

**Florida Department of Law Enforcement
Alcohol Testing Program**

80-001346
WOB

Subject Test Electronic Data

CMI, Inc. Intoxilyzer 8000 Serial Number: 80-001346

INSTRUMENT REGISTERED TO: SARASOTA COUNTY SO
SOFTWARE VERSION: 8100.27
BREATH TEST OPERATOR: PERNA, TODD, A
BREATH TEST OPERATOR AGENCY: Sarasota PD
ARRESTING OFFICER: PERNA, TODD
ARRESTING OFFICER AGENCY: Sarasota PD
LAST AGENCY INSPECTION: 07/12/2010

Date or Time Changed: No
DRY GAS STANDARD LOT #: 670754
DRY GAS EXPIRY DATE: 09/22/2011
VIOLATION CODE: DUI
ARREST TIME: 20:17
GENDER: Female
OBSERVATION PERIOD BEGAN: 20:17

SUBJECT'S LAST NAME: TUTEN

DATE/TIME OF TEST: 07/18/2010 21:04:30

Diagnostics Check	OK	20:49	
Air Blank	0.000	20:49	
Control Test	0.082	20:50	
Air Blank	0.000	20:50	
Subject Sample #1	0.289	20:51	
Breath Volume	1.613	20:51	
Air Blank	0.000	20:52	
Air Blank	0.000	20:54	
Subject Sample #2	0.262	20:57	Volume Not Met
Breath Volume	0.343	20:57	
Air Blank	0.000	20:58	
Air Blank	0.000	20:59	
Subject Sample #3	0.243	21:02	Volume Not Met
Breath Volume	0.046	21:02	
Air Blank	0.000	21:03	
Control Test	0.080	21:03	
Air Blank	0.000	21:04	
Diagnostics Check	OK	21:04	

subject provided
all 3 of these
samples.
see additional
notes on test
taken at 21:20:03
WOB

Data Download Date/Time 08/19/2010 14:27

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

20-001346
WOB

Instrument Type: Intoxilyzer 8000
Instrument Registered To: SARASOTA COUNTY SO
Instrument Serial Number: 80-001346 Software: 8100.27
Date of Test: 07/18/2010

Date of Last Agency Inspection: 07/12/2010
Observation Period Began: 20:17
Subject's Name: AMY R TUTEN

DOB: 05/06/1968 Sex: F

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	20:49
	Air Blank	0.000	20:49
	Control Test	0.082	20:50
	Air Blank	0.000	20:50
	Subject Sample #1	0.289	20:51
	Air Blank	0.000	20:52
	Air Blank	0.000	20:54
	Subject Sample #2	VNM*	20:57
	Air Blank	0.000	20:58
	Air Blank	0.000	20:59
	Subject Sample #3	VNM*	21:02
	Air Blank	0.000	21:03
	Control Test	0.080	21:03
	Air Blank	0.000	21:04
	Diagnostics Check	OK	21:04

*Volume Not Met

Cylinder Lot: 670754
Exp: 09/22/2011

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 TODD A FERNA, 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.

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Subject Test Electronic Data

CMI, Inc. Intoxilyzer 8000 Serial Number: 80-001346

INSTRUMENT REGISTERED TO: SARASOTA COUNTY SO
SOFTWARE VERSION: 8100.27
BREATH TEST OPERATOR: PERNA, TODD, A
BREATH TEST OPERATOR AGENCY: Sarasota PD
ARRESTING OFFICER: PERNA, TODD
ARRESTING OFFICER AGENCY: Sarasota PD
LAST AGENCY INSPECTION: 07/12/2010

Date or Time Changed: No
DRY GAS STANDARD LOT #: 670754
DRY GAS EXPIRY DATE: 09/22/2011
VIOLATION CODE: DUI
ARREST TIME: 20:17
GENDER: Female
OBSERVATION PERIOD BEGAN: 20:17

SUBJECT'S LAST NAME: TUTEN

DATE/TIME OF TEST: 07/18/2010 21:20:03

Diagnostics Check	OK	21:06
Air Blank	0.000	21:06
Control Test	0.077	21:07
Air Blank	0.000	21:07
Subject Sample #1	0.223	21:10
Breath Volume	0.000	21:10
Air Blank	0.000	21:11
Air Blank	0.000	21:13
Subject Sample #2	0.000	21:13
Breath Volume	3.136	21:13
Air Blank	0.000	21:13
Air Blank	0.000	21:15
Subject Sample #3	0.000	21:18
Breath Volume	1.703	21:18
Air Blank	0.000	21:19
Control Test	0.080	21:19
Air Blank	0.000	21:19
Diagnostics Check	OK	21:20

Volume Not Met - subject - Tuten provided sample #1.

