes and straighten your head.

| Instruction Stage             | Performance Stage            |                    | Left | Right | Left | Right | Right | Left |                    |
|-------------------------------|------------------------------|--------------------|------|-------|------|-------|-------|------|--------------------|
| Unable to follow instructions | Did not close eyes           | Wrong hand         |      |       |      |       |       |      | Wrong hand         |
|                               | Did not tilt head            | Wrong finger       |      |       |      |       |       |      | Wrong finger       |
| Started at wrong time         | Opened eyes during test      | Hesitated          |      |       |      |       |       |      | Hesitated          |
|                               |                              | Searched           |      |       |      |       |       |      | Searched           |
|                               | Moved head during test (1"+) | Not fingertip      |      |       |      |       |       |      | Not fingertip      |
|                               |                              | Missed nose        |      |       |      |       |       |      | Missed nose        |
|                               |                              | Did not bring down |      |       |      |       |       |      | Did not bring down |

Total Clues

Evaluation Criteria: 9 or more clues

## PALM PAT

• Place your hands palm to palm with one hand up and one hand down, like this. (Demonstrate) Remain in this position while I explain the test. Do you understand? (Response)

• When I tell you to begin, turn the top hand over and count out loud "one," then turn the hand back over and count out loud "two," counting only when the hands make contact, like this. (Demonstrate at least two sets)

• Repeat this, speed up as you go, and do not stop until told. Make sure to keep your hands and fingers parallel during each pat, like this. (Demonstrate) Do you understand? (Response) Begin. (If necessary, tell to speed up)

### Instruction Stage

Unable to follow instructions

Started at wrong time

### Performance Stage

Did not count as instructed

Rolled hands

Double pat

Chopped pat

Other improper pat (document)

Did not increase speed

Rotated hands

Stopped before told

Total Clues

Evaluation Criteria: 2 or more clues

## HAND COORDINATION

• Make fists with both hands, place your left fist at the center of your chest and your right fist against your left fist, like this. (Demonstrate)

• Remain in this position while I explain the test. Do you understand? (Response)

• When I say begin, you must perform four tasks.

• The first task is to count out loud from one to four while you move your fists in a step-like fashion, making contact between your fists at each step. (Demonstrate while counting out loud 1, 2, 3, 4)

• The second task is to memorize the position of your fists after you have counted to four, clap your hands three times and return your fists to the memorized position. (Demonstrate)

• The third task is to move your fists in a step-like fashion in reverse order; counting out loud from five to eight and returning your left fist to your chest. (Demonstrate while counting out loud 5, 6, 7, 8)

• The fourth task is to open your hands with palms down and place them in your lap. (Demonstrate)

• Do you understand? (Response) Begin.

