

FLORIDA DEPARTMENT OF LAW ENFORCEMENT
ALCOHOL TESTING PROGRAM
BREATH ALCOHOL TEST AFFIDAVIT

Instrument Type: Intoxilyzer 8000
Instrument Registered To: POLK COUNTY SO
Instrument Serial Number: 80-001080 Software: 8100.27
Date of Test: 02/01/2025

Date of Last Agency Inspection: 01/14/2025
Observation Period Began: 20:52
Subject's Name: CHRISTOPHER J GAFFNEY

DOB: 12/25/1994 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	21:42
	Air Blank	0.000	21:42
	Control Test	0.079	21:43
	Air Blank	0.000	21:43
	Subject Sample #1	NSP*	21:46
	Air Blank	0.000	21:47
	Air Blank	ABT**	21:49
	Air Blank	0.000	21:49

*No Sample Provided
**Sequence Aborted

*Been Advised That when Conducting
Breath Sample intake port and Chimney are
not working properly, Please check standard
breath Test To Verify Tubes and Proper*

Cylinder Lot: 24923080A3
Exp: 10/05/2025

Samples are working accordingly

State of Florida, County of _____,

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 EDSON CHAVEZ, 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: _____
Signature

Sworn to (or affirmed) before me this _____ day of _____, _____

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.

**FLORIDA DEPARTMENT OF LAW ENFORCEMENT
ALCOHOL TESTING PROGRAM
BREATH ALCOHOL TEST AFFIDAVIT**

Instrument Type: Intoxilyzer 8000
Instrument Registered To: POLK COUNTY SO
Instrument Serial Number: 80-001080 Software: 8100.27
Date of Test: 02/03/2025

Date of Last Agency Inspection: 01/14/2025
Observation Period Began: 15:00
Subject's Name: KEVIN T COLE

DOB: 02/07/1980 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	15:42
	Air Blank	0.000	15:43
	Control Test	0.081	15:43
	Air Blank	0.000	15:43
	Subject Sample #1	0.000	15:44
	Air Blank	0.000	15:44
	Air Blank	0.000	15:46
	Subject Sample #2	0.000	15:46
	Air Blank	0.000	15:47
	Control Test	0.079	15:47
	Air Blank	0.000	15:48
	Diagnostics Check	OK	15:48

Cylinder Lot: 24923080A3
Exp: 10/05/2025

State of Florida, County of _____,

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 KEVIN T COLE, 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: _____
Signature

Sworn to (or affirmed) before me this _____ day of _____, _____

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.