



INSTRUMENT PROCESSING SHEET
 Agency Charlotte ^{MT} Charlotte County SO

S/N 80-001363

Florida Department of Law Enforcement

Date In 03/11/2020 DI Completion Date 03/19/2020

Ship P/U H/D CMI EE

Intake Performed By <u>MLG</u> <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Registration <input checked="" type="checkbox"/> Return from CMI / EE Visual Inspection: <input checked="" type="checkbox"/> Case <input checked="" type="checkbox"/> Handle <input checked="" type="checkbox"/> Keyboard <input checked="" type="checkbox"/> Dry Gas Shelf <input checked="" type="checkbox"/> Feet <input checked="" type="checkbox"/> Breath Tube <input checked="" type="checkbox"/> Ports <input checked="" type="checkbox"/> Screws Tight Other Equipment/ Accessories: <input type="checkbox"/> Power cord <input type="checkbox"/> Printer Cable <input checked="" type="checkbox"/> Static Bag <input type="checkbox"/> 12V DC Cable Notes: _____ _____ _____	Quality Checks Performed By <u>MLX</u> <input checked="" type="checkbox"/> Breath Tube Screen <input checked="" type="checkbox"/> Replace External O-Rings <input checked="" type="checkbox"/> Instrument Set Up Verified <input checked="" type="checkbox"/> R-Value <u>134</u> <input checked="" type="checkbox"/> Flow Verification (L/s) Flow Column # <u>ATP 101</u> 32 mm <u>0.164</u> (.139 - .169) 36 mm <u>0.171</u> (.156 - .190) 53 mm <u>0.238</u> (.228 - .278) 103 mm <u>0.500</u> (.447 - .547) <input checked="" type="checkbox"/> Barometric Pressure Check Gauge ID # <u>68639</u> <input checked="" type="checkbox"/> Stability Checks	Flow Calibration Performed By _____ 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 # _____ 32 mm _____ (.139 - .169) 36 mm _____ (.156 - .190) 53 mm _____ (.228 - .278) 103 mm _____ (.447 - .547)
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Final Release Date <u>FDLE</u> <p align="center">APR 09 2020</p> <p align="center">Alcohol Testing Program</p>	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Simulator</th> <th>Serial #</th> <th>Lot #/Exp</th> </tr> </thead> <tbody> <tr> <td>0.050</td> <td>MP4863</td> <td>201905A 05/14/2021</td> </tr> <tr> <td>0.080</td> <td>MP4864</td> <td>201905B 05/14/2021</td> </tr> <tr> <td>0.200</td> <td>SD1017</td> <td>201904D 04/30/2021</td> </tr> <tr> <td>0.080 DGS</td> <td>N/A</td> <td>AG916501 06/14/2021</td> </tr> </tbody> </table>	Simulator	Serial #	Lot #/Exp	0.050	MP4863	201905A 05/14/2021	0.080	MP4864	201905B 05/14/2021	0.200	SD1017	201904D 04/30/2021	0.080 DGS	N/A	AG916501 06/14/2021	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 _____ Temperature Checks Performed By <u>MLX</u> <input checked="" type="checkbox"/> Lab Temp °C <u>22.81</u> External Digital Therm. ID#: <u>300504</u> <input checked="" type="checkbox"/> 34°C +/- .2 Serial #: <u>MP4863</u> <input checked="" type="checkbox"/> 34°C +/- .2 Serial #: <u>MP4864</u> <input checked="" type="checkbox"/> 34°C +/- .2 Serial #: <u>SD1017</u>
Simulator	Serial #	Lot #/Exp															
0.050	MP4863	201905A 05/14/2021															
0.080	MP4864	201905B 05/14/2021															
0.200	SD1017	201904D 04/30/2021															
0.080 DGS	N/A	AG916501 06/14/2021															

Calibration Adjustment Performed By _____			
Barometric Pressure Gauge _____ ID # _____			
Simulator	Serial Number	Lot Number	Expiration
0.000		N/A	N/A
0.040			
0.100			
0.200			
0.300			
0.080 DGS	N/A		
<input type="checkbox"/> Post Calibration Adjustment Stability Checks			
Simulator	Serial Number	Lot Number	Expiration
0.050			
0.080			
0.200			
0.080 DGS	N/A		

Department Inspection Performed By <u>MLX</u>	
Barometric Pressure ID# <u>28199</u>	
Gauge <u>1024</u>	Instrument <u>1024</u>
Mouth Alcohol Solution Lot # <u>2019-B</u>	
Acetone Stock Solution Lot # <u>2019-A</u>	
Simulator	Serial Number
0.000	SD1014
Interferent	SD1015
0.050	MP4863
0.080	MP4864
0.200	SD1017
Attachments	
<input checked="" type="checkbox"/> Form 41	<input type="checkbox"/> Post-Stability Checks
<input checked="" type="checkbox"/> Stability Checks	<input type="checkbox"/> Flow Calibration
<input checked="" type="checkbox"/> Calibration Certificate	<input type="checkbox"/> Form 40
<input type="checkbox"/> Calibration Adjustment	<input type="checkbox"/> Other _____

Notes/Suggested Service: Emailed

APPROVED 03/26/2020

Instrument Complies with Chapter 11D-8, FAC

Instrument Does Not Comply with Chapter 11D-8, FAC

Return to/Place into Evidentiary Use

Remain Out of Evidentiary Use

Conduct an Agency Inspection Before Evidentiary Use

SP 4/3/20 Brett Kiehlund 4/6/2020

Tech Review / Date _____ Admin Review / Date _____

Florida Department of Law Enforcement Alcohol Testing Program

DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: CHARLOTTE COUNTY SO
Time of Inspection: 12:16

Date of Inspection: 03/19/2020

Serial Number: 80-001363
Software: 8100.27

Check or Test	YES	NO	Check or Test	YES	NO
Diagnostic Check (Pre-Inspection): OK	Yes		Date and/or Time Adjusted		No
Minimum Sample Volume Check: OK	Yes		Barometric Pressure Sensor Check: OK	Yes	
Alcohol Free Subject Test: 0.000	Yes		Mouth Alcohol Test: Slope Not Met	Yes	
Interferent Detect Test: Interferent Detect	Yes		Diagnostic Check (Post-Inspection): OK	Yes	

Alcohol Free Test (g/210L)	0.05g/210L Test (g/210L) Lot#:201905A Exp: 05/14/2021	0.08g/210L Test (g/210L) Lot#:201905B Exp: 05/14/2021	0.20g/210L Test (g/210L) Lot#:201904D Exp: 04/30/2021	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:AG931603 Exp: 11/12/2021
0.000	0.051	0.080	0.199	0.080
0.000	0.050	0.080	0.201	0.080
0.000	0.049	0.080	0.200	0.080
0.000	0.049	0.080	0.200	0.080
0.000	0.050	0.080	0.200	0.080
0.000	0.050	0.080	0.200	0.080
0.000	0.050	0.080	0.201	0.080
0.000	0.050	0.080	0.200	0.080
0.000	0.050	0.080	0.200	0.080
0.000	0.050	0.080	0.200	0.080
0.000	0.050	0.080	0.200	0.080

Standard Deviations	0.0005	0.0000	0.0005	0.0000
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Average Standard Deviation of 0.05, 0.08 and 0.20 g/210L Tests: 0.0002 Number of Simulators Used: 5

Remarks:

The above instrument complies () does not comply () with Chapter 11D-8, FAC.

I certify that I performed this inspection in accordance with the provisions of Chapter 11D-8, FAC.



MICHAEL D HAUGHEY

Signature and Printed Name

03/19/2020
Date

*SP BK
4/6/2020*

TYPE OF TEST	SERIAL NUMBER	AGENCY	DATE	PERFORMED BY
Stabilities	80-001363	Charlotte County SO	03/19/2020	MLK

0.05g/210L	0.047 to 0.053	0.08g/210L	0.077 to 0.083	0.20g/210L	0.194 to 0.206	DGS 0.08g/210L	0.077 to 0.083
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CHARLOTTE COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-001363
03/19/2020
Software: 8100.27

Test g/210L Time

Air Blank 0.000 08:41
Control Test 0.050 08:42
Air Blank 0.000 08:42
Control Test 0.049 08:43
Air Blank 0.000 08:44
Control Test 0.050 08:44
Air Blank 0.000 08:45
Control Test Stats
Average 0.0497
Std Dev 0.0006
Rel Std Dev(?) 1.1625

CHARLOTTE COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-001363
03/19/2020
Software: 8100.27

Test g/210L Time

Air Blank 0.000 08:48
Control Test 0.081 08:49
Air Blank 0.000 08:49
Control Test 0.080 08:49
Air Blank 0.000 08:50
Control Test 0.079 08:50
Air Blank 0.000 08:51
Control Test Stats
Average 0.0800
Std Dev 0.0010
Rel Std Dev(?) 1.2500

CHARLOTTE COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-001363
03/19/2020
Software: 8100.27

