

J-0432817

## Arrest Report

21078458

p-408

FLORIDA HIGHWAY PATROL  
P.O. BOX 540007, GREENACRES, FL 33454

Report Date / Time 5/25/2021 03:04 AM	Report Number FHP99ARR841698	Case Number/Cad Number FHPL21OFF032918 / LWRC21CAD093079	Reporting Officer Name GONZALEZ, MARQUIS
Originating Agency ORI	Occur Date Time Range 05/25/2021 02:25:58 -	Jurisdiction	Clearance

## Location of Occurrence

County PALM BEACH	Location Type PUBLIC PLACE	Location Description SR 9 SB AT GATEWAY BLVD
Street Number I-95 SB NOF	Street	Apt/Lot/Bldg City BOYNTON BEACH
State FL	Zip Code 33426	

## Defendant

First Name CLAYTON	Middle Name ALLYN	Last Name STRICKLAND	Suffix	Race WHITE	Sex MALE	Height 602	Weight 200	Hair BRO	Eyes BLU
MNI #	SSN [REDACTED]	Date of Birth 02/11/1979	Age 42	ID Type E	Drivers License or other ID S362101790510	State FL	OCA / Agency ID		
Place of Birth:		CHARLOTTE NC US							
Address * RESIDENCE / 1121 S MILITARY TRL APT 208 , DEERFIELD BEACH, FL 33442 /									

## Arrest

Arrest Date/Time 5/25/2021 3:01:27 AM	Arrest Location Type PUBLIC PLACE	Arrest Location Description SR 9 SB AT GATEWAY BLVD
Street Number	Street	Apt/Lot/Bldg County City PALM BEACH BOYNTON BEACH
State FL	Zip Code 33426	

## Charge : S

Counts 1	Charge 318.193.1a	Bond Amount \$0.00	<input type="checkbox"/> No Bond
Charge Degree S	Charge Level MISDEMEANOR	General Offense Code DUI-UNLAW BLD ALCH	
Charge Description DUI INFLUENCE OF ALCOHOL OR DRUGS			
Bond Set by Court			
Bond Amount	<input type="checkbox"/> No Bond		
Bond Type(s)			

## Probable Cause

On May 25, 2021, the Lake Worth Regional Communications Center (LWRCC) dispatch me to disabled vehicle call located on State Road 9 (Interstate 95) southbound at Gateway Blvd. Dispatch advised that an unknown vehicle was

Arrest Report

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SCANNED  
MAY 25 2021  
H.D. Neal 7246

MAY 25 4 51 45

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blocking the inside lane of State Road 9 and the vehicle appeared to have flat tires, described by passing motorists. Moments later, I arrived on scene and observed a white Nissan Rogue SUV with a Florida tag: PVLZ22 blocking the inside lane with the rear brake lights activated. When I arrived at the driver side door, I observed a white male, later identified as Clayton Allyn Strickland through his Florida driver's license: S362-101-79-051-0, slumped over the wheel with the vehicle's stick shift in drive. After several attempts of banging on the window to wake Mr. Strickland, Mr. Strickland continued to make no physical attempts to move or wake up. I proceeded to break the passenger side window with my state issued baton and had dispatch contact Fire Rescue to have them en route to render aide. Once I was able to break open the passenger side window, Mr. Strickland finally woke up. I had Mr. Strickland put the car in park and had him exit the vehicle. As I spoke with Mr. Strickland, I observed the driver had pinpoint pupils and droopy eyes. I also observed the driver's speech to be slurred. He seemed very lethargic and responded in such a slow manner when asked to perform simple tasks such as walking to the inside shoulder and standing. I proceeded to have Mr. Strickland walk to the front of my patrol car. When we arrived in front of the patrol car, I advised Mr. Strickland that I believed he was under the influence of an unknown alcoholic beverage, chemical substance, or a controlled substance. I then asked Mr. Strickland if he was voluntarily willing to perform field sobriety exercises. Mr. Strickland understood and agreed to perform the exercises.

