

INSTRUMENT PROCESSING SHEET

Agency FWCC Titusville

S/N 80-0003195

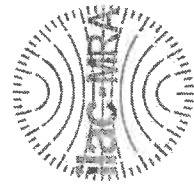
Florida Department of Law Enforcement

Date In 06/05/2020

DI Completion Date 6/10/2020

Ship P/U H/D CMI EE

Intake Performed By <u>RAW</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 type="checkbox"/> Static Bag <input type="checkbox"/> 12V DC Cable Notes: _____ _____ _____		Quality Checks Performed By <u>RA</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>226</u> <input checked="" type="checkbox"/> Flow Verification (L/s) Flow Column # <u>ATP-103</u> 32 mm <u>0.156</u> (.139 - .169) 36 mm <u>0.167</u> (.156 - .190) 53 mm <u>0.238</u> (.228 - .278) 103 mm <u>0.507</u> (.447 - .547) <input checked="" type="checkbox"/> Barometric Pressure Check Gauge ID # <u>28427</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)																																							
Final Release Date FDLE Alcohol Testing Program Digitally signed by FDLE Alcohol Testing Program Date: 2020.06.12 08:33:17 -04'00'		<table border="1"> <thead> <tr> <th>Simulator</th> <th>Serial #</th> <th>Lot #/Exp</th> </tr> </thead> <tbody> <tr> <td>0.050</td> <td><u>MP5088</u></td> <td><u>201905A</u> <u>05-14-2021</u></td> </tr> <tr> <td>0.080</td> <td><u>MP5089</u></td> <td><u>201905B</u> <u>05-14-2021</u></td> </tr> <tr> <td>0.200</td> <td><u>MP5090</u></td> <td><u>201904D</u> <u>04-30-2021</u></td> </tr> <tr> <td>0.080 DGS</td> <td>N/A</td> <td><u>AG931603</u> <u>11-12-2021</u></td> </tr> </tbody> </table>		Simulator	Serial #	Lot #/Exp	0.050	<u>MP5088</u>	<u>201905A</u> <u>05-14-2021</u>	0.080	<u>MP5089</u>	<u>201905B</u> <u>05-14-2021</u>	0.200	<u>MP5090</u>	<u>201904D</u> <u>04-30-2021</u>	0.080 DGS	N/A	<u>AG931603</u> <u>11-12-2021</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 _____																								
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		Temperature Checks Performed By <u>SP</u> <input checked="" type="checkbox"/> Lab Temp °C <u>21.3</u> External Digital Therm. ID#: <u>300502</u> <input checked="" type="checkbox"/> 34°C +-2 Serial #: <u>MP5088</u> <input checked="" type="checkbox"/> 34°C +-2 Serial #: <u>MP5089</u> <input checked="" type="checkbox"/> 34°C +-2 Serial #: <u>MP5090</u>																																									
Calibration Adjustment Performed By _____ Barometric Pressure Gauge _____ ID # _____		Department Inspection Performed By <u>SP</u> Barometric Pressure ID# <u>28421</u> Gauge <u>1016</u> Instrument <u>1014</u> Mouth Alcohol Solution Lot # <u>2019-B</u> Acetone Stock Solution Lot # <u>2019-A</u>																																									
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		Tech Review / Date _____ Admin Review / Date _____																																									



Calibration Certificate

Florida Department of Law Enforcement
Alcohol Testing Program
2729 Fort Knox Blvd.
Bldg. 2, Suite 1300
Tallahassee, FL 32308

ANAB
ANSI National Accreditation Board
ACCREDITED
FORENSIC CALIBRATION
LABORATORY

This is to certify the calibration of Intoxilyzer 8000 serial number 80-003195, manufactured by CMI, Inc. was calibrated in accordance with FDLE/ATP Form 36 - Department Inspection Procedures - Intoxilyzer 8000.

Serial Number:	<u>80-003195</u>	UNCERTAINTY* ±	
Owning Agency:	<u>FWC</u>	0.050 g/ 210 L	0.004
Calibration Date:	<u>06/10/2020</u>	0.080 g/ 210 L	0.005
Calibration Time:	<u>11:58</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).
The instrument results before and after any adjustment are found in the associated pre and post stability checks.

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.
This document shall not be reproduced except in full, without written approval of the Florida Department of Law Enforcement Alcohol Testing Program.

06/10/2020 Date
Shayla Platt
SHAYLA D PLATT,
Department Inspector

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

Service • Integrity • Respect • Quality

Florida Department of Law Enforcement Alcohol Testing Program

DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: FWC

Time of Inspection: 11:58

Date of Inspection: 06/10/2020

Serial Number: 80-003195

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	0.049	0.079	0.197	0.078
0.000	0.049	0.079	0.196	0.078
0.000	0.048	0.079	0.197	0.078
0.000	0.049	0.079	0.196	0.078
0.000	0.050	0.079	0.196	0.078
0.000	0.049	0.079	0.197	0.078
0.000	0.049	0.079	0.197	0.078
0.000	0.049	0.079	0.197	0.078
0.000	0.049	0.080	0.197	0.078
0.000	0.049	0.080	0.197	0.078

Standard Deviations	0.0004	0.0004	0.0004	0.0000
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Average Standard Deviation of 0.05, 0.08 and 0.20 g/210L Tests: 0.0003 Number of Simulators Used: 5

Remarks:

MH
BK 2020.06.12
08:27:46 -04'00"

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.

