

INSTRUMENT PROCESSING SHEET

Agency Monroe County Sheriff's Office

S/N 80-001254

Date In 8/7/2017

Date Out 8/7/2017

Ship P/U H/D CMI EE

<p>Intake Performed By <u>David Reyes</u></p> <p><input type="checkbox"/> Registration <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Return from CMI <input type="checkbox"/> Return from Enforcement Electronics <input type="checkbox"/> Other _____</p> <p>Visual Inspection:</p> <table style="width:100%;"> <tr> <td><input checked="" type="checkbox"/> Case</td> <td><input checked="" type="checkbox"/> Handle</td> </tr> <tr> <td><input checked="" type="checkbox"/> Dry Gas Holder</td> <td><input checked="" type="checkbox"/> Feet</td> </tr> <tr> <td><input checked="" type="checkbox"/> Keyboard/Plug</td> <td><input checked="" type="checkbox"/> Back/Plugs</td> </tr> <tr> <td><input checked="" type="checkbox"/> Screws tight</td> <td><input checked="" type="checkbox"/> Breath Hose</td> </tr> </table> <p>Other Equipment:</p> <p><input checked="" type="checkbox"/> Power cord <input type="checkbox"/> Printer Cable <input checked="" type="checkbox"/> Other <u>Anti Static Bag</u></p> <p>Notes: _____</p>	<input checked="" type="checkbox"/> Case	<input checked="" type="checkbox"/> Handle	<input checked="" type="checkbox"/> Dry Gas Holder	<input checked="" type="checkbox"/> Feet	<input checked="" type="checkbox"/> Keyboard/Plug	<input checked="" type="checkbox"/> Back/Plugs	<input checked="" type="checkbox"/> Screws tight	<input checked="" type="checkbox"/> Breath Hose	<p>Quality Checks Performed By <u>David Reyes</u></p> <p><input checked="" type="checkbox"/> Lab Temp °C <u>21.65</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>206</u> <input checked="" type="checkbox"/> Flow Verification (L/s) Flow Column # <u>ATP101</u> 32mm <u>.160</u> (.139 - .169) 36mm <u>.179</u> (.156 - .190) 53mm <u>.250</u> (.228 - .278) 103mm <u>.535</u> (.447 - .547)</p> <p><input checked="" type="checkbox"/> Barometric Pressure Check Gauge ID # <u>28663</u></p> <p><input checked="" type="checkbox"/> Stability Checks</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>0.05</td> <td>SD3967</td> <td>201603D 03/08/2018</td> </tr> <tr> <td>0.08</td> <td>SD3968</td> <td>201611B 11/15/2018</td> </tr> <tr> <td>0.20</td> <td>SD3969</td> <td>201604C 04/05/2018</td> </tr> <tr> <td>0.08 DGS</td> <td>N/A</td> <td>AG626604 09/22/2018</td> </tr> </tbody> </table>	Simulator	Serial #	Lot #/Exp	0.05	SD3967	201603D 03/08/2018	0.08	SD3968	201611B 11/15/2018	0.20	SD3969	201604C 04/05/2018	0.08 DGS	N/A	AG626604 09/22/2018	<p>Flow Calibration Performed By _____</p> <p><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</p> <p><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)</p> <p>Maintenance Performed By _____</p> <p><input type="checkbox"/> Battery Replacement <input type="checkbox"/> Dry Gas Regulator Replacement <input type="checkbox"/> Breath Tube Replacement <input type="checkbox"/> Other _____</p> <p>Quality Checks Cont. Performed By _____</p> <p>Simulator Temperatures °C</p> <p>External Digital Therm. ID#: <u>300918</u> <input checked="" type="checkbox"/> 34°C +- .2 Serial #: <u>SD3967</u> <input checked="" type="checkbox"/> 34°C +- .2 Serial #: <u>SD3968</u> <input checked="" type="checkbox"/> 34°C +- .2 Serial #: <u>SD3969</u></p>
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RECEIVED
AUG 16 2017
FDLE
Alcohol Testing Program

