

ARREST / NOTICE TO APPEAR

1 Arrest
2 N.T.A.
3 Request for Warrant
4 Request for Capias
5 Juvenile Referral

1

JUVENILE

AD M I N I S T R A T I O N	ORIS Number	Agency ORI Number 0500200		Agency Name Boca Raton Police Department		Agency Report Number (N.T.A.'s only) 3, 2 2018-014036			
D E F E N D A N T	Charge Type Check as many as apply ☐ 1 Felony ☐ 2 Traffic Felony		☐ 3 Misdemeanor ☐ 4 Traffic Misdemeanor		☐ 5 Ordinance ☐ 6 Other		If Weapon Seized Enter Type None/not Applicable		Multiple Clearance Indicator
	Location of Arrest (Including Name of Business) 400 W PALMETTO PARK RD BOCA RATON 33432					Location of Offense (Business Name, Address) 400 W PALMETTO PARK RD, BOCA RATON, FL 33432			
	Date of Arrest 10/19/2018	Time of Arrest 19:40	Booking Date 10/19/2018	Booking Time 19:50	Jail Date 10/19/2018	Jail Time 20:30	Location of Vehicle WESTWAY TOWING		
C O D E S	Name (Last, First, Middle) WASSMER, EDWARD								
	Alias:								
	Sex M	W - Where Q - Criminal/Arrest	Date of Birth 02/15/1961	Height 6'00	Weight 215	Eye Color BLACK	Hair Color BLONDE	Complexion LIGHT	Build Large
	Marital Status S					Religion CATHOLIC		Indication of Alcohol Influence Yes ☐ No ☒ Unit ☐	
	Local Address (Street, Apt. Number) 7000 N DIXIE HWY, BOCA RATON, FL 33487					Phone (954) 242-1641		Residence Type 1 City 1 Florida 2 County 4 Out of State 1	
	Permanent Address (Street, Apt. Number) 7000 N DIXIE HWY, BOCA RATON, FL 33487					Phone (954) 242-1641		Address Source FLDL	
	Business Address (Name, Street) HALL SERVICES,					Phone		Occupation Contractor	
	DL Number, State W256220610556 / FL		Sec. Sec. Number		DHS Number		Place of Birth (City, State) PATTERSON, NJ,		Citizenship US
	Co-Defendant Name (Last, First, Middle)					Race	Sex	Date of Birth	☐ 1 Arrested ☐ 3 Felony ☐ 5 Juvenile ☐ 2 At Large ☐ 4 Misdemeanor
	Co-Defendant Name (Last, First, Middle)					Race	Sex	Date of Birth	☐ 1 Arrested ☐ 3 Felony ☐ 5 Juvenile ☐ 2 At Large ☐ 4 Misdemeanor
J U V E N I L E	Name (Last, First, Middle)								
	Address (Street, Apt. Number) (City) (State) (Zip)								
	Notified by (Name) Date Time								
	Relationship Date Time								
	The above address was provided by ☐ defendant and/or ☐ defendant's parents The child and/or parent was told to keep the Juvenile Court Clerk's Office (Phone 355-2526) informed of any change of address								
	Property Crime? ☐ Yes ☒ No Description of Property Value of Property								
	Drug Activity S Sell B Buy T Traffic I. Druggies/ Distribution M. Manufacture/ Produce/ Cultivate Z. Other Drug Type N N/A A Amphetamine B Barbiturate C Cocaine E Heroin H Hallucinogen M Marijuana O Opium/Heroin P Pharmaceutical/ Equipment S Synthetic U Unknown Z. Other								
	Charge Description DUI Status Violation Number 316.193(1) Violation of ORD #								
	Drug Activity Drug Type Amount / Unit Offense # Counts Domestic Violence ☐ Y ☒ N Warrant / Capias Number								
	Charge Description Status Violation Number Violation of ORD #								
I N T A K E	Health / Apparent Physical Condition of Defendant FAIR								
	Any knowledge of the following ☐ Mental ☐ Escape Risk ☐ Medication ☐ Delirium ☐ Injury								
	Check which applies ☐ Released O.R. ☐ Released to Parent/Guardian ☒ TOT. County Jail ☐ Pending Bond ☐ South County Mental Health								
	PROPERTY - Received By CASAS, J Released By CASAS, J Released To								
	Transported By CASAS, J Date Transported Time Transported Other								
	INSTRUCTION NO. 1 - Mandatory appearance in court ☐ INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.								
	Location (Court, Room) South County 200 W Atlantic Ave Delray Beach, FL 33444								
	Court Date and Time 11/26/2018 08:30:00								
	I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED BY THIS NOTICE TO APPEAR, THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED								
	Signature of Defendant (or Juvenile and Parent/Custodian) 10/19/18 Date Signed								
A D M I N	HOLD for Other Agency								
	Signature of Arresting Officer 818 ID # 818								
	Name of Arresting Officer (Print) CASAS, J ID # 818 Agency BRPD								
Name Verification (Printed by Arrestor) JOHN W. ALCONCER									
PAGE 1 OF 1									