Test g/210L Time

Air Blank 0.000 08:57
Control Test 0.202 08:57
Air Blank 0.000 08:58
Control Test 0.200 08:58
Air Blank 0.000 08:59
Control Test 0.199 08:59
Air Blank 0.000 09:00
Control Test Stats
Average 0.2003
Std Dev 0.0015
Rel Std Dev(?) 0.7625

CHARLOTTE COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-001363
03/19/2020
Software: 8100.27

Test g/210L Time

Air Blank 0.000 09:04
Control Test 0.079 09:04
Air Blank 0.000 09:05
Control Test 0.080 09:05
Air Blank 0.000 09:05
Control Test 0.080 09:05
Air Blank 0.000 09:06
Control Test Stats
Average 0.0797
Std Dev 0.0006
Rel Std Dev(?) 0.7247

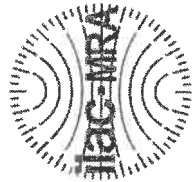
MLK
Operator's Signature

MLK
Operator's Signature

MLK
Operator's Signature

MLK
Operator's Signature

80
BK
4/6/2020



Florida Department of Law Enforcement
Alcohol Testing Program
4700 Terminal Drive, Suite 1
Ft. Myers, FL 33907

Calibration Certificate

This is to certify the calibration of Intoxilyzer 8000 serial number 80-001363, manufactured by CMI, Inc. was calibrated in accordance with FDLE/ATP Form 36 - Department Inspection Procedures - Intoxilyzer 8000.

Serial Number:	<u>80-001363</u>	UNCERTAINTY* ±	
Owning Agency:	<u>CHARLOTTE COUNTY SO</u>	0.050 g/ 210 L	0.004
Calibration Date:	<u>03/19/2020</u>	0.080 g/ 210 L	0.005
Calibration Time:	<u>12:16</u>	0.200 g/ 210 L	0.007
		0.080 g/ 210 L Dry Gas Control	0.005

All results are reported in g/ 210 L.
Bias is limited by calibration acceptance criteria. All calibration results must be within ± 0.005 or 5%, whichever is greater, of the target alcohol concentration.
*Uncertainty is based on fleet-wide data and is expressed to a 99.73% level of confidence (k=3).

TRACEABILITY INFORMATION

This instrument was calibrated using solutions prepared by Alcohol Countermeasure Systems, Inc. (ACS). ACS prepared and certified these CRMs in accordance with ISO 17034 and ISO/ IEC 17025 Standards.

Simulator temperatures are traceable to NIST. Thermometer temperatures are checked with NIST traceable Eutechnics 4400 digital thermometers calibrated by Precision Metrology in accordance with ISO/ IEC 17025 standards.

Dry gas control measurements are traceable to NIST through the uses of CRMs supplied by an accredited CRM supplier. The supplier of dry gas standard controls prepared and certified the CRMs in accordance with ISO Guide 34 and ISO/ IEC 17025 standards.

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SP BK 4/6/2020

03/19/2020

Date

Michael Haughey
MICHAEL D HAUGHEY,
Department Inspector

FDLE/ATP Form 69 January 2020
Issuing Authority: Alcohol Testing Program

Service • Integrity • Respect • Quality

Return Material Authorization

Ship to: CMI, Inc.
 Enforcement Electronics

Shipment to repair facility authorized by: Michael Kern on 10/14/19

Items Returned: Instrument Supplies Other Describe: _____

Instrument Model: Intoxilyzer 8000 Serial Number: 80-001363

Bill To Address:
Charlotte County SO

Ship to Address:
FDLE ATP Tallahassee

Reason for Return:

Performed multiple flow sensor cal adjustments and unable to bring flow sensor values
within range. See attached

Please choose one of the following options:

- 1. I _____, authorize all repairs.
- 2. I _____, authorize repairs up to \$_____.
- 3. I require an estimate **BEFORE** any repairs will be authorized and/ or conducted.