<p>Calibration Adjustment Performed By _____</p> <p><input checked="" type="checkbox"/> Calibration Adjustment N/A <input type="checkbox"/> Calibration Adjustment Complete</p> <p>Barometric Pressure Gauge ID # _____</p> <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> <p><input type="checkbox"/> Post Calibration Adjustment Stability Checks</p> <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>0.05</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				0.300				0.080 DGS	N/A			Simulator	Serial Number	Lot Number	Expiration	0.05				0.08				0.20				0.08 DGS	N/A			<p>Department Inspection Performed By <u>David Reyes</u></p> <p><input checked="" type="checkbox"/> Barometric Pressure <u>1017</u> Gauge ID# <u>28663</u> <u>1015</u> Instrument</p> <p>Mouth Alcohol Solution Lot # <u>2016-A</u> Acetone Stock Solution Lot # <u>2016-B</u></p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Simulator</th> <th>Serial Number</th> </tr> </thead> <tbody> <tr> <td>0.00</td> <td>SD3965</td> </tr> <tr> <td>Interferent</td> <td>SD3966</td> </tr> <tr> <td>0.05</td> <td>SD3967</td> </tr> <tr> <td>0.08</td> <td>SD3968</td> </tr> <tr> <td>0.20</td> <td>SD3969</td> </tr> </tbody> </table> <p>Attachments</p> <table style="width:100%;"> <tr> <td><input checked="" type="checkbox"/> Form 41</td> <td><input type="checkbox"/> Calibration Adjustment</td> </tr> <tr> <td><input checked="" type="checkbox"/> Pre-Stability Tests</td> <td><input type="checkbox"/> Post-Stability Tests</td> </tr> <tr> <td><input type="checkbox"/> Flow Calibration</td> <td><input type="checkbox"/> Other _____</td> </tr> </table>	Simulator	Serial Number	0.00	SD3965	Interferent	SD3966	0.05	SD3967	0.08	SD3968	0.20	SD3969	<input checked="" type="checkbox"/> Form 41	<input type="checkbox"/> Calibration Adjustment	<input checked="" type="checkbox"/> Pre-Stability Tests	<input type="checkbox"/> Post-Stability Tests	<input type="checkbox"/> Flow Calibration	<input type="checkbox"/> Other _____
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Notes/Suggested Service: None APPROVED

E-Mailed: 8/7/2017

DA/PC OK GPM 8/16/2017

zj Dehan 8/16/17

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

Quality Control Review

Date

TYPE OF TEST	SERIAL NUMBER	AGENCY	DATE	PERFORMED BY
Stabilities	80-001254	Monroe County Sheriff's Office	8/7/2017	<i>[Signature]</i>

0.05g/210L	0.08g/210L	0.20g/210L	DGS 0.08g/210L																																																																																																																																																
SN: SD3967 Temp: 34.05 0.047 to 0.053 <input checked="" type="checkbox"/>	SN: SD3968 Temp: 34.09c 0.077 to 0.083 <input checked="" type="checkbox"/>	SN: SD3969 Temp: 34.06c 0.194 to 0.206 <input checked="" type="checkbox"/>	Lot AG626604 0.077 to 0.083 <input checked="" type="checkbox"/>																																																																																																																																																
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Date Out 8/7/2017