Shayla Platt

SHAYLA D PLATT

Signature and Printed Name

06/10/2020
Date

Stability Checks

FWC
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-003195
06/08/2020
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	09:05
Control Test	0.050	09:06
Air Blank	0.000	09:07
Control Test	0.050	09:07
Air Blank	0.000	09:08
Control Test	0.049	09:09
Air Blank	0.000	09:09
Control Test Stats		
Average	0.0497	
Std Dev	0.0006	
Rel Std Dev(%)	1.1625	

FWC
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-003195
06/08/2020
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	09:11
Control Test	0.080	09:12
Air Blank	0.000	09:12
Control Test	0.080	09:13
Air Blank	0.000	09:14
Control Test	0.080	09:14
Air Blank	0.000	09:15
Control Test Stats		
Average	0.0800	
Std Dev	0.0000	
Rel Std Dev(%)	0.0000	

FWC
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-003195
06/08/2020
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	09:16
Control Test	0.198	09:17
Air Blank	0.000	09:18
Control Test	0.198	09:18
Air Blank	0.000	09:19
Control Test	0.198	09:19
Air Blank	0.000	09:20
Control Test Stats		
Average	0.1980	
Std Dev	0.0000	
Rel Std Dev(%)	0.0000	

wet



Operator's Signature



Operator's Signature



Operator's Signature

FWC
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-003195
06/08/2020
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	09:23
Control Test	0.079	09:23
Air Blank	0.000	09:24
Control Test	0.079	09:24
Air Blank	0.000	09:25
Control Test	0.079	09:25
Air Blank	0.000	09:25
Control Test Stats		
Average	0.0790	
Std Dev	0.0000	
Rel Std Dev(%)	0.0000	

MA

BK

2020.06.12
08:28:08
-0400'

Dry



Operator's Signature

Return Material Authorization

Ship to: CMI, Inc.
 Enforcement Electronics

Shipment to repair facility authorized by: Michael Rice on 2/11/20

Items Returned: Instrument Supplies Other Describe: _____

Instrument Model: Intoxilyzer 8000 Serial Number: 80-003195

Bill To Address:
FFWCC

Ship to Address:
FDLE-Tallahassee

Reason for Return:

Flow Sensor Replacement - R value @99

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 Rice

Phone #: 352-786-2529 Email: Michael.Rice@MyFWC.com

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

MK
BK
2020.06.12
08:28:33
-04'00"



INSTRUMENT PROCESSING SHEET

Agency FWC

s/N 80-03195

Florida Department of Law Enforcement

Date In 02/10/2020 DI Completion Date

Ship P/U H/D CMI XEE

Intake Performed By RAW

Annual
 Registration
 Return from CMI / EE

Visual Inspection:
 Case Handle
 Keyboard Dry Gas Shelf
 Feet Breath Tube
 Ports Screws Tight

Other Equipment/ Accessories:
 Power cord Printer Cable
 Static Bag 12V DC Cable

Notes: _____

Quality Checks Performed By JS

Breath Tube Screen
 Replace External O-Rings
 Instrument Set Up Verified
 R-Value 99
 Flow Verification (L/s)

Flow Column # _____
 32 mm _____ (.139 - .169)
 36 mm _____ (.156 - .190)
 53 mm _____ (.228 - .278)
 103 mm _____ (.447 - .547)

Barometric Pressure Check
 Gauge ID # 26932
 Stability Checks

Simulator	Serial #	Lot #/Exp
0.050		
0.080		
0.200		
0.080 DGS	N/A	

Flow Calibration Performed By _____

Flow Column # _____
 5L/min - 17mm
 15L/min - 53mm
 30L/min - 103mm

R-Value _____
 Post Calibration Verification (L/s)

Flow Column # _____
 32 mm _____ (.139 - .169)
 36 mm _____ (.156 - .190)
 53 mm _____ (.228 - .278)
 103 mm _____ (.447 - .547)

Maintenance Performed By _____

Battery Replacement
 Dry Gas Regulator Replacement
 Breath Tube Replacement
 Other _____

Temperature Checks Performed By _____

Lab Temp °C _____
 External Digital Therm. ID#: _____
 34°C +- .2 Serial #: _____
 34°C +- .2 Serial #: _____
 34°C +- .2 Serial #: _____

Final Release Date

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		

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 _____

Barometric Pressure ID# _____
 Gauge _____ Instrument _____
 Mouth Alcohol Solution Lot # _____
 Acetone Stock Solution Lot # _____

Simulator	Serial Number
0.000	
Interferent	
0.050	
0.080	
0.200	

Attachments

Form 41 Post-Stability Checks
 Stability Checks Flow Calibration
 Calibration Certificate Form 40
 Calibration Adjustment Other _____

Notes/Suggested Service: _____

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

Tech Review / Date _____ Admin Review / Date _____

MK BK 2020.06.12 08:28:53 -0400