FSEs were conducted on the left inside shoulder of State Road 9 southbound at Gateway Blvd. The ground was even and free of debris. A yellow taped line was used for the Walk and Turn, and a red- light pen was used as a stimulus for the Horizontal Gaze Nystagmus.

Before beginning the exercises, I checked to see if Mr. Strickland was wearing glasses. It was determined that Mr. Lindstrom was not wearing glasses. I asked Mr. Strickland if there were any injuries preventing him from performing the exercises. He advised that his right knee was injured but he was willing to perform the exercises. Mr. Strickland was instructed to place his feet together and place his hands down at his side. He then was instructed to keep his head still and follow the stimulus with his eyes and his eyes only. He was also instructed to keep looking at

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the stimulus until told not to. Mr. Strickland verbally indicated that he understood all the instructions above.

#### Horizontal Gaze Nystagmus:

- Equal tracking and equal pupil size.
- During the exercise I observed the defendant with lack of pursuit in both eyes.
- Distinct and sustained nystagmus at maximum deviation in Both eyes
- Nystagmus prior to 45 degrees in both eyes
- Driver had great difficulty maintaining his eye lids open

#### Walk and Turn:

The defendant advised he understood the instructions explained.

During the walk and turn I observed

- Unable to maintain balance in the beginning of the exercise.
- Driver used arms for balance
- Driver could not perform the full exercise due to difficulties maintaining balance during the beginning of the exercise. Driver was given three attempts before moving on to the One Leg Stand exercise.

#### One Leg Stand:

The defendant advised he understood the instructions explained.

During the one leg Stand I observed

- The driver lifted his left foot off the ground
- Driver looked up throughout the whole exercise.
- Driver did not count out loud
- Driver put foot down before being told to, Driver could not finish exercise due to difficulties maintaining balance during the beginning of the exercise.

Based on my investigation, I believed the defendant's normal faculties were impaired and he was placed under arrest for DUI at 03:01A.M. Mr. Strickland was then transported to the Palm Beach County Breath test center. Once I arrived, I conducted a 20-minute observation. At no time did he regurgitate or take anything

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by mouth. I then requested that he provide a sample of his breath which he complied. The driver had a BAC of .000 on the first attempt and a BAC of .000 on the second attempt. Florida Implied consent was read for Mr. Strickland to submit to a urine test sample for the purpose of detecting the presence of chemical or controlled substances. Mr. Strickland understood and complied. Mr. Strickland was given several chances to give a urine sample (Approximately 1 hour wait). Mr. Strickland stated he could not provide a urine sample at 4:56 AM and was taken as a refusal. Mr. Strickland was booked at the Palm Beach County Jail. The above incident occurred in Palm Beach County.

#### Jail Booking Facility

Booking Date/Time	Booking County PALM BEACH	Booking Facility PALM BEACH COUNTY CORRECTIONS	Booking Facility Phone (561) 688-4400
Booking Facility Location 3228 GUN CLUB ROAD WEST PALM BEACH, FLORIDA 33406			Booking Number
Booking Comments			

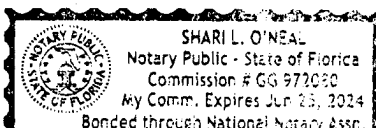
#### Court

Court County PALM BEACH	Court Location 200 WEST ATLANTIC AVE. DELRAY BEACH, FL 33444		
Court PALM BEACH SOUTH COUNTY COURTHOUSE	Court Phone 561-274-1530	Court Appearance Date / Time 06/24/2021 8:30AM	Court Fine
Comments			

Officer Name Rank / ID # GONZALEZ, MARQUIS TPR 4520	Involvement On Report / Reporting Role REPORTING OFFICER	Officer Agency Org/Unit FLORIDA HIGHWAY PATROL FHPL1LWRC/PALM BEACH/BROW LN TO SR804
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The undersigned certifies and swears that he/she has just and reasonable grounds to believe that the above named Defendant, committed violation(s), of law, on the below date(s) and time(s), as listed in the probable cause associated with this report:

#### Reporting Officer

Officer Name GONZALEZ, MARQUIS	Office Rank TPR	Officer ID No 4520	Sworn and subscribed before me, the undersigned authority This the <u>25</u> day of <u>May</u> , 2021 DEPUTY OF THE COURT, NOTARY OR LAW ENFORCEMENT
Officer Agency FLORIDA HIGHWAY PATROL			
Officer Signature <i>[Signature]</i>			

Arrest Report

SCA  
MAY 25

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☐ No Bill / Petition   
 ☐ Issue Warrant   
 ☐ Prosecution Approved

Signature of Assistant State Attorney \_\_\_\_\_ Date \_\_\_\_\_

NOT A CERTIFIED COPY



PALM BEACH COUNTY SHERIFF'S OFFICE  
DUI TESTING FACILITY  
INFORMATION SHEET

PBSO CASE # 21-068937

AGENCY CASE# FHPL21OFF032918

AGENCY ZONE \_\_\_\_\_

CRASH CASE # \_\_\_\_\_

TIME OF STOP/CRASH 2:41AM

DATE 5/25/21

DAY TUESDAY

SUBJECT'S NAME CLAYTON, ALLYN, STRICKLAND

RACE WHITE

SEX MALE

HGT 602

WGT 200LBS

DOB 2/11/79

LOCATION SR 9 SB AT GATEWAY BLVD

ARRESTING OFFICER'S NAME & ID TPR. MARQUIS GONZALEZ 4519 AGENCY FHP

DIVISION: TROOP L

NOTIFIED BY COMMO Yes

ARRIVAL AT FACILITY 3:26 AM

BREATH RESULTS:

ARREST TIME 3:01 AM

1. .000

2. .000

3. None

4. \_\_\_\_\_

**REFUSED**

TESTING OFFICER'S ID 6212

PBSO VIDEOTAPE # /

SUBJECT: CLayton ALLYN Strickland CASE NUMBER: FHPL 21OFF032911

## IMPLIED CONSENT FOR DUI IN A MOTOR VEHICLE

NOTE: READ ONLY THE PARAGRAPH APPLICABLE TO THE TYPE OF TEST YOU ARE REQUESTING.

I am now requesting that you submit to a lawful test of your BREATH for the purpose of determining its alcohol content.

-OR-

I am now requesting that you submit to a lawful test of your URINE for the purpose of detecting the presence of chemical or controlled substances.

-OR-

I am now requesting that you submit to a lawful test of your BLOOD for the purpose of detecting its alcohol content and the presence of chemical or controlled substances.

NOTE: READ ONLY IF THE SUBJECT DOES NOT COMPLY WITH YOUR REQUEST.

I am TRP. Gonzalez of the FHP

If you fail to submit to the test I have requested of you, your privilege to operate a motor vehicle will be suspended for a period of one (1) year for a first refusal, or eighteen (18) months if your privilege has been previously suspended as a result of a refusal to submit to a lawful test of your breath, urine or blood. Additionally, if you refuse to submit to the test I have requested of you and if your driving privilege has been previously suspended for a prior refusal to submit to a lawful test of your breath, urine or blood, you will be committing a misdemeanor. Refusal to submit to the test I have requested of you is admissible into evidence in any criminal proceeding.

SUBJECT'S SIGNATURE: (X) Read on Camry

## CONSTITUTIONAL WARNINGS

I AM REQUIRED TO WARN YOU BEFORE YOU MAKE ANY STATEMENTS THAT YOU HAVE THE FOLLOWING RIGHTS:

1. You have the right to remain silent and not answer any questions.
2. Any statement must be freely and voluntarily given.
3. You have the right to the presence of a lawyer of your choice before you make any statement and during any questioning.
4. If you cannot afford a lawyer, you are entitled to the presence of a court appointed lawyer before you make any statements and during any questioning.
5. If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.
6. I can make no threats or promises to induce you to make a statement. This must be of your own free will.
7. Any statement can and will be used against you in a court of law.

