

Arrest Report

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

Report Date / Time 8/5/2018 1:59:07AM	Report Number FHP99ARR785767	Case Number/CAD Number FHPL18OFF084872 / LWRC18CAD141517	Reporting Officer Name Z. TODD
Originating Agency ORI FL0509000	Occurrence Date Time Range 8/ 5/2018 1:18:23 AM -	Jurisdiction	Clearance

Location of Occurrence

Location Type PUBLIC PLACE	Location Description ROADWAY		
Street Number SR-807	Street NB SOF 10TH AVE N	Apt/Lot/Bldg	
County PALM BEACH	City PALM SPRINGS	State FL	Zip 33461

Defendant

First Name JOHN	Middle Name ANTHONY	Last Name MUEHLEBACH	Suffix	Date Of Birth 5/5/1974	Age 44	Race WHITE	Sex MALE
SSN	MNI #	Place of Birth MISSOURI, MO, USA	Height 510	Weight 190	Hair BRO	Eyes BLU	
DL or ID Number M412461741650	ID State FL	ID Type B	Address Type				
Street Number 206	Street REX CT	Apt/Lot/Bldg					
County PALM BEACH	City PALM SPRINGS	State FL	Zip 33461	Phone Number	Extension		
Location Description							

Arrest

Arrest Date/Time 8/5/2018 1:29:36AM	Arrest Location Type	Arrest Location Description
Street Number SR-807	Street NB SOF 10TH AVE N	Apt/Lot/Bldg
City PALM SPRINGS	State FL	Zip 33461
County PALM BEACH		

Charge(s)

Counts 1	Charge 316.193.1	General Offense Code	Bond Amount \$ 0.00	<input type="checkbox"/> No Bond
Charge Degree N	Charge Level MISDEMEANOR	Arrest Offense Code Description DUI-UNLAW BLD ALCH		
Charge Description DUI ALCOHOL OR DRUGS				

Probable Cause

On August 5, 2018 I was on routine patrol in my marked patrol car in Palm Beach County. I was traveling northbound on Congress Ave south of 10th Ave North. I observed that there was a blue pickup truck traveling northbound in the left lane. I observed that the vehicle was failing to maintain a single lane and was crossing the lane dividers to the left and right side of the lane. I then activated my emergency lights and sirens to initiate a traffic stop on the vehicle. The vehicle yielded to the left turn lane of the roadway. I then approached the vehicle and observed that there was a white male in the driver's seat. I then identified myself and requested that the driver present a DL, vehicle registration and proof of insurance. I observed the driver fumble over his wallet several times and showed difficulty in getting his DL out of the wallet. He also had difficulty in getting his vehicle registration out of the wallet as well. I observed that the driver had bloodshot glassy eyes, slurred speech and the odor of an unknown alcoholic beverage was emitting from his breath as he talked. The driver was later identified as John Muehlebach by his FL CDL. He stated that he had been coming from Scores nightclub and that he had a beer to drink. I then requested that he step out of the vehicle and walk back towards my patrol car. As he exited the vehicle

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I observed that he had a gate ataxia and that he used the car for balance. I also observed that he had an orbital sway to his body as he stood directly in front of me. While standing directly in front of me I observed that he had bloodshot glassy eyes, slurred speech, orbital sway and the odor of an unknown alcoholic beverage was emitting from his breath as he talked. He stated to me that he had no medical issues and that there were no issues with the vehicle. I then requested that he preform field sobriety exercises and he agreed.

Horizontal Gaze Nystagmus

Before beginning the exercises, I checked to see if Mr. Muehlebach was wearing glasses or contact lenses. It was determined that Mr. Muehlebach was not wearing glasses. I then checked Mr. Muehlebach's eyes and observed equal tracking and equal pupil size. Mr. Muehlebach 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 the stimulus until told not to. Mr. Muehlebach verbally indicated that he understood.

- Lack of smooth pursuit, left eye
- Lack of smooth pursuit, right eye
- A distinct and sustained nystagmus at maximum deviation in the left eye
- A distinct and sustained nystagmus at maximum deviation in the right eye
- An onset of nystagmus prior to 45 degrees in the left eye
- An onset of nystagmus prior to 45 degrees in the right eye

I observed Mr. Muehlebach to have an orbital sway, bloodshot glassy eyes, and the odor of an unknown alcoholic beverage.

