[redacted]

Arrest Report

0143823 18C1/6205 1359

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

Report Date / Time	Report Number	Case Number/CAD Number	Reporting Officer Name
9/10/2018 10:03:08PM	FHP99ARR790528		MCWHERTER, P.

Originating Agency ORI	Occurrence Date Time Range	Jurisdiction	Clearance
FL0509000	9/10/2018 11:29:26 PM -		

Location of Occurrence

Location Type	Location Description
PUBLIC PLACE	SR9/ DONALD ROSS ROAD

Street Number	Street	Apt/Lot/Bldg

County	City	State	Zip
PALM BEACH	PALM BEACH GARDENS	FL	33418

Defendant

First Name	Middle Name	Last Name	Suffix	Date Of Birth	Age	Race	Sex
WALLACE	SCOTT	SLAYMAKER		1/5/1971		WHITE	MALE

[redacted]	Place of Birth	Height	Weight	Hair	Eyes
	WEST PALM BEACH, FL, USA	601	230	BRO	BLU

DL or ID Number	ID State	ID Type	Address Type
S452897710050	FL	E	RESIDENCE

Street Number	Street	Apt/Lot/Bldg
1092	KEYSTONE DR APT C	

County	City	State	Zip	Phone Number	Extension
PALM BEACH	JUPITER	FL	33458		

Location Description:

Arrest

Arrest Date/Time	Arrest Location Type	Arrest Location Description
9/10/2018 8:57:00PM	PUBLIC PLACE	SR9 / DONALD ROSS ROAD EXIT RAMP

Street Number	Street	Apt/Lot/Bldg	County
	SR 9 / DONALD ROSS ROAD		PALM BEACH

City	State	Zip
PALM BEACH GARDENS	FL	33418

Counts	Charge	General Offense Code	Bond Amount	No Bond
1	316.193.1		$ 0.00	☐

Charge Degree	Charge Level	Arrest Offense Code Description
N	MISDEMEANOR	DUI-UNLAW BLD ALCH

Charge Description: DUI ALCOHOL OR DRUGS

SCANNED SEP 13 2018

OR

Probable Cause

On 09/10/2018 at approximately 8:39pm I observed a vehicle traveling southbound on the Interstate 95 northbound entrance ramp in the grass from Intertate 95. I initiated my emergency lights and sirens to conduct a traffic stop where the driver stopped on the grass. I asked the driver for his license, registration, and proof of insurance. The driver was able to give me his license, but not his insurance or his registration. I asked Mr. Wallace Scott Slaymaker, verified by his Florida driver's license and NCIC/FCIC, if he had been drinking and he had stated that he had 3 beers. I could smell alcohol coming from Mr. Slaymaker's breath. I observed Mr. Slaymaker's glazed, watery, and bloodshot eyes. I could hear slurring in Mr. Slaymaker's voice. I called for back-up in order to have another trooper watch for traffic as I performed Standardized Field Sobriety Exercises. When my back-up arrived I asked Mr. Slaymaker if he would like to perform Field Sobriety Exercises, as I believed him to be intoxicated. Mr. Slaymaker stated that he would peform the field sobriety exercises. I patted Mr. Slaymaker down and placed him in the rear seat to transport him to a flat surface in order to perform

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SEP 11 AM12:22

the exercises.

I examined Mr. Slaymaker's eyes where I saw nystagmus prior to 45 degrees, lack of smooth pursuit and nystagmus at maximum deviation. I did not observe any vertical gaze nystagmus.

After examining Mr. Slaymaker's eyes I explained and demonstrated the walk-and-turn exercise. Mr. Slaymaker stated he understood the instructions and then was asked to perform the exercises. Mr. Slaymaker used his arms for balance, missed heel-to-toe steps, did not take a series of small steps to turn around, and almost fell while performing the exercises.

After the walk-and-turn exercise I explained and demonstrated the One-leg Stand. During the One-l eg Stand I observed Mr. Slaymaker fail to raise his foot to approximately 6 inches off the ground. I also observed Mr. Slaymaker place his foot down, stop counting, lose balance, and use his arms for balance.

After the exercises were performed I asked Mr. Slaymaker if there were any medical problems that he had I needed to know about, to which he stated "I have gout".

At 8:57pm I placed Mr. Wallace Scott Slaymaker under arrest for Driving Under the Influence of alcohol. Mr. Slaymaker's vehicle was towed from the scene. Mr. Slaymaker was transported to Palm Beach County Jail BAT. Mr. Slaymaker was read his Miranda Warning on camera in my patrol car before entering the BAT where I asked him if he had anything to drink and he stated 3 beers and where he was coming from to which he responded "work". At the BAT Mr. Slaymaker was asked to provide a sample of his breath to determine his level of impairment. Mr. Slaymaker agreed to provide the samples requested of him. Mr. Slaymaker's first valid breath sample was .087. Mr. Slaymakers second valid sample was .103.

Mr. Wallace Scott Slaymaker was charged under Florida State Statute 316.193(1) Driving Under the Influence.

Jail Booking Facility

Booking Date/Time	Booking County	Booking Facility	Booking Facility Phone Number
9/10/2018 11:26:12PM	PALM BEACH	PALM BEACH COUNTY CORRECTIONS	(561) 688-4400

Booking Facility Location	Booking Number
3228 GUN CLUB ROAD WEST PALM BEACH, FLORIDA 33406	

Booking Comments

Court

Court County	Court Location
PALM BEACH	200 WEST ATLANTIC AVE. DELRAY BEACH, FL 33444

Court	Court Phone	Court Appearance Date / Time	Court Fine
PALM BEACH SOUTH COUNTY COURTHOUSE	561-274-1530	10/15/18 8:30AM	

Comments

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SCANNED 12

Report Date / Time	Report Number	Case Number/CAD Number	Reporting Officer Name
9/10/2018 10:03:08PM	FHP99ARR790528		MCWHERTER, P.