### Instruction Stage

Unable to follow instructions

Started at wrong time

### Performance Stage

#### Task 1 – Forward Steps

Improper count

Improper touch

Did not perform

#### Task 2 – Hand Clapping

Improper count

Improper touch

Improper return

Did not perform

#### Task 3 – Return Steps

Improper count

Improper touch

Did not return left fist to chest

Did not perform

#### Task 4 – End Position

Improper position

Did not perform

Total Clues

Evaluation Criteria: 3 or more clues

# Field Sobriety Test Performance Report

Subject Name Connor Cook

Page 2

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                     |                               |                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------|--------------------------|
| <b>WALK AND TURN</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                     |                               | <b>Instruction Stage</b> |
| <ul style="list-style-type: none"> <li>Place your left foot on the line. Place your right foot on the line in front of the left foot, with the heel of the right foot against the toe of the left. (Demonstrate)</li> <li>Place your arms at your sides. Maintain this position until I have completed the instructions. Do not start to walk until I tell you to do so. Do you understand? (Response)</li> <li>When I tell you to start, take nine heel-to-toe steps on the line, turn, and take nine heel-to-toe steps down the line. (Demonstrate 3 heel-to-toe steps)</li> <li>When you turn, keep the front foot on the line and turn by taking a series of small steps with the other foot, like this. (Demonstrate turn and 3 steps back)</li> <li>While you are walking, keep your arms at your sides, watch your feet at all times and count your steps out loud. Once you start walking, do not stop until you have completed the test. Do you understand? (Response)</li> <li>Begin.</li> </ul> | Cannot keep balance                 |                               |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Starts too soon                     |                               |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <b>Performance Stage</b>            |                               |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Stops while walking                 |                               |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Does not touch heel-to-toe (1/2" +) |                               |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Steps off the line                  |                               |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Uses arms to balance (6" +)         |                               |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Improper turn                       |                               |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Incorrect number of steps           |                               |                          |
| <b>Total Clues</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                     |                               |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                     | Cannot perform test (explain) |                          |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                               |  |                                             |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|--|---------------------------------------------|--|
| <b>ONE LEG STAND</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                               |  | <b>Evaluation Criteria: 2 or more clues</b> |  |
| <ul style="list-style-type: none"> <li>Stand with your feet together and your arms at your sides, like this. (Demonstrate)</li> <li>Do not start until I tell you to do so. Do you understand? (Response)</li> <li>When I tell you to start, raise either leg with the foot approximately six inches off the ground with your raised foot parallel to the ground. (Demonstrate)</li> <li>You must keep both legs straight, arms at your sides. While holding that position, count out loud in the following manner: one thousand one, one thousand two, one thousand three, and so on until told to stop.</li> <li>Keep your arms at your sides at all times and keep watching the raised foot. Do you understand? (Response)</li> <li>Begin. (30 seconds)</li> </ul> | <b>Clues</b>                  |  |                                             |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Sways while balancing         |  |                                             |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Uses arms to balance (6" +)   |  |                                             |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Hopping                       |  |                                             |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Puts foot down                |  |                                             |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <b>Total Clues</b>            |  |                                             |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Cannot perform test (explain) |  |                                             |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                               |  | <b>Evaluation Criteria: 2 or more clues</b> |  |

**Phase I: Vessel in Motion** – Document initial observations to describe vessel maneuvers or operator/occupant behaviors that may be associated with alcohol/drug influence prior to the stop. If no Phase I observations are made, describe initial contact.

**Phase II: Personal Contact** – Document observations made during face-to-face contact with the operator.

| Operator Actions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Breath                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Eyes                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Attitude                                                                                                                                                                                                                                                                                                                                                                             | Balance                                                                                                                                                                                                                                                                                                                                                                                 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Cannot find registration/wallet<br><input type="checkbox"/> Tries to conceal something<br><input type="checkbox"/> Produces wrong documents<br><input type="checkbox"/> Fumbles items<br><input type="checkbox"/> Excessive movement<br><input type="checkbox"/> Forgets to respond to request<br><input type="checkbox"/> Incorrect answers<br><input type="checkbox"/> Problem using fingertips<br><input type="checkbox"/> Avoids eye contact<br><input type="checkbox"/> Ignores questions<br><input type="checkbox"/> Lights cigarette or eats/chews<br><input type="checkbox"/> Angry/abusive language<br><input type="checkbox"/> Admits to drinking<br><input type="checkbox"/> Difficulty with safety equip.<br><input type="checkbox"/> Unusual statements | <b>Alcoholic beverage:</b><br><input type="checkbox"/> Strong<br><input type="checkbox"/> Moderate<br><input type="checkbox"/> Faint<br><input type="checkbox"/> None<br><br><input type="checkbox"/> Marijuana<br><input type="checkbox"/> Breath mint/cover odor<br><br><b>Face</b><br><input type="checkbox"/> Pale<br><input type="checkbox"/> Flushed<br><input type="checkbox"/> Sweating<br><input type="checkbox"/> Sunburned<br><input type="checkbox"/> Normal | <input type="checkbox"/> Bloodshot<br><input type="checkbox"/> Watery<br><input type="checkbox"/> Glassy<br><input type="checkbox"/> Dilated pupils<br><input type="checkbox"/> Constricted pupils<br><input type="checkbox"/> Droopy eyelids<br><input type="checkbox"/> Normal<br><b>Unusual Actions</b><br><input type="checkbox"/> Hiccupping<br><input type="checkbox"/> Belching<br><input type="checkbox"/> Vomiting<br><input type="checkbox"/> Gagging/dry heaves<br><input type="checkbox"/> Fighting<br><input type="checkbox"/> Laughing<br><input type="checkbox"/> Crying | <input type="checkbox"/> Jovial<br><input type="checkbox"/> Talkative<br><input type="checkbox"/> Cooperative<br><input type="checkbox"/> Indifferent<br><input type="checkbox"/> Sleepy<br><input type="checkbox"/> Profanity<br><input type="checkbox"/> Combative<br><input type="checkbox"/> Belligerent<br><input type="checkbox"/> Insulting<br><br><b>Clothing (describe)</b> | <input type="checkbox"/> Normal<br><input type="checkbox"/> Swaying<br><input type="checkbox"/> Falling<br><input type="checkbox"/> Sits down<br><input type="checkbox"/> Supports against object<br><input type="checkbox"/> Staggering<br><input type="checkbox"/> Unsteady<br><input type="checkbox"/> Wide stance<br><input type="checkbox"/> Needs assistance<br><br><b>Notes:</b> |