Please contact: Name: Michael Kern

Phone #: _____ Email: mkern@ccsofl.net

ATP Contact Name: Shayla Platt ATP Email: shaylplatt@fdle.state.fl.us



INSTRUMENT PROCESSING SHEET

Agency Charlotte CountyS/N 80-001363

Florida Department of Law Enforcement

Date In 9/30/2019 DI Completion Date _____ Ship P/U H/D CMI EE

Intake Performed By <u>DP</u> <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Registration <input type="checkbox"/> Return from CMI / EE Visual Inspection: <input checked="" type="checkbox"/> Case <input checked="" type="checkbox"/> Handle <input checked="" type="checkbox"/> Keyboard <input checked="" type="checkbox"/> Dry Gas Shelf <input checked="" type="checkbox"/> Feet <input checked="" type="checkbox"/> Breath Tube <input checked="" type="checkbox"/> Ports <input checked="" type="checkbox"/> Screws Tight Other Equipment/ Accessories: <input type="checkbox"/> Power cord <input type="checkbox"/> Printer Cable <input type="checkbox"/> Static Bag <input type="checkbox"/> 12V DC Cable Notes: _____ _____ _____	Quality Checks Performed By <u>SP</u> <input checked="" type="checkbox"/> Breath Tube Screen <input checked="" type="checkbox"/> Replace External O-Rings <input checked="" type="checkbox"/> Instrument Set Up Verified <input checked="" type="checkbox"/> R-Value <u>134</u> <input checked="" type="checkbox"/> Flow Verification (L/s) Flow Column # <u>ATP103</u> 32 mm <u>.136</u> (.139 - .169) 36 mm <u>.148</u> (.156 - .190) 53 mm <u>.218</u> (.228 - .278) 103 mm <u>.496</u> (.447 - .547) <input checked="" type="checkbox"/> Barometric Pressure Check Gauge ID # <u>210932</u> <input checked="" type="checkbox"/> Stability Checks	Flow Calibration Performed By <u>SP</u> Flow Column # <u>ATP105/ATP102</u> <input checked="" type="checkbox"/> 5L/min - 17mm <input checked="" type="checkbox"/> 15L/min - 53mm <input checked="" type="checkbox"/> 30L/min - 103mm <input checked="" type="checkbox"/> R-Value <u>134</u> <input checked="" type="checkbox"/> Post Calibration Verification (L/s) Flow Column # <u>ATP103</u> 32 mm <u>.140 / .125</u> (.139 - .169) 36 mm <u>.160 / .140</u> (.156 - .190) 53 mm <u>.218 / .201</u> (.228 - .278) 103 mm <u>.480 / .500</u> (.447 - .547)																																																											
Final Release Date _____ _____	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Simulator</th> <th>Serial #</th> <th>Lot #/Exp</th> </tr> </thead> <tbody> <tr> <td>0.050</td> <td><u>SD1012</u></td> <td><u>201905A</u> <u>5-14-21</u></td> </tr> <tr> <td>0.080</td> <td><u>DR1279</u></td> <td><u>201905B</u> <u>5-14-21</u></td> </tr> <tr> <td>0.200</td> <td><u>SD1013</u></td> <td><u>201904D</u> <u>4-30-21</u></td> </tr> <tr> <td>0.080 DGS</td> <td><u>N/A</u></td> <td><u>AG916501</u> <u>6-14-21</u></td> </tr> </tbody> </table>	Simulator	Serial #	Lot #/Exp	0.050	<u>SD1012</u>	<u>201905A</u> <u>5-14-21</u>	0.080	<u>DR1279</u>	<u>201905B</u> <u>5-14-21</u>	0.200	<u>SD1013</u>	<u>201904D</u> <u>4-30-21</u>	0.080 DGS	<u>N/A</u>	<u>AG916501</u> <u>6-14-21</u>	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 _____ Temperature Checks Performed By _____ <input type="checkbox"/> Lab Temp °C _____ External Digital Therm. ID#: _____ <input type="checkbox"/> 34°C +/-2 Serial #: _____ <input type="checkbox"/> 34°C +/-2 Serial #: _____ <input type="checkbox"/> 34°C +/-2 Serial #: _____																																												
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Calibration Adjustment Performed By _____ Barometric Pressure Gauge _____ ID # _____ <table border="1" style="width:100%; border-collapse: collapse;"> <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>0.300</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 Adjustment Stability Checks <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Simulator</th> <th>Serial Number</th> <th>Lot Number</th> <th>Expiration</th> </tr> </thead> <tbody> <tr><td>0.050</td><td></td><td></td><td></td></tr> <tr><td>0.080</td><td></td><td></td><td></td></tr> <tr><td>0.200</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>	Simulator	Serial Number	Lot Number	Expiration	0.000		N/A	N/A	0.040				0.100				0.200				0.300				0.080 DGS	N/A			Simulator	Serial Number	Lot Number	Expiration	0.050				0.080				0.200				0.080 DGS	N/A			Department Inspection Performed By _____ Barometric Pressure ID# _____ Gauge _____ Instrument _____ Mouth Alcohol Solution Lot # _____ Acetone Stock Solution Lot # _____ <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Simulator</th> <th>Serial Number</th> </tr> </thead> <tbody> <tr><td>0.000</td><td></td></tr> <tr><td>Interferent</td><td></td></tr> <tr><td>0.050</td><td></td></tr> <tr><td>0.080</td><td></td></tr> <tr><td>0.200</td><td></td></tr> </tbody> </table>	Simulator	Serial Number	0.000		Interferent		0.050		0.080		0.200	
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Tech Review / Date _____		Admin Review / Date _____																																																											

Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: CHARLOTTE COUNTY SO
Time of Inspection: 10:29

Date of Inspection: 10/03/2019

Serial Number: 80-001363
Software: 8100.27

Check or Test	YES	NO
Date and/or Time Adjusted		No
Diagnostic Check (Pre-Inspection): OK		No
Alcohol Free Subject Test: 0.000		No
Mouth Alcohol Test: Slope Not Met		No
Interferent Detect Test: Interferent Detect		No
Diagnostic Check (Post-Inspection): OK		No

Alcohol Free Test (g/210L)	0.05g/210L Test (g/210L) Lot#: _____ Exp: _____	0.08g/210L Test (g/210L) Lot#: _____ Exp: _____	0.20g/210L Test (g/210L) Lot#: _____ Exp: _____	0.08 g/210L Dry Gas Std Test (g/210L) Lot#: _____ Exp: _____

Number of Simulators Used: _____

Remarks:

BYPASSED AI TO OPERATE INSTRUMENT

N/A Compliance
Not Determined.

The above instrument complies () does not comply () with Chapter 11D-8, FAC.

I certify that I hold a valid Florida Department of Law Enforcement Agency Inspector Permit and that I performed this inspection in accordance with the provisions of Chapter 11D-8, FAC.

Shayla Platt

SHAYLA D PLATT

Signature and Printed Name

10/03/2019
Date

CHARLOTTE COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-001363
10/03/2019
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	10:46
Control Test	0.078	10:46
Air Blank	0.000	10:46
Control Test	0.080	10:47
Air Blank	0.000	10:47
Control Test	0.079	10:48
Air Blank	0.000	10:48
Control Test Stats		
Average	0.0790	
Std Dev	0.0010	
Rel Std Dev(%)	1.2658	

SP

Operator's Signature

CHARLOTTE COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-001363
10/03/2019
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	10:40
Control Test	0.200	10:41
Air Blank	0.000	10:41
Control Test	0.199	10:42
Air Blank	0.000	10:43
Control Test	0.200	10:43
Air Blank	0.000	10:44
Control Test Stats		
Average	0.1997	
Std Dev	0.0006	
Rel Std Dev(%)	0.2892	

SP

Operator's Signature

CHARLOTTE COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-001363
10/03/2019
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	10:31
Control Test	0.080	10:31
Air Blank	0.000	10:32
Control Test	0.080	10:32
Air Blank	0.000	10:33
Control Test	0.081	10:34
Air Blank	0.000	10:34
Control Test Stats		
Average	0.0803	
Std Dev	0.0006	
Rel Std Dev(%)	0.7187	

SP

Operator's Signature

CHARLOTTE COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-001363
10/03/2019
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	10:35
Control Test	0.050	10:36
Air Blank	0.000	10:36
Control Test	0.049	10:37
Air Blank	0.000	10:38
Control Test	0.049	10:38
Air Blank	0.000	10:39
Control Test Stats		
Average	0.0493	
Std Dev	0.0006	
Rel Std Dev(%)	1.1703	

SP

Operator's Signature

Flow CAL ADJUSTMENT

80-001363

2

CHARLOTTE COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-001363
10/03/2019
Software: 8100.27

Flow Rate Calibration*****

1: Rate (Liters/min) = 5
SORT(Diff)) = 6.926
2: Rate (Liters/min) = 15
SORT(Diff)) = 11.574
3: Rate (Liters/min) = 30
SORT(Diff)) = 21.328

Dependent Data Scale Factor = 100000 L/min
Independent Data Scale Factor = 256
Rounded Slope = 666
Rounded Intercept = -597449
Correlation = 0.99623

CHARLOTTE COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-001363
10/03/2019
Software: 8100.27

Flow Rate Calibration*****

1: Rate (Liters/min) = 5
SORT(Diff)) = 7.547
2: Rate (Liters/min) = 15
SORT(Diff)) = 11.531
3: Rate (Liters/min) = 30
SORT(Diff)) = 20.855

Dependent Data Scale Factor = 100000 L/min
Independent Data Scale Factor = 256
Rounded Slope = 715
Rounded Intercept = -769952
Correlation = 0.99366