SUSPECT'S SIGNATURE: (X) Read on Camry

WHITE - STATE ATTY.

YELLOW - DHSMV

PINK - CENTRAL RECORDS

GOLD - JAIL

SUBJECT: Clayton, ALVIN Strickland CASE NUMBER: FHPLD/OFF 032918  
**QUESTIONS AND ANSWERS**

I AM NOW GOING TO ASK YOU SOME QUESTIONS. WITH THESE RIGHTS IN MIND, YOU MAY ANSWER SOME OF, ALL OF, OR NONE OF THE FOLLOWING QUESTIONS AS YOU LIKE.

WERE YOU OPERATING A MOTOR VEHICLE AT THE TIME OF THE STOP/ACCIDENT? Yes

WHERE WERE YOU GOING? Home

WHAT STREET OR HIGHWAY WERE YOU ON? 95

DIRECTION OF TRAVEL? S WHERE DID YOU START? Lyka Woods

WHAT TIME DID YOU START? — WHAT TIME IS IT NOW? —

WHAT IS TODAY'S DATE? — WHAT DAY OF THE WEEK IS IT? Monday

WHAT COUNTY AND CITY ARE YOU IN NOW? Pylon Texas

WHEN DID YOU LAST EAT? 6 hrs ago WHAT DID YOU EAT? pizza

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? resting

HOW MUCH DO YOU WEIGH? 200 HAVE YOU BEEN DRINKING? Yes WHAT? beer

HOW MUCH? 2 WHERE? friends WITH WHOM? friends

WHEN DID YOU HAVE YOUR FIRST DRINK? — AND YOUR LAST DRINK? —

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? —

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? NO ARE YOU UNDER THE INFLUENCE? NO

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? — HOW MUCH? —

WHAT? — WHERE? — WHEN? —

WHAT LINE OF WORK ARE YOU IN? Construction WHEN DID YOU LAST WORK? yesterday

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? NO WHAT? —

ARE YOU SICK OR INJURED? NO WHAT'S WRONG? —

DO YOU LIMP? NO DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? —

WERE YOU IN AN ACCIDENT TODAY? NO

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? Yes WHEN? —

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? NO WHO? — WHY? —

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? NO WHAT? — WHEN? —

DO YOU HAVE:

EPILEPSY?	<u>NO</u>
GLASS EYE?	<u>NO</u>
FALSE TEETH?	<u>NO</u>
EAR INFECTION?	<u>NO</u>
INNER EAR TROUBLE?	<u>NO</u>
DIABETES?	<u>NO</u>

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? —

DO YOU TAKE INSULIN? NO IF SO, WHEN WAS YOUR LAST INJECTION? —

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? Yes WHERE? NC

INTERVIEWER: —

WHITE - STATE ATTY.

YELLOW - DHSMV

PINK - CENTRAL RECORDS

GOLD - JAIL



FLORIDA DEPARTMENT OF LAW ENFORCEMENT  
ALCOHOL TESTING PROGRAM  
BREATH ALCOHOL TEST AFFIDAVIT

Instrument Type: Intoxilyzer 8000  
Instrument Registered To: PALM BEACH CO SO  
Instrument Serial Number: 80-006029 Software: 8100.27  
Date of Test: 05/25/2021

Date of Last Agency Inspection: 05/14/2021

Observation Period Began: 03:26

Subject's Name: CLAYTON A STRICKLAND

DOB: 02/11/1979 Sex: M

The subject was observed for at least twenty-minutes prior to the administration of the breath test to ensure that the subject did not take anything orally and did not regurgitate.

Results:

Test	g/210L	Time
Diagnostics Check	OK	03:51
Air Blank	0.000	03:52
Control Test	0.081	03:52
Air Blank	0.000	03:52
Subject Sample #1	0.000	03:53
Air Blank	0.000	03:54
Air Blank	0.000	03:56
Subject Sample #2	0.000	03:56
Air Blank	0.000	03:57
Control Test	0.079	03:57
Air Blank	0.000	03:58
Diagnostics Check	OK	03:58

Cylinder Lot: 22620080A2  
Exp: 10/05/2022

State of Florida, County of Palm Beach

Personally appeared before me the undersigned authority, who (☒) is personally known to me or (☐) produced \_\_\_\_\_ as identification, and who after being placed under oath, states:

I SHARI L O'NEAL, hold a valid Breath Test Operator permit issued by the Florida Department of Law Enforcement, I administered the above breath test to the subject named above in accordance with Chapter 11D-8, Florida Administrative Code, and this form is a true and accurate report of that breath test.

Breath Test Operator: S. O'Neal

Signature

Date: 05/25/21

Sworn to (or affirmed) before me this 25 day of May, 2021

Signature of Notary Public-State of Florida

Printed Name of Notary Public-State of Florida

Note: Pursuant to section 117.10, Florida Statutes, law enforcement officers, correctional officers, traffic accident investigation officers and traffic infraction enforcement officers are notaries public when engaged in the performance of official duties. In accordance with section 316.1934(5), F.S., this completed form is admissible without further authentication and is presumptive proof of the results herein. To be used in accordance with Section 316.1934(5), F.S., and in administrative proceedings pursuant to 322.2615, F.S.

**STATE OF FLORIDA**  
**DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES**  
**AFFIDAVIT OF REFUSAL TO SUBMIT TO**  
**BREATH AND/OR URINE TEST**

I, GONZALEZ, MARQUIS, a duly certified Law Enforcement Officer or Correctional Officer,  
(Name of Officer reading Implied Consent Warning)

am a member of FLORIDA HIGHWAY PATROL, and I do swear

(Name of law enforcement agency)  
or affirm that on or about the 25 day of May, 2021, at 7:01 ☐ P.M. ☒ A.M.

DRIVER CLAYTON ALLYN STRICKLAND  
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME  
DL# S362101790510, state of FL, was placed under lawful arrest for

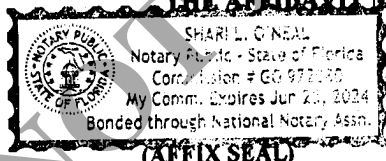
the offense of 316.193(1)  
D.U.I. - ALCOHOL OR DRUGS (MISDEMEANOR) by GONZALEZ, MARQUIS and  
(Name of Arresting Officer)  
issued Citation # A7728AE

That on or about the 25 day of May, 20 21, at 4:56 ☐ P.M. ☒ A.M.  
in palm beach County,

I requested that the driver submit to a ☐ breath and/or ☒ urine test to determine his or her blood alcohol level and/or the presence of chemical or controlled substances. I informed the driver that the refusal to submit to such test (s) would result in the suspension of his or her driving privilege for a period of one (1) year for a first refusal, or for a period of eighteen (18) months if his or her driving privilege had been previously suspended for refusing to submit to a breath, urine or blood test. I also informed the driver that he or she commits a misdemeanor by refusing to submit to a lawful test as requested above if his or her driving privilege has been previously suspended for refusal to submit to a lawful test of his or her breath, urine, or blood. Additionally, I informed the driver that if he or she holds a CDL, or was operating a CMV, refusal will result in the disqualification of the Commercial Driver's License/driving privilege for a period of one (1) year in the case of a first refusal or permanently if he or she has previously been disqualified as a result of a refusal to submit to any such lawful test. Nonetheless, the driver refused to submit to the test(s) requested.

Signature of Law Enforcement Officer or  
Correctional Officer

**THE AFFIDAVIT MUST BE NOTARIZED OR ATTESTED TO (F.S. 117.10)**



(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before  
me this 25 day of May, 20 21,  
by \_\_\_\_\_

who is personally known to me or who has produced  
\_\_\_\_\_ as identification.