**Phase III – Pre-Arrest Screening** – Document any other observations made during field sobriety testing to describe finding of probable cause to place subject under arrest for operating while impaired.

|                                  |                                           |                                                        |
|----------------------------------|-------------------------------------------|--------------------------------------------------------|
| Officer: <u>Austin Parker</u>    | Agency: <u>SCDNR</u>                      | Case #: <u>19-0944</u>                                 |
| Date: <u>2-24-19</u>             | Location: <u>Beaufort Memorial</u>        |                                                        |
| Subject Name: <u>Connor Cook</u> | D/O/B: <u>[REDACTED]</u>                  |                                                        |
| Height: <u>[REDACTED]</u>        | Weight: <u>[REDACTED]</u>                 | Eyes: <u>Blue</u> Hair: <u>Blonde</u> Gender: <u>M</u> |
| PBT results: <u>@</u>            | Evidentiary breath test results: <u>@</u> | hrs. Time of arrest: <u>hrs.</u>                       |

P.O. Box 167  
Columbia, SC 29202



Voice: (803) 734-4001  
Fax: (803) 734-3961

## LAW ENFORCEMENT STATEMENT

Case Number: 19-02-0944

County: (07) Beaufort

I, CONNOR COOL, make the following statement freely and voluntarily to Austin Pritchard, who has identified themselves as an official of the South Carolina Department of Natural Resources, Law Enforcement Division.

We were heading down archers creek, heading towards broad River. I remember seeing the bridge and that was about it.

AKP

I have read this statement consisting of 1 page(s) and have initialled all corrections. I fully understand its entire contents and solemnly swear (or affirm) that it is true and correct to the best of my knowledge and belief. No threats or promises have been made to obtain this statement.

Described and sworn to (or affirmed) before me, this 24 day of Feb., 20 19.

|                                           |                                                             |
|-------------------------------------------|-------------------------------------------------------------|
| Signature of Officer<br><u>Marty Cook</u> | Affiant<br><u>CONNOR COOL</u><br><u>CONNOR COOL</u>         |
| Witness<br><u>Marty Cook</u>              | Address<br><u>[REDACTED]urray Hwy</u><br><u>Hampton SC.</u> |

☒ INTERVIEW TAPED?

☐ NO

☐ YES

☐ AUDIO ONLY

☐ AUDIO & VIDEO

803 [REDACTED]

[REDACTED] 98

803 [REDACTED]

AGENCY I.D.  
SCD 400500



SUPPLEMENTAL REPORT

CASE NUMBER

pg 1 of 2

NCIC

INQ.

ENTD.