0502377

2018 CT19259

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PROBABLE CAUSE AFFIDAVIT

1. Arrest
2. N.T.A.
3. Request for Warrant
4. Request for Capias

1

JUVENILE

OSTB Number	Agency ORI Number FL 0500200		Agency Name BOCA RATON POLICE DEPARTMENT		Agency Report Number 3 2 2018-014036	
Charge Type Check as many as apply	☐ 1 Felony ☐ 2 Traffic Felony		☐ 3 Misdemeanor ☒ 4 Traffic Misdemeanor		☐ 5 Ordinance ☐ 6 Other	
Name (Last, First, Middle) WASSMER, EDWARD					Race W	Sex M
Date of Birth 02/15/1961						
Charge Description 316.193(1) DUI			Charge Description			
Charge Description			Charge Description			
Victim's Name (Last, First, Middle) STATE OF FLORIDA,					Race	Sex
Local Address (Street, Apt. Number) 100 NW 2ND AVE, BOCA RATON, FL 33432					Phone (561) -	Address Source
Business Address (Name, Street) (56) -					Phone (56) -	Occupation
The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following violation of law The Person taken into custody ☐ committed the below acts in my presence. ☐ confessed to _____ admitting to the below facts ☐ was observed by _____ who told _____ that he/she saw the arrested person commit the below acts ☒ was found to have committed the below acts, resulting from my (described) investigation On the <u>19</u> day of <u>October</u> , <u>2018</u> at <u>19:40</u> (Specifically include facts constituting cause for arrest.)						
Captured on Avail. On 10/19/2018 I responded to the area of 400 W Palmetto Park Rd in reference to a traffic accident with no injuries. Upon completion of my traffic crash investigation, I advised Edward Wassmer that, based on my observations of him slurring his speech and having trouble keeping his balance, I was going to begin conducting a DUI investigation. I then advised Wassmer of his constitutional warnings and he advised that he understood. Wassmer first stated that he had "a couple of beers" and then changed his answer to "a couple of vodkas". I asked Wassmer if he would consent to the Standardized Field Sobriety Tasks to dispel my alarm and he refused. Wassmer informed me of having bad knees and other injuries which would prevent him from properly performing the Standardized Field Sobriety Tasks. He also stated that he was taking medication which could affect his ability to perform the tasks. Wassmer was explained additional tasks which require minimal physical activity, such as the finger to nose and the rhomberg alphabet, and he refused to perform those as well. During the interaction, Wassmer had slurred speech and delayed reaction time while answering questions. Wassmer asked me to repeat myself a number of times and did not recall the exercises I explained to him. His eyes appeared glossy and slightly red and Wassmer had an odor of alcohol emitting from his person. Wassmer was constantly swaying while speaking to me and was having trouble standing up without being supported by a fixed object. Wassmer relied heavily on his vehicle to prevent him from falling. Due to Wassmer refusing to perform the Standard Field Sobriety Tasks, I advised Wassmer of his Taylor warnings and explained to him that I would need to make a decision based on my observations up to this point in my investigation. Wassmer continued to refuse to the exercises and said, "just take me to jail." Wassmer was then placed under						
SWORN AND SUBSCRIBED BEFORE ME WOLLSCHLAGER, ANTHONY J NOTARY PUBLIC / CLERK OF COURT / OFFICER (F S S 117 10) <u>10/19/2018</u> DATE						
SIGNATURE OF ARRESTING / INVESTIGATING OFFICER CASAS, JAVIER (818) NAME OF OFFICER (PLEASE PRINT) <u>10/19/2018</u> DATE						

PAGE

1 of 2

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.

**PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT**

1 Arrest
2. N.T.A. 3 Request for Warrant
4 Request for Capias

1

JUVENILE

ORTS Number Agency ORI Number FL 0500200	Agency Name BOCA RATON POLICE DEPARTMENT	Agency Report Number 3 2 2018-014036
Charge Type Check as many as apply ☐ 1 Felony ☐ 3 Misdemeanor ☐ 5 Ordinance ☐ 2 Traffic Felony ☒ 4 Traffic Misdemeanor ☐ 6 Other		Special Notes:
Name (Last, First, Middle) WASSMER, EDWARD		Race Sex Date of Birth W M 02/15/1961

arrest for DUI per F.S.S. 316.193(1).

While escorting Wassmer to my vehicle, he had trouble keeping his balance and walking straight. Wassmer had trouble with the task of sitting straight up in the back seat of my police vehicle and required assistance to sit properly.

In addition, Wassmer could not stand still during processing at BRPD and was swaying while having his photo taken. Wassmer requested to sit during the 20-minute observation period, at which point I advised he could sit on a stool inside of juvenile room #2. While attempting to sit, Wassmer missed the stool and fell on the floor, suffering minor lacerations to his left and right wrist. He advised he was "Okay" and did not require any medical attention.

Ofc. Fong responded to booking assist with the DUI Influence Report and operate the Intoxilyzer 8000. Wassmer was again read his constitutional warnings and he advised he did not wish to answer any further questions. Wassmer also refused to provide a breath sample.

Wassmer was transported to Boca Raton Regional Hospital, where he was medically cleared, and later turned over to Palm Beach County jail.

Reference HSMV Crash Report #87925747 for information regarding the traffic accident.

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SWORN AND SUBSCRIBED BEFORE ME  WOLLSCHLAGER, ANTHONY J NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) 10/19/2018 DATE	 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER CASAS, JAVIER (818) NAME OF OFFICER (PLEASE PRINT) 10/19/2018 DATE
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1940
2005

2018-14036

DUI INFLUENCE REPORT



BOCA RATON POLICE SERVICES DEPARTMENT
100 NW 2nd Avenue
Boca Raton, FL 33432

ARRESTING OFFICER: JAVIER CASAS

Name: OFC. JALYN CHRISWISSER Phone # _____ Work # 561-368-6201

Address: 100 NW 2ND AVE BUDAPEST FL 33432

Can testify to: BACK UP

Name: OFC. ^{FONG} SAavedra Phone # _____ Work # 561-368-6201

Address: 100 NW 2ND AVE BUDAPEST FL 33432

Can testify to: BREATH TEST.

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____



BOCA RATON POLICE SERVICES DEPARTMENT
DUI INFLUENCE REPORT - PART II

To be filled out at testing facility

Agency Case # 2018-14036

I. INTRODUCTION (Instrument Operator faces video camera)

A. The day is FRIDAY, OCTOBER, 19, 2018.
(day) (month) (date) (year)

B. The time is now approximately 8:25 AM/PM.

C. The following is in reference to case number 2018-14036.

D. Present at this time is OFF. CASAS & OFF. FONG of the Boca Raton Police Department.
(Officer's Name)

E. Officer CASAS, have you arrested EDWARD WASSMER in violation of
Florida State Statute 316.193? (Defendant's name)

F. Did this violation occur within the City of Boca Raton, Palm Beach County, Florida? YES

G. Mr/Mrs./Ms. EDWARD WASSMER, I am required to inform you these
proceedings are being video recorded.

Operator Note: Video record breath request, breath sample, and interview.

II. AT THIS TIME THE ARRESTING OFFICER WILL REQUEST A BREATH SAMPLE.

Note: Read only the paragraph applicable to the type of test you are requesting.

- (A) I am now requesting that you submit to a lawful test of your BREATH for the purpose of determining its alcohol content.
- B. I am now requesting that you submit to a lawful test of your URINE for the purpose of determining the presence of chemical or controlled substances.
- C. I am now requesting that you submit to a lawful test of your BLOOD for the purpose of determining its alcohol content and the presence of chemical or controlled substances.

IMPLIED CONSENT WARNINGS

Note: Read only if the subject does not comply with your request.

I am OFF. CASAS of the BOCA RATON PD.