Walk and Turn Exercise

The area was level and free of debris. Mr. Muehlebach verbally indicated that he saw the line on the ground. Mr. Muehlebach was instructed to put his left foot on the line, then place his right foot on the line ahead of the left foot in a heel to toe manner. I then demonstrated this position. Mr. Muehlebach was instructed not to begin until told to do so. Mr. Muehlebach verbally indicated that he has understood all instructions up to this point. Mr. Muehlebach was then instructed to take 9 heel to toe steps on the line when told to do so. I then demonstrated this. Mr. Muehlebach was then instructed to turn on the ninth step and to keep the front foot on the line and to take a series of small steps with the foot on the line. I then demonstrated this for Mr. Muehlebach. Mr. Muehlebach was also instructed to keep his arms at his sides and to watch his feet during the exercise. Mr. Muehlebach was also instructed to count aloud and to not stop once he begins the exercise. He was also instructed to keep his arms at his sides at all times.

He took 9 steps forward and 10 steps back. Mr. Muehlebach showed difficulty keeping balance during the instructions and the exercise and used his arms for balance and almost fell. He also had to be told to return back to the instructional position. He completed the turn correctly, and didn't touch heel to toe on multiple steps. He also did not look down at his feet and he had a sway as he walked. He also did not count aloud as instructed and stepped off the line on multiple steps and almost fell while completing the exercise. While walking back he began to drift to the left and walk on the median and almost into opposing lanes of traffic. He also stopped during the exercise and had to be prompted to continue. While he walked down the line he stumbled and almost fell over.

One Leg Stand Exercise

Mr. Muehlebach was instructed to stand with his feet together and to place his arms down at his side. Mr. Muehlebach was instructed to maintain that position until told to do so. Once told to do so, Mr. Muehlebach was instructed to raise one foot approximately 6 inches off the ground and to keep both legs straight with both arms at his side. He was also instructed to look at the elevated foot and count aloud in the manner of one thousand-one, one thousand-two and so on until told to stop. Mr. Muehlebach verbally indicated that he understood the instructions after I demonstrated to him.

Mr. Muehlebach was told to begin and raised his right foot. During the exercise Mr. Muehlebach displayed an orbital sway. Mr. Muehlebach also did not count aloud properly as instructed. Mr. Muehlebach did not look down at his foot during the exercise and put his foot down multiple times. He also stopped the exercise and had to be prompted to continue. He also hopped during the exercise and almost fell over.

He was then placed under arrest for DUI and transported to the county jail. Once I arrived at the county jail I then conducted a 20 minute observation. At no time did he regurgitate or take anything by mouth. I then requested that he

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provide a lawful sample of his breath and he agreed. Implied consent was read per request and he stated that he understood. He then provided a sample of .246 and .242. He was then booked into the 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 Number (561) 888-4400
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 561-274-1630	Court Appearance Date / Time 8/27/2018 830AM	Court Fine
Comments			

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 Z. TODD	Officer Rank TROOPER	Officer ID No 4141	Sworn and subscribed before me, the undersigned authority This the <u>5</u> day of <u>August</u> <u>2018</u> DEPUTY OF THE COURT, NOTARY OR LAW ENFORCEMENT OFFICER
Officer Agency FLORIDA HIGHWAY PATROL			
Officer Signature			

Approving Supervisor

Officer Name	Officer Rank	Officer ID No	Officer Agency
Officer Signature			

NOT A CERTIFIED COPY

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: 80-006478 Software: 8100.27
Date of Test: 08/05/2018

Date of Last Agency Inspection: 07/13/2018
Observation Period Began: 02:20
Subject's Name: JOHN A MUEHLEBACH

DOB: 05/05/1974 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	02:45
	Air Blank	0.000	02:45
	Control Test	0.080	02:46
	Air Blank	0.000	02:46
	Subject Sample #1	0.246	02:47
	Air Blank	0.000	02:48
	Air Blank	0.000	02:49
	Subject Sample #2	0.242	02:51
	Air Blank	0.000	02:52
	Control Test	0.080	02:52
	Air Blank	0.000	02:53
	Diagnostics Check	OK	02:53

Cylinder Lot: 05218080A3
Exp: 05/05/2020

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 SAMANTHA M PALMER, 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: _____ Date: 08/05/18
Signature

Sworn to (or affirmed) before me this 5 day of August, 2018

Signature of Notary Public-State of Florida _____ Printed Name of Notary Public-State of Florida Trooper Todd #4141

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.