Notary Public S. O'Neal

HSMV-BAR1001 (REV. 10/2016)

The foregoing instrument was sworn and subscribed before me:

Signature of Attesting Officer

Title \_\_\_\_\_

Date \_\_\_\_\_

Note: Mail or hand deliver to the designated  
Bureau of Administrative Reviews office,  
Department of Highway Safety and Motor  
Vehicles, with the driver's license, the  
appropriate copy of the UTC, and the  
probable cause affidavit.

# TESTING FACILITY TASK REPORT

AGENCY: FHP-L TRP. GONZALEZ #4519

SUBJECT: STRICKLAND, CLAYTON A.

CASE NUMBER: 21-068937

DATE: 05-25-21

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 0347 HRS

ENDING TIME: 0405 HRS

BREATH TESTS RESULTS: 1) .000 TIME 0353 A.M. ☒ P.M. ☐ 2) .000 TIME 0356 A.M. ☒ P.M. ☐  
3) TIME A.M. ☐ P.M. ☐ 4) TIME A.M. ☐ P.M. ☐

BREATH OPERATOR: S.O'NEAL #6212

MAINTENANCE TECHNICAN: J. KARLECKE #6467

## TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED, SCRATCHY

ATTITUDE: CALM, COOPERATIVE

CLOTHING: JACKET- BLACK SHIRT- NONE SHORTS- BLACK & GRAY

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

## OTHER:

EYES: BLOODSOT, GLASSY

DEXTERITY: SLOW, SLUGGISH

## COMMENTS:

20 MIN. OBSERVATION DONE BY A/O GONZALEZ #4519

D FELL ASLEEP DURING THE 20 MIN. OBSERVATION.

A/O REQUESTED THE BREATH TEST.

D SUBMITTED TO THE BREATH REQUEST.

D COMPLETED THE BREATH TEST CORRECTLY.

EXPALINED THE BREATH RESULTS TO THE D.

A/O REQUESTED A URINE SAMPLE ON CAMERA.

D SUBMITTED TO THE URINE REQUEST ON CAMERA.

THE A/O READ THE IMPLIED CONSENT ON CAMERA REF. TO THE URINE REQUEST.

D STILL SUBMITTED TO THE URINE AFTER THE I/C WAS READ. C/W READ ON CAMERA, D ANSWERED Q&A.

D REFUSED TO SUBMIT TO URINE @0456 HRS.



**PALM BEACH COUNTY  
SHERIFF'S OFFICE**  
Florida State Statute Exemption Sheet

**Palm Beach County Sheriff's Office – Arrests Only**

	X	Florida State Statute	Description	Page Number(s)
<b>L/E Exemptions</b>	<input type="checkbox"/>	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	<input type="checkbox"/>	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel.	
	<input type="checkbox"/>	119.071(2)(f)	Confidential informants (CIs).	
	<input type="checkbox"/>	119.071(2)(e)	Confession.	
<b>Public Info. Exemptions</b>	<input type="checkbox"/>	985.04(1)	Juvenile offender records.	
	<input type="checkbox"/>	119.071(h)(i)	Assets of a crime victim.	
	<input type="checkbox"/>	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	<input type="checkbox"/>	394.4615(7)	Mental health information.	
	<input type="checkbox"/>	119.071(4)(d)(2)(a)	Home address, telephone, Social Security number, date of birth, or photos of active/former LE personnel, spouses, and children.	
<b>Florida Rules of Judicial Administration 2.420 (Rule of 23)</b>	<input checked="" type="checkbox"/>	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	<input type="checkbox"/>	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	<input type="checkbox"/>	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	<input type="checkbox"/>	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
<b>Other</b>	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

**REVIEW COMPLETED BY**

<b>Booking Number:</b> 2021012626	<b>Date:</b> 05/26/2021
	<b>Specialist Name/ID:</b> T Howard/7185