Originating Agency ORI	Occurrence Date Time Range	Jurisdiction	Clearance
FL0509000	9/10/2018 11:29:26 PM -		

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	Officer Rank	Officer ID No
MCWHERTER, P.	TROOPER	4188

Officer Agency
FLORIDA HIGHWAY PATROL

Officer Signature [redacted]

Sworn and subscribed before me, the undersigned authority
This the 10th day of September 2018
DEPUTY OF THE COURT, NOTARY OR LAW ENFORCEMENT OFFICER

BEVERLY SUE OWEN
MY COMMISSION # GG 189278
EXPIRES: May 30, 2022
Bonded Thru Notary Public Underwriters

Approving Supervisor

Officer Name	Officer Rank	Officer ID No	Officer Agency

Officer Signature

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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: 80-006240 Software: 8100.27
Date of Test: 09/10/2018

Date of Last Agency Inspection: 09/07/2018
Observation Period Began: 21:53
Subject's Name: WALLACE S SLAYMAKER DOB: 01/05/1971 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	22:18
Air Blank	0.000	22:18
Control Test	0.081	22:18
Air Blank	0.000	22:19
Subject Sample #1	0.087	22:21
Air Blank	0.000	22:21
Air Blank	0.000	22:23
Subject Sample #2	0.103	22:24
Air Blank	0.000	22:25
Control Test	0.080	22:25
Air Blank	0.000	22:25
Diagnostics Check	OK	22:26

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 SUE OWEN, 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: 9/10/18
Signature

Sworn to (or affirmed) before me this 10th day of September 2018

_____ tpr P. McWherter
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.

FDLE/ATP FORM 38 - MARCH 2004, Ref. 11D-8.007

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SUBJECT: Slaymaker, Wallace Scott CASE NUMBER: FHPL180FF075995

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? I-95

DIRECTION OF TRAVEL? S WHERE DID YOU START? BLUE HERON BLVD

WHAT TIME DID YOU START? 7:00pm WHAT TIME IS IT NOW? 10:30

WHAT IS TODAY'S DATE? 04/10/18 WHAT DAY OF THE WEEK IS IT? MONDAY

WHAT COUNTY AND CITY ARE YOU IN NOW? PALM BEACH COUNTY, CITY of GUN CLUB, W/BB

WHEN DID YOU LAST EAT? LUNCH NOON WHAT DID YOU EAT? RIBS

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? SITTING IN 'YOUR' CAR

HOW MUCH DO YOU WEIGH? 230 HAVE YOU BEEN DRINKING? Yes WHAT? BEER (TALLBOYS 3)

HOW MUCH? 3 WHERE? PARKING LOT WITH WHOM? GUYS 'I' WORK WITH

WHEN DID YOU HAVE YOUR FIRST DRINK? 7:15 pm AND YOUR LAST DRINK? 8:30 PM

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? OUT OF THE CAN

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? SHEET METAL WHEN DID YOU LAST WORK? TODAY

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

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

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

WERE YOU IN AN ACCIDENT TODAY? NO

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? NO 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?	NO
GLASS EYE?	~~NOT~~ NO
FALSE TEETH?	NO
EAR INFECTION?	NO
INNER EAR TROUBLE?	HUH
DIABETES?	NO

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

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

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? NO WHERE? _____

INTERVIEWER: P. McWHERTER

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TESTING FACILITY TASK REPORT

AGENCY: FHP-2

SUBJECT: Slaymaker, Wallace Scott CASE NUMBER: 18-119110

DATE: 9/10/18 ~~VIDEO TAPE NUMBER~~ N/A

BEGINNING TIME: 2215 ENDING TIME: 2235

BREATH TESTS RESULTS: 1) .087 TIME 2221 ~~A.M.~~/(P.M.) 2) .103 TIME 2224 ~~A.M.~~/(P.M.)

3) ~~_____~~ TIME ~~_____~~ A.M./P.M. 4) ~~_____~~ TIME ~~_____~~ A.M./P.M.

BREATH OPERATOR: S. Owen #3184

MAINTENANCE TECHNICIAN: J. Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH:

ATTITUDE: co-operative, joked a lot

CLOTHING: Tennis shoes, jeans, green shirt

MEDICAL CONDITIONS: allergic to effernefren, gout

MEDICATIONS: none

OTHER: odor of unknown Alcholic beverage
47 y/o A

COMMENTS: A/O & S arrived at 2153 hrs
A/O observed 20 minutes, tech observed 10 minutes
A/O requested breath test, S agreed
No problem with test, tech explained results A/O read/saw scene and video, S understood rights
Agreed To QEA S admitted drinking beer (3) Couldn't feel effects.

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SUBJECT: SLAymaker, Wallace Scott CASE NUMBER: FHPL180FF 075995

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 _____ of the _____.

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)_____

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 Scene & Video

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Operation of image [illegible] Consent to any activity not required by law.

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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:	

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REVIEW COMPLETED BY

Booking Number: 2018030434	**Date:** 9/11/2018
	Specialist Name/ID: L.Rouse/ #6673