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

PBSO CASE # 18-105458 PBSO ZONE 1-31
AGENCY CASE # FHP18OFF064872 CRASH CASE # N/A
TIME OF STOP/CRASH 0118 DATE 8/5/18 DAY SAT SUN
SUBJECT'S NAME JOHN MUEHLEBACH RACE W SEX M
HGT 5'10 WGT 140 DOB 05 / 05 / 1974
LOCATION NB CONGRESS / 10th AVE
ARRESTING OFFICER'S NAME & ID TODD4141 AGENCY FHP L
DIVISION: DUI NOTIFIED BY COMMO Y
ARRIVAL AT FACILITY 0220
BREATH RESULTS: ARREST TIME 0129
1. .246
2. .242
3. N/A
4. N/A
TESTING OFFICER'S ID 24520 PBSO VIDEOTAPE # N/A

NOT A CERTIFIED COPY

TESTING FACILITY TASK REPORT

AGENCY: FHP/TODD

SUBJECT: MUEHLEBACH, JOHN

CASE NUMBER: 18-105458

DATE: Aug 5, 2018

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 0242

ENDING TIME: 0255

BREATH TESTS RESULTS: 1) .246 TIME 0247 A.M. P.M. 2) .242 TIME 0251 A.M. P.M.
3) XX TIME XX A.M. P.M. 4) XX TIME XX A.M. P.M.

BREATH OPERATOR: S. PALMER #24520

MAINTENANCE TECHNICIAN: J Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: MUMBLED

ATTITUDE: CALM, QUIET, UPSET

CLOTHING: BLUE POLO SHIRT, WHITE SHORTS, BLUE SNEAKERS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

EYES GLASSY AND BLOODSHOT, ODOR OF UNKNOWN ALCOHOLIC BEVERAGE COMING FROM BREATH

COMMENTS:

ARRESTING OFFICER CONDUCTED THE 20 MINUTE OBSERVATION BEGINNING AT 0220
SUBJECT AGREED TO TAKE BREATH TEST
A/O READ I/C
SUBJECT AGAIN AGREED TO TAKE BREATH TEST
SUBJECT PROVIDED TWO ADEQUATE SAMPLES SUCCESSFULLY
TECH READ TEST RESULTS
SUBJECT STATED HE UNDERSTOOD RESULTS
A/O READ RIGHTS
SUBJECT STATED HE UNDERSTOOD RIGHTS
A/O DID NOT CONDUCT Q&A

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 Trooper Todd #4141 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 Camera

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 Camera

SUBJECT: Muehldach, John CASE NUMBER: THPL180FF064012

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? _____

WHERE WERE YOU GOING? _____

WHAT STREET OR HIGHWAY WERE YOU ON? _____

DIRECTION OF TRAVEL? _____ WHERE DID YOU START? _____

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

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

WHAT COUNTY AND CITY ARE YOU IN NOW? _____

WHEN DID YOU LAST EAT? _____ WHAT DID YOU EAT? _____

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

HOW MUCH DO YOU WEIGH? _____ HAVE YOU BEEN DRINKING? _____ WHAT? _____

HOW MUCH? _____ WHERE? _____ WITH WHOM? _____

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? _____ ARE YOU UNDER THE INFLUENCE? _____

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

WHAT? _____ WHERE? _____ WHEN? _____

WHAT LINE OF WORK ARE YOU IN? _____ WHEN DID YOU LAST WORK? _____

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? _____ WHAT? _____

ARE YOU SICK OR INJURED? _____ WHAT'S WRONG? _____

DO YOU LIMP? _____ DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? _____

WERE YOU IN AN ACCIDENT TODAY? _____

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? _____ WHEN? _____

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? _____ WHO? _____ WHY? _____

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? _____ WHAT? _____ WHEN? _____

DO YOU HAVE:

EPILEPSY?	_____
GLASS EYE?	_____
FALSE TEETH?	_____
EAR INFECTION?	_____
INNER EAR TROUBLE?	_____
DIABETES?	_____

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

DO YOU TAKE INSULIN? _____ IF SO, WHEN WAS YOUR LAST INJECTION? _____

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

INTERVIEWER: Trooper Todd #4141

WHITE - STATE ATTY. YELLOW - DHSMV PINK - CENTRAL RECORDS GOLD - JAIL



Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	<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.	
Public Info. Exemptions	<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.	
Florida Rules of Judicial Administration 2.420 (Rule of 23)	<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"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2018025975	Date: 08/05/2018
	Specialist Name/ID: howardt/7185