



Alcohol Testing Program

INSTRUMENT PROCESSING SHEET

Agency Orange County SO S/N 80-001255
Date In 9/30/16 Date Out 10/6/16 Ship P/U H/D CMI EE

Intake Performed By <u>DL</u> <input type="checkbox"/> Registration <input checked="" type="checkbox"/> Annual <input checked="" type="checkbox"/> Return from CMI <input type="checkbox"/> Return from Enforcement Electronics <input type="checkbox"/> Other _____ Visual Inspection: <u>OK</u> Case <u>OK</u> Handle <u>OK</u> Dry Gas Holder <u>OK</u> Feet <u>OK</u> Keyboard/Plug <u>OK</u> Back/Plugs <u>OK</u> Screws tight <u>OK</u> Breath Hose Other Equipment: <input type="checkbox"/> Power cord <input type="checkbox"/> Printer Cable <input checked="" type="checkbox"/> Other <u>Static Bag</u> Notes: _____ _____ _____	Quality Checks Performed By <u>DL</u> <input checked="" type="checkbox"/> Breath Tube Screen <input checked="" type="checkbox"/> Replace O-Rings <input checked="" type="checkbox"/> Instrument Set Up Verified <input checked="" type="checkbox"/> R-Value <u>196</u> <input checked="" type="checkbox"/> Flow Verification (L/s) Flow Column # <u>A7P102</u> 32mm <u>152</u> (.139 - .169) 36mm <u>177</u> (.156 - .190) 53mm <u>243</u> (.228 - .278) 103mm <u>506</u> (.447 - .547) <input checked="" type="checkbox"/> Barometric Pressure Check Gauge ID # <u>28427</u> <input checked="" type="checkbox"/> Stability Checks <table border="1"> <thead> <tr> <th>Simulator</th> <th>Serial #</th> <th>Lot #/Exp</th> </tr> </thead> <tbody> <tr> <td>0.05</td> <td>SD1018</td> <td>201507A 7/14/17</td> </tr> <tr> <td>0.08</td> <td>SD1011</td> <td>201601F 1/26/18</td> </tr> <tr> <td>0.20</td> <td>SD1025</td> <td>201604C 4/5/18</td> </tr> <tr> <td>0.08 DGS</td> <td>N/A</td> <td>AG-619605 7/14/18</td> </tr> </tbody> </table>	Simulator	Serial #	Lot #/Exp	0.05	SD1018	201507A 7/14/17	0.08	SD1011	201601F 1/26/18	0.20	SD1025	201604C 4/5/18	0.08 DGS	N/A	AG-619605 7/14/18	Flow Calibration Performed By _____ <input checked="" type="checkbox"/> Flow Calibration N/A <input type="checkbox"/> Flow Calibration Complete Flow Column # _____ <input type="checkbox"/> 5L/min - 17mm <input type="checkbox"/> 15L/min - 53mm <input type="checkbox"/> 30L/min - 103mm <input type="checkbox"/> R-Value _____ <input type="checkbox"/> Post Calibration Verification (L/s) Flow Column # _____ 32mm _____ (.139 - .169) 36mm _____ (.156 - .190) 53mm _____ (.228 - .278) 103mm _____ (.447 - .547)
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		Maintenance Performed By _____ <input type="checkbox"/> Battery Replacement <input type="checkbox"/> Dry Gas Regulator Replacement <input type="checkbox"/> Breath Tube Replacement <input type="checkbox"/> Other _____ Suggested Service _____ _____															

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OCT 06 2016
FDLE
Alcohol Testing Program

Optical Bench Calibration Performed By _____ <input checked="" type="checkbox"/> Optical Bench Calibration N/A <input type="checkbox"/> Optical Bench Calibration Complete Barometric Pressure Gauge ID # _____ <table border="1"> <thead> <tr> <th>Simulator</th> <th>Serial Number</th> <th>Lot Number</th> <th>Expiration</th> </tr> </thead> <tbody> <tr> <td>0.000</td> <td></td> <td>N/A</td> <td>N/A</td> </tr> <tr> <td>0.040</td> <td></td> <td></td> <td></td> </tr> <tr> <td>0.100</td> <td></td> <td></td> <td></td> </tr> <tr> <td>0.200</td> <td></td> <td></td> <td></td> </tr> <tr> <td>0.400</td> <td></td> <td></td> <td></td> </tr> <tr> <td>0.080 DGS</td> <td>N/A</td> <td></td> <td></td> </tr> </tbody> </table> <input type="checkbox"/> Post Calibration Stability Checks <table border="1"> <thead> <tr> <th>Simulator</th> <th>Serial Number</th> <th>Lot Number</th> <th>Expiration</th> </tr> </thead> <tbody> <tr> <td>0.05</td> <td></td> <td></td> <td></td> </tr> <tr> <td>0.08</td> <td></td> <td></td> <td></td> </tr> <tr> <td>0.20</td> <td></td> <td></td> <td></td> </tr> <tr> <td>0.08 DGS</td> <td>N/A</td> <td></td> <td></td> </tr> </tbody> </table>	Simulator	Serial Number	Lot Number	Expiration	0.000		N/A	N/A	0.040				0.100				0.200				0.400				0.080 DGS	N/A			Simulator	Serial Number	Lot Number	Expiration	0.05				0.08				0.20				0.08 DGS	N/A		
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Department Inspection Performed By _____ <input checked="" type="checkbox"/> Barometric Pressure <u>1015</u> Gauge ID# <u>28427</u> <u>1013</u> Instrument Mouth Alcohol Solution Lot # <u>2016-A</u> Acetone Stock Solution Lot # <u>2016-B</u> <table border="1"> <thead> <tr> <th>Simulator</th> <th>Serial Number</th> </tr> </thead> <tbody> <tr> <td>0.00</td> <td>SD1019</td> </tr> <tr> <td>Interferent</td> <td>SD1021</td> </tr> <tr> <td>0.05</td> <td>SD 1018</td> </tr> <tr> <td>0.08</td> <td>SD 1011</td> </tr> <tr> <td>0.20</td> <td>SD 1025</td> </tr> </tbody> </table>	Simulator	Serial Number	0.00	SD1019	Interferent	SD1021	0.05	SD 1018	0.08	SD 1011	0.20	SD 1025
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Attachments <input checked="" type="checkbox"/> Form 41 <input checked="" type="checkbox"/> Pre-Stability Tests <input type="checkbox"/> Flow Calibration <input type="checkbox"/> Optical Bench Cal <input type="checkbox"/> Post-Stability Tests <input type="checkbox"/> Other _____
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Notes: QC: SP

<input checked="" type="checkbox"/> Instrument Complies with Chapter 11D-8, FAC <input type="checkbox"/> Instrument Does Not Comply with Chapter 11D-8, FAC <input checked="" type="checkbox"/> Return to/Place into Evidentiary Use <input type="checkbox"/> Remain Out of Evidentiary Use <input checked="" type="checkbox"/> Conduct an Agency Inspection Before Evidentiary Use

A. Brett Hubbard
Quality Control Review

10/6/16
Date

80-001255
 Stability Act)
 10/6/16

INTOXILYZER 8000
 Instrument Initialization
 07:20 10/06/2016

ORANGE COUNTY S.O.
 Intoxilyzer - Alcohol Analyzer
 Model 8000 SN 80-001255
 10/06/2016
 Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	08:01
Control Test	0.048	08:02
Air Blank	0.000	08:03
Control Test	0.048	08:03
Air Blank	0.000	08:04
Control Test	0.048	08:05
Air Blank	0.000	08:05
Control Test Stats		
Average	0.0480	
Std Dev	0.0000	
Rel Std Dev(%)	0.0000	

Operator's Signature

ORANGE COUNTY S.O.
 Intoxilyzer - Alcohol Analyzer
 Model 8000 SN 80-001255
 10/06/2016
 Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	07:53
Control Test	0.078	07:53
Air Blank	0.000	07:54
Control Test	0.078	07:54
Air Blank	0.000	07:55
Control Test	0.078	07:55
Air Blank	0.000	07:55
Control Test Stats		
Average	0.0780	
Std Dev	0.0000	
Rel Std Dev(%)	0.0000	

DGS

Operator's Signature

ORANGE COUNTY S.O.
 Intoxilyzer - Alcohol Analyzer
 Model 8000 SN 80-001255
 10/06/2016
 Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	08:06
Control Test	0.078	08:06
Air Blank	0.000	08:07
Control Test	0.079	08:07
Air Blank	0.000	08:08
Control Test	0.078	08:08
Air Blank	0.000	08:08
Control Test Stats		
Average	0.0783	
Std Dev	0.0006	
Rel Std Dev(%)	0.7370	

Operator's Signature

ORANGE COUNTY S.O.
 Intoxilyzer - Alcohol Analyzer
 Model 8000 SN 80-001255
 10/06/2016
 Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	08:15
Control Test	0.197	08:16
Air Blank	0.000	08:17
Control Test	0.196	08:17
Air Blank	0.000	08:18
Control Test	0.197	08:19
Air Blank	0.000	08:19
Control Test Stats		
Average	0.1967	
Std Dev	0.0016	
Rel Std Dev(%)	0.2936	

Operator's Signature