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 Signature: _____

Note: Also read for CDL holders:

IN ADDITION, your refusal to submit will result in the loss of your commercial privileges for one year from today. If this is your SECOND REFUSAL, you will be permanently disqualified from operating a commercial motor vehicle.

Note: After reading the implied consent warning, the arresting officer must request a breath sample again.

(IF REFUSAL THEN)

At this time EDWARD WASSMER Mr./Mrs./Ms. has refused to submit to a breath test.

The date is OCTOBER, 19, 2018, and the time is 2028 AM/PM.
(month) (day) (year)

A refusal form will be completed by the arresting officer.



BOCA RATON POLICE SERVICES DEPARTMENT
TESTING FACILITY TASK REPORT

SUBJECT: EDWARD WASSMER

CASE #: 2018-14034

DATE: 10/19/18

BREATH TEST RESULTS

1) TIME REFUSED AM/PM 2) TIME _____ AM/PM
3) TIME _____ AM/PM 4) TIME _____ AM/PM

BREATH OPERATOR: OFC. FONG

MAINTENANCE TECHNICIAN: OFC. PARE

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: UPSET

CLOTHING: WHITE SHIRT, TAN SHORTS, TAN SANDALS

MEDICAL CONDITION: HIGH BLOOD PRESSURE

OTHER: _____

COMMENTS: _____

Identify yourself and state:

I am required to warn you before you make any statement that you have the following Constitutional rights:

- (1) You have the right to remain silent and not answer any questions.
- (2) Any statement you make must be freely and voluntarily given.
- (3) You have a right to the presence and representation 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 and representation of a court appointed lawyer before you make any statement 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 be and will be used against you in a court of law.
- (8) Do you understand these rights as I have read them to you, and do you wish to speak to me?

Signed: ON VIDEO Date: 10/19/18 Time: 2028

QUESTIONS AND ANSWERS

Were you operating a motor vehicle at the time of the accident/stop? /

Where were you going? _____

What street or highway were you on? _____

Direction of travel? _____

Where did you start driving from? _____

What city (county) were you stopped in? _____

What time did you start? _____ AM/PM What time is it now? _____

What is today's date? _____ What day of the week is it? _____

When did you last eat? _____ What did you eat? _____

What have you been doing the past three hours prior to this stop/accident? _____

How much do you weigh? _____ Have you been drinking? _____ What were you drinking? _____

How much? _____ Where? _____ With whom were you drinking? _____

When did you have your first drink? _____ AM/PM When did you stop drinking? _____ AM/PM

How did you consume your last two drinks? _____

Are you under the influence of alcohol now? ☐ Yes ☐ No

Can you feel the effects of alcohol? ☐ Yes ☐ No

Have you consumed alcohol since the accident? ☐ Yes ☐ No

Can you feel the effects of alcohol? ☐ Yes ☐ No

Have you consumed alcohol since the accident? ☐ Yes ☐ No How much? _____

What? _____ Where? _____

What line of work are you in? _____

When did you last work? _____

Do you have any physical defects or injuries? ☐ Yes ☐ No If yes, explain: _____

Are you sick or injured? ☐ Yes ☐ No If yes, explain: _____

Do you limp? ☐ Yes ☐ No Did you get a bump on the head? ☐ Yes ☐ No

Were you in an accident today? _____

Have you taken any drugs or smoked marijuana today? _____

What? _____ When? _____

Have you seen a doctor or dentist today? ☐ Yes ☐ No Who? _____

Are you taking any prescription medications? ☐ Yes ☐ No What? _____ When? _____

Do you have: Epilepsy? ☐ Yes ☐ No

Inner ear trouble? ☐ Yes ☐ No

Glass eye? ☐ Yes ☐ No

Ear infection? ☐ Yes ☐ No

False teeth? ☐ Yes ☐ No

Diabetes? ☐ Yes ☐ No

Any problems not correctable by glasses or contact lenses? _____

Do you take insulin? ☐ Yes ☐ No If yes, when was your last injection? _____

Have you ever had a driver's license in any other state? _____

I am now ending this video recording. The time is now approximately 0830 AM/PM PM

The date is OCTOBER, 19, 2018.
(month) (day) (year)



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

REVIEW COMPLETED BY

Booking Number: 2018035089	Date: 10/21/2018
	Specialist Name/ID: AM/31562