BTD - Todd Perna provided samples #2 + #3. (test operator)

See additional

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notes on test taken at 21:29:13

WOB
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80-001346
LDB

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

Instrument Type: Intoxilyzer 8000
Instrument Registered To: SARASOTA COUNTY SO
Instrument Serial Number: 80-001346 Software: 8100.27
Date of Test: 07/18/2010

Date of Last Agency Inspection: 07/12/2010
Observation Period Began: 20:17
Subject's Name: AMY R TUTEN DOB: 05/06/1968 Sex: F

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	21:06
	Air Blank	0.000	21:06
	Control Test	0.077	21:07
	Air Blank	0.000	21:07
	Subject Sample #1	VNM*	21:10
	Air Blank	0.000	21:11
	Air Blank	0.000	21:13
	Subject Sample #2	0.000	21:13
	Air Blank	0.000	21:13
	Air Blank	0.000	21:15
	Subject Sample #3	0.000	21:18
	Air Blank	0.000	21:19
	Control Test	0.080	21:19
	Air Blank	0.000	21:19
	Diagnostics Check	OK	21:20
	*Volume Not Met		

Cylinder Lot: 670754
Exp: 09/22/2011

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 TODD A FERNA, 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.

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INSTRUMENT REGISTERED TO: SARASOTA COUNTY SO
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BREATH TEST OPERATOR: PERNA, TODD, A
BREATH TEST OPERATOR AGENCY: Sarasota PD
ARRESTING OFFICER: PERNA, TODD
ARRESTING OFFICER AGENCY: Sarasota PD
LAST AGENCY INSPECTION: 07/12/2010

Date or Time Changed: No
DRY GAS STANDARD LOT #: 670754
DRY GAS EXPIRY DATE: 09/22/2011
VIOLATION CODE: DUI
ARREST TIME: 20:17
GENDER: Female
OBSERVATION PERIOD BEGAN: 20:17

SUBJECT'S LAST NAME: TUTEN

DATE/TIME OF TEST: 07/18/2010 21:29:13

Diagnostics Check	OK	21:21
Air Blank	0.000	21:22
Control Test	0.081	21:22
Air Blank	0.000	21:22
Subject Sample #1	0.274	21:24
Breath Volume	2.925	21:24
Air Blank	0.000	21:24
Air Blank	0.000	21:26
Subject Sample #2	0.274	21:27
Breath Volume	1.746	21:27
Air Blank	0.000	21:28
Control Test	0.079	21:28
Air Blank	0.000	21:29
Diagnostics Check	OK	21:29

Subject - Tuten
provided both
breath samples
(#1 + #2)

WB

Data Download Date/Time 08/19/2010 14:27

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

80-001346
WB

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Instrument Registered To: SARASOTA COUNTY SO
Instrument Serial Number: 80-001346 Software: 8100.27
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Observation Period Began: 20:17
Subject's Name: AMY R TUTEN

DOB: 05/06/9168 Sex: F

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	21:21
	Air Blank	0.000	21:22
	Control Test	0.081	21:22
	Air Blank	0.000	21:22
	Subject Sample #1	0.274	21:24
	Air Blank	0.000	21:24
	Air Blank	0.000	21:26
	Subject Sample #2	0.274	21:27
	Air Blank	0.000	21:28
	Control Test	0.079	21:28
	Air Blank	0.000	21:29
	Diagnostics Check	OK	21:29

Cylinder Lot: 670754
Exp: 09/22/2011

State of Florida, County of _____,

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I TODD A PERNA, 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.

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