|                                                                                                                                                                                                                                                                                                    |                                                            |                                              |                                             |                                                   |                                                     |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|----------------------------------------------|---------------------------------------------|---------------------------------------------------|-----------------------------------------------------|
| STATUS                                                                                                                                                                                                                                                                                             | <input type="checkbox"/> ORIGINAL REPORT                   | <input type="checkbox"/> ADDITIONAL SUBJECTS | <input type="checkbox"/> ADDITIONAL CHARGES | <input type="checkbox"/> ADDITIONAL WITNESSES     | <input type="checkbox"/> ADDITIONAL SEIZED PROPERTY |
|                                                                                                                                                                                                                                                                                                    | <input checked="" type="checkbox"/> SUPPLEMENTAL REPORT    | <input type="checkbox"/> MODIFIES ORIGINAL   | <input type="checkbox"/> CASE STATUS CHANGE | <input type="checkbox"/> DISPOSITION/TRIAL REPORT | <input type="checkbox"/> ADDITIONAL VICTIMS         |
| NARRATIVE                                                                                                                                                                                                                                                                                          | 02/24/19                                                   |                                              |                                             |                                                   |                                                     |
|                                                                                                                                                                                                                                                                                                    | 0801-Text from G Garner to call M Brock                    |                                              |                                             |                                                   |                                                     |
|                                                                                                                                                                                                                                                                                                    | 0837-RO Called M Brock                                     |                                              |                                             |                                                   |                                                     |
|                                                                                                                                                                                                                                                                                                    | 1120-RO Called R Camlin                                    |                                              |                                             |                                                   |                                                     |
|                                                                                                                                                                                                                                                                                                    | 1130-RO Arrived at MUSC                                    |                                              |                                             |                                                   |                                                     |
|                                                                                                                                                                                                                                                                                                    | 1140-RO introduced himself to the Cook's                   |                                              |                                             |                                                   |                                                     |
|                                                                                                                                                                                                                                                                                                    | (Q) RO asked Connor Cook where the they were coming from?  |                                              |                                             |                                                   |                                                     |
|                                                                                                                                                                                                                                                                                                    | (A) An oyster roast on Paukie Island.                      |                                              |                                             |                                                   |                                                     |
|                                                                                                                                                                                                                                                                                                    | (Q) RO asked Connor where were they going?                 |                                              |                                             |                                                   |                                                     |
|                                                                                                                                                                                                                                                                                                    | (A) they were going to P Murdaughs house on Checheesee ck. |                                              |                                             |                                                   |                                                     |
|                                                                                                                                                                                                                                                                                                    | (Q) RO asked Connor where did the accident happen?         |                                              |                                             |                                                   |                                                     |
|                                                                                                                                                                                                                                                                                                    | (A) Archer Ck.                                             |                                              |                                             |                                                   |                                                     |
|                                                                                                                                                                                                                                                                                                    | (Q) RO asked Connor what did you hit?                      |                                              |                                             |                                                   |                                                     |
|                                                                                                                                                                                                                                                                                                    | (A) A bridge.                                              |                                              |                                             |                                                   |                                                     |
|                                                                                                                                                                                                                                                                                                    | (Q) RO asked where was everyone sitting in the boat?       |                                              |                                             |                                                   |                                                     |
| (A) Paul and Conner's girlfriends were sitting on the seat in front the center console. Conner was standing at the console on the right side of the boat and Paul was standing at the console on the left side. Anthony and Mallory were sitting on the helm seat facing to the stern of the boat. |                                                            |                                              |                                             |                                                   |                                                     |
| (Q) RO asked Conner who was driving the boat at the time of the collision?                                                                                                                                                                                                                         |                                                            |                                              |                                             |                                                   |                                                     |
| (A) I don't know.                                                                                                                                                                                                                                                                                  |                                                            |                                              |                                             |                                                   |                                                     |
| (Q) RO asked Conner who was driving the boat prior to the collision?                                                                                                                                                                                                                               |                                                            |                                              |                                             |                                                   |                                                     |
| (A) I don't know.                                                                                                                                                                                                                                                                                  |                                                            |                                              |                                             |                                                   |                                                     |
| * General statement from Mrs. Cook was that they were going slow because the fog was bad. Connor then said "the GPS lied."                                                                                                                                                                         |                                                            |                                              |                                             |                                                   |                                                     |
| 1234 RO talked to R Camlin and Camlin told the RO that the boat was in reverse.                                                                                                                                                                                                                    |                                                            |                                              |                                             |                                                   |                                                     |
| * RO talked talked to the Cooks separated from Connor about who was driving the boat and how important it is to know who was driving the boat. They said that they had asked Connor but that they did not know who was driving the boat.                                                           |                                                            |                                              |                                             |                                                   |                                                     |
| (Q) RO asked Connor what he hit to break his jaw?                                                                                                                                                                                                                                                  |                                                            |                                              |                                             |                                                   |                                                     |
| (A) He didn't know.                                                                                                                                                                                                                                                                                |                                                            |                                              |                                             |                                                   |                                                     |
| (Q) RO asked Connor if he assisted in trying to evade hitting the bridge by grabbing the throttle?                                                                                                                                                                                                 |                                                            |                                              |                                             |                                                   |                                                     |
| (A) He didn't know                                                                                                                                                                                                                                                                                 |                                                            |                                              |                                             |                                                   |                                                     |
| DISP.                                                                                                                                                                                                                                                                                              | <input type="checkbox"/> GUILTY                            |                                              |                                             |                                                   |                                                     |
|                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> NOLO CONTENDRE                    |                                              |                                             |                                                   |                                                     |
|                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> NOT GUILTY                        |                                              |                                             |                                                   |                                                     |
|                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> DISMISSED                         |                                              |                                             |                                                   |                                                     |
|                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> DECLINED PROSECUTION              |                                              |                                             |                                                   |                                                     |
| ADMINISTRATIVE                                                                                                                                                                                                                                                                                     | <input checked="" type="checkbox"/> ACTIVE                 | REPORTING OFFICERS                           |                                             | OFFICER ID NUMBER                                 | DATE                                                |
|                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> ADMIN CLOSED                      | W Ladue                                      |                                             | L14630965                                         | 03/03/2019                                          |
|                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> UNFOUNDED                         | DISPOSITION OF REPORT:                       |                                             | OFFICER ID NUMBER                                 | DATE                                                |
|                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> PENDING TRIAL                     |                                              |                                             | APPROVED BY                                       | DATE                                                |
|                                                                                                                                                                                                                                                                                                    |                                                            |                                              |                                             |                                                   |                                                     |

18-11643

AGENCY I.D.  
SCO 400500



SUPPLEMENTAL REPORT

CASE NUMBER

pg 2 of 2

NCIC

INQ.

ENTD.

|                |                                                                                                                                                                                                                                                                     |                                              |                                             |                                                   |                                                     |
|----------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|---------------------------------------------|---------------------------------------------------|-----------------------------------------------------|
| STATUS         | <input type="checkbox"/> ORIGINAL REPORT                                                                                                                                                                                                                            | <input type="checkbox"/> ADDITIONAL SUBJECTS | <input type="checkbox"/> ADDITIONAL CHARGES | <input type="checkbox"/> ADDITIONAL WITNESSES     | <input type="checkbox"/> ADDITIONAL SEIZED PROPERTY |
|                | <input checked="" type="checkbox"/> SUPPLEMENTAL REPORT                                                                                                                                                                                                             | <input type="checkbox"/> MODIFIES ORIGINAL   | <input type="checkbox"/> CASE STATUS CHANGE | <input type="checkbox"/> DISPOSITION/TRIAL REPORT | <input type="checkbox"/> ADDITIONAL VICTIMS         |
| NARRATIVE      | <p>(Q) RO asked Conner what did he recall about the time of impact?<br/>(A) He didn't recall.</p> <p>1410 RO notified R Camlin that Connor was going back to surgery.</p> <p>1530 RO introduced R Camlin to the Cook's.</p> <p>1600 RO left MUSC</p> <p>END WJL</p> |                                              |                                             |                                                   |                                                     |
|                |                                                                                                                                                                                                                                                                     |                                              |                                             |                                                   |                                                     |
| DISP.          | <input type="checkbox"/> GUILTY <input type="checkbox"/> NOLO CONTENDRE <input type="checkbox"/> NOT GUILTY <input type="checkbox"/> DISMISSED <input type="checkbox"/> DECLINED PROSECUTION                                                                        |                                              |                                             |                                                   |                                                     |
| ADMINISTRATIVE | <input checked="" type="checkbox"/> ACTIVE                                                                                                                                                                                                                          | REPORTING OFFICERS<br>W Ladue                |                                             | OFFICER ID NUMBER<br>L14630965                    | DATE<br>03/03/2019                                  |
|                | <input type="checkbox"/> ADMIN<br>CLOSED                                                                                                                                                                                                                            |                                              |                                             | OFFICER ID NUMBER                                 | DATE                                                |
|                | <input type="checkbox"/> UNFOUNDED                                                                                                                                                                                                                                  | DISPOSITION OF REPORT:                       |                                             |                                                   |                                                     |
|                | <input type="checkbox"/> PENDING<br>TRIAL                                                                                                                                                                                                                           |                                              |                                             | APPROVED BY                                       | DATE                                                |

18-11643

STATE OF SOUTH CAROLINA

County of Beaufort

SEARCH WARRANT

19-02-0944

Inv. D. Yongue

SCCA 513  
(3-1978)

STATE OF SOUTH CAROLINA )

COUNTY OF BEAUFORT )

SEARCH WARRANT

Form Approved by  
SC Attorney General  
Section 17-13-160

March 15, 1978

TO ANY BONDED LAW ENFORCEMENT OFFICER OF THIS STATE OR COUNTY OR OF THE  
MUNICIPALITY OF BEAUFORT:

It appearing from the attached affidavit that there are reasonable grounds to believe that certain property subject to seizure under provisions of Section 17-13-140, 1976 Code of Laws of South Carolina, as amended, is located on the following premises:

**DESCRIPTION OF PREMISES TO BE SEARCHED**

Beaufort Memorial Hospital, 955 Ribaut Road, Beaufort, SC 29902

Now, therefore, you are hereby authorized to search the subject premises for the property described below, and to seize such property if found:

**DESCRIPTION OF PROPERTY**

Any and all instrumentalities of the crimes of reckless/negligent operation of a vessel and unlawful consumption of alcohol by a person under 21 to include but not limited to, medical records and reports, medical staff notes, observations and recommendations, diagnosis and referrals, X-rays or other imagery, pertaining to Conner Martin Cook, [REDACTED] 9, SSN#, who was a patient in the Emergency Room on or about February 24, 2019

This Search Warrant shall not be valid for more than ten days from the date of issuance.

A written inventory of all property seized pursuant to this Search Warrant shall be made to the issuing magistrate within ten days from the date of this warrant, such inventory to be signed by the officer executing this warrant, and a copy of such inventory shall be furnished to the person whose premises are searched if demand for such copy is made.

A copy of this Search Warrant shall be delivered to the person in charge of the premises searched at the time of such search if practicable, and, if not, to such person as soon thereafter as is practicable; in the event the identity of the person in charge is not known or if such person cannot be found after reasonable diligence in attempting to locate the person, a copy shall be attached to a prominent place on such premises.

Beaufort, South Carolina

Nancy Ball  
Signature of Judge

Dated: February 27, 2019 5:04 pm

STATE OF SOUTH CAROLINA )

COUNTY OF BEAUFORT )

AFFIDAVIT

Personally, appeared before me, one Investigator D. Yongue, who being duly sworn, says that there is probable cause to believe that certain property subject to seizure under provisions of S.C. Code Ann. § 17-13-140, as amended, is located on the following premises in this County:

DESCRIPTION OF PROPERTY SOUGHT

Any and all instrumentalities of the crimes of reckless/negligent operation of a vessel and unlawful consumption of alcohol by a person under 21 to include but not limited to, medical records and reports, medical staff notes, observations and recommendations, diagnosis and referrals, X-rays or other imagery, pertaining to Conner Martin Cook, [REDACTED] 99, SSN#, who was a patient in the Emergency Room on or about February 24, 2019.

DESCRIPTION OF PREMISES TO BE SEARCHED

Beaufort Memorial Hospital, 955 Ribaut Road, Beaufort, SC 29902

REASON FOR AFFIANT'S BELIEF THAT THE  
PROPERTY SOUGHT IS ON THE SUBJECT PREMISES

That on February 24, 2019, SCDNR was dispatched to Archer Creek in Beaufort County and Beaufort Memorial Hospital regarding a boating accident with one boat passenger ejected and still missing and one passenger sustaining great bodily injury from significant facial injuries. Officers determined that the boat occupied by 6 individuals under the age of twenty-one, struck the Archer Creek bridge at a high rate of speed. Officers observed several alcoholic beverage containers and witnesses stated that the boat was being operated in a reckless manner prior to the collision. Boat occupants were unable or refused to identify who was operating. It is believed comparing medical records/documents may assist in identifying who was operating the vessel.

Sworn to and Subscribed before me

27 day of February, 2019

Mary Sadler 5:04pm  
Signature of Judge

Address

Phone

D. Yongue  
Inv. D. Yongue  
217 Fort Johnson Road  
Charleston, SC 29422  
843-953-9307

STATE OF SOUTH CAROLINA

County of Charleston

SEARCH WARRANT

19-02-0944

LCpl Benjamin Whaley



SCCA 513

(3-1978)

STATE OF SOUTH CAROLINA )  
 )  
COUNTY OF CHARLESTON )  
 )

SEARCH WARRANT

Form Approved by  
SC Attorney General  
Section 17-13-160

March 15, 1978

TO ANY BONDED LAW ENFORCEMENT OFFICER OF THIS STATE OR COUNTY OR OF THE  
MUNICIPALITY OF BEAUFORT:

It appearing from the attached affidavit that there are reasonable grounds to believe that certain property  
subject to seizure under provisions of Section 17-13-140, 1976 Code of Laws of South Carolina, as amended, is  
located on the following premises:

DESCRIPTION OF PREMISES

TO BE SEARCHED

Medical University of South Carolina, Health Information Services, 169 Ashley Avenue, MSC 369, Charleston,  
South Carolina 29425

Now, therefore, you are hereby authorized to search the subject premises for the property described below, and  
to seize such property if found:

DESCRIPTION OF PROPERTY SOUGHT

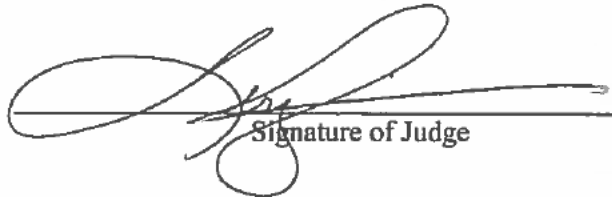
Any and all instrumentalities of the crimes of reckless/negligent operation of a vessel and unlawful consumption  
of alcohol by a person under 21 to include but not limited to, medical records and reports, medical staff notes,  
observations and recommendations, diagnosis and referrals, X-rays or other imagery, pertaining to Conner  
Martin Cook, [REDACTED]/99, SSN#, who was a patient in the Emergency Room on or about February 24, 2019.

This Search Warrant shall not be valid for more than ten days from the date of issuance.

A written inventory of all property seized pursuant to this Search Warrant shall be made to the issuing  
magistrate within ten days from the date of this warrant, such inventory to be signed by the officer executing this  
warrant, and a copy of such inventory shall be furnished to the person whose premises are searched if demand  
for such copy is made.

A copy of this Search Warrant shall be delivered to the person in charge of the premises searched at the  
time of such search if practicable, and, if not, to such person as soon thereafter as is practicable; in the event the  
identity of the person in charge is not known or if such person cannot be found after reasonable diligence in  
attempting to locate the person, a copy shall be attached to a prominent place on such premises.

Charleston, South Carolina

  
Signature of Judge

Dated: 2-28-2019

STATE OF SOUTH CAROLINA

COUNTY OF CHARLESTON

**AFFIDAVIT**

Personally, appeared before me, one LCpl Benjamin Whaley, who being duly sworn, says that there is probable cause to believe that certain property subject to seizure under provisions of S.C. Code Ann. § 17-13-140, as amended, is located on the following premises in this County:

**DESCRIPTION OF PROPERTY SOUGHT**

Any and all instrumentalities of the crimes of reckless/negligent operation of a vessel and unlawful consumption of alcohol by a person under 21 to include but not limited to, medical records and reports, medical staff notes, observations and recommendations, diagnosis and referrals, X-rays or other imagery, pertaining to Conner Martin Cook, [REDACTED] 99, SSN#, who was a patient in the Emergency Room on or about February 24, 2019.

**DESCRIPTION OF PREMISES TO BE SEARCHED**

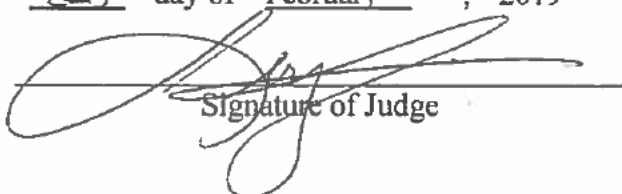
Medical University of South Carolina, Health Information Services, 169 Ashley Avenue, MSC 369, Charleston, South Carolina 29425

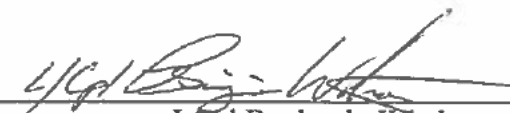
**REASON FOR AFFIANT'S BELIEF THAT THE  
PROPERTY SOUGHT IS ON THE SUBJECT PREMISES**

That on February 24, 2019, SCDNR was dispatched to Archer Creek in Beaufort County and Beaufort Memorial Hospital regarding a boating accident with one boat passenger ejected and still missing and one passenger sustaining great bodily injury from significant facial injuries. Officers determined that the boat occupied by 6 individuals under the age of twenty-one, struck the Archer Creek bridge at a high rate of speed. Officers observed several alcoholic beverage containers and witnesses stated that the boat was being operated in a reckless manner prior to the collision. Boat occupants were unable or refused to identify who was operating. It is believed comparing medical records/documents may assist in identifying who was operating the vessel.

Sworn to and Subscribed before me

28<sup>th</sup> day of February, 2019

  
Signature of Judge

  
LCpl Benjamin Whaley  
Address 217 Fort Johnson Road  
Charleston, SC 29422  
Phone 843-953-9307