Ship P/U H/D CMI EE

<p>Intake Performed By <u>David Reyes</u></p> <p><input type="checkbox"/> Registration <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Return from CMI <input type="checkbox"/> Return from Enforcement Electronics <input type="checkbox"/> Other _____</p> <p>Visual Inspection:</p> <table style="width:100%;"> <tr> <td><input checked="" type="checkbox"/> Case</td> <td><input checked="" type="checkbox"/> Handle</td> </tr> <tr> <td><input checked="" type="checkbox"/> Dry Gas Holder</td> <td><input checked="" type="checkbox"/> Feet</td> </tr> <tr> <td><input checked="" type="checkbox"/> Keyboard/Plug</td> <td><input checked="" type="checkbox"/> Back/Plugs</td> </tr> <tr> <td><input checked="" type="checkbox"/> Screws tight</td> <td><input checked="" type="checkbox"/> Breath Hose</td> </tr> </table> <p>Other Equipment:</p> <p><input checked="" type="checkbox"/> Power cord <input type="checkbox"/> Printer Cable <input checked="" type="checkbox"/> Other <u>Anti Static Bag</u></p> <p>Notes: _____</p>	<input checked="" type="checkbox"/> Case	<input checked="" type="checkbox"/> Handle	<input checked="" type="checkbox"/> Dry Gas Holder	<input checked="" type="checkbox"/> Feet	<input checked="" type="checkbox"/> Keyboard/Plug	<input checked="" type="checkbox"/> Back/Plugs	<input checked="" type="checkbox"/> Screws tight	<input checked="" type="checkbox"/> Breath Hose	<p>Quality Checks Performed By <u>David Reyes</u></p> <p><input checked="" type="checkbox"/> Lab Temp °C <u>21.65</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>206</u> <input checked="" type="checkbox"/> Flow Verification (L/s) Flow Column # <u>ATP101</u> 32mm <u>.160</u> (.139 - .169) 36mm <u>.179</u> (.156 - .190) 53mm <u>.250</u> (.228 - .278) 103mm <u>.535</u> (.447 - .547)</p> <p><input checked="" type="checkbox"/> Barometric Pressure Check Gauge ID # <u>28663</u></p> <p><input checked="" type="checkbox"/> Stability Checks</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>0.05</td> <td>SD3967</td> <td>201603D 03/08/2018</td> </tr> <tr> <td>0.08</td> <td>SD3968</td> <td>201611B 11/15/2018</td> </tr> <tr> <td>0.20</td> <td>SD3969</td> <td>201604C 04/05/2018</td> </tr> <tr> <td>0.08 DGS</td> <td>N/A</td> <td>AG626604 09/22/2018</td> </tr> </tbody> </table>	Simulator	Serial #	Lot #/Exp	0.05	SD3967	201603D 03/08/2018	0.08	SD3968	201611B 11/15/2018	0.20	SD3969	201604C 04/05/2018	0.08 DGS	N/A	AG626604 09/22/2018	<p>Flow Calibration Performed By _____</p> <p><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</p> <p><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)</p> <p>Maintenance Performed By _____</p> <p><input type="checkbox"/> Battery Replacement <input type="checkbox"/> Dry Gas Regulator Replacement <input type="checkbox"/> Breath Tube Replacement <input type="checkbox"/> Other _____</p> <p>Quality Checks Cont. Performed By _____</p> <p>Simulator Temperatures °C</p> <p>External Digital Therm. ID#: <u>300918</u> <input checked="" type="checkbox"/> 34°C +- .2 Serial #: <u>SD3967</u> <input checked="" type="checkbox"/> 34°C +- .2 Serial #: <u>SD3968</u> <input checked="" type="checkbox"/> 34°C +- .2 Serial #: <u>SD3969</u></p>
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0.08 DGS	N/A	AG626604 09/22/2018																							

RECEIVED
AUG 16 2017
FDLE
Alcohol Testing Program

<p>Calibration Adjustment Performed By _____</p> <p><input checked="" type="checkbox"/> Calibration Adjustment N/A <input type="checkbox"/> Calibration Adjustment Complete</p> <p>Barometric Pressure Gauge ID # _____</p> <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> <p><input type="checkbox"/> Post Calibration Adjustment Stability Checks</p> <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>0.05</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				0.300				0.080 DGS	N/A			Simulator	Serial Number	Lot Number	Expiration	0.05				0.08				0.20				0.08 DGS	N/A			<p>Department Inspection Performed By <u>David Reyes</u></p> <p><input checked="" type="checkbox"/> Barometric Pressure <u>1017</u> Gauge ID# <u>28663</u> <u>1015</u> Instrument</p> <p>Mouth Alcohol Solution Lot # <u>2016-A</u> Acetone Stock Solution Lot # <u>2016-B</u></p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Simulator</th> <th>Serial Number</th> </tr> </thead> <tbody> <tr> <td>0.00</td> <td>SD3965</td> </tr> <tr> <td>Interferent</td> <td>SD3966</td> </tr> <tr> <td>0.05</td> <td>SD3967</td> </tr> <tr> <td>0.08</td> <td>SD3968</td> </tr> <tr> <td>0.20</td> <td>SD3969</td> </tr> </tbody> </table> <p>Attachments</p> <table style="width:100%;"> <tr> <td><input checked="" type="checkbox"/> Form 41</td> <td><input type="checkbox"/> Calibration Adjustment</td> </tr> <tr> <td><input checked="" type="checkbox"/> Pre-Stability Tests</td> <td><input type="checkbox"/> Post-Stability Tests</td> </tr> <tr> <td><input type="checkbox"/> Flow Calibration</td> <td><input type="checkbox"/> Other _____</td> </tr> </table>	Simulator	Serial Number	0.00	SD3965	Interferent	SD3966	0.05	SD3967	0.08	SD3968	0.20	SD3969	<input checked="" type="checkbox"/> Form 41	<input type="checkbox"/> Calibration Adjustment	<input checked="" type="checkbox"/> Pre-Stability Tests	<input type="checkbox"/> Post-Stability Tests	<input type="checkbox"/> Flow Calibration	<input type="checkbox"/> Other _____
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Notes/Suggested Service: None APPROVED

E-Mailed: 8/7/2017

DA/PC OK GPM 8/16/2017

zj Dehan 8/16/17

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

Quality Control Review

Date

TYPE OF TEST	SERIAL NUMBER	AGENCY	DATE	PERFORMED BY
Stabilities	80-001254	Monroe County Sheriff's Office	8/7/2017	<i>[Signature]</i>

0.05g/210L	0.08g/210L	0.20g/210L	DGS 0.08g/210L																																																																																																																																																
SN: SD3967 Temp: 34.05 0.047 to 0.053 <input checked="" type="checkbox"/>	SN: SD3968 Temp: 34.09c 0.077 to 0.083 <input checked="" type="checkbox"/>	SN: SD3969 Temp: 34.06c 0.194 to 0.206 <input checked="" type="checkbox"/>	Lot AG626604 0.077 to 0.083 <input checked="" type="checkbox"/>																																																																																																																																																
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8/16/17
[Signature]

[Handwritten mark]

INSTRUMENT PROCESSING SHEET

Agency MONROE County Sheriff's Office S/N 80-001254
 Date In 01/25/2017 Date Out 01/25/2017 Ship P/U H/D CMI EE

RECEIVED
 FEB 10 2017
 FDLE
 Alcohol Testing Program

Intake Performed By DEAR

Registration
 Annual
 Return from CMI
 Return from Enforcement
 Electronics
 Other BATTERY Replacement

Visual Inspection:
OK Case OK Handle
OK Dry Gas Holder OK Feet
OK Keyboard/Plug OK Back/Plugs
OK Screws tight OK Breath Hose

Other Equipment:
 Power cord
 Printer Cable
 Other _____

Notes: _____

Quality Checks Performed By DEAR

Breath Tube Screen
 Replace O-Rings
 Instrument Set Up Verified
 R-Value 205
 Flow Verification (L/s)
 Flow Column # ATD 101
 32mm 164 (.139 - .169)
 36mm 179 (.156 - .190)
 53mm 250 (.228 - .278)
 103mm 530 (.447 - .547)

Barometric Pressure Check
 Gauge ID # 28663

Stability Checks

Simulator	Serial #	Lot #/Exp
0.05	<u>503967</u>	<u>201603D</u> <u>03/08/2018</u>
0.08	<u>503968</u>	<u>201601F</u> <u>01/26/2018</u>
0.20	<u>503969</u>	<u>201604C</u> <u>04/05/2018</u>
0.08 DGS	N/A	<u>A6605301</u> <u>02/22/2018</u>

Flow Calibration Performed By _____

Flow Calibration N/A
 Flow Calibration Complete
 Flow Column # _____
 5L/min - 17mm
 15L/min - 53mm
 30L/min - 103mm

R-Value _____
 Post Calibration Verification (L/s)
 Flow Column # _____
 32mm _____ (.139 - .169)
 36mm _____ (.156 - .190)
 53mm _____ (.228 - .278)
 103mm _____ (.447 - .547)

Maintenance Performed By DEAR

Battery Replacement
 Dry Gas Regulator Replacement
 Breath Tube Replacement
 Other _____

Suggested Service

Optical Bench Calibration Performed By _____

Optical Bench Calibration N/A
 Optical Bench Calibration Complete

Barometric Pressure Gauge ID # _____

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		

Post Calibration Stability Checks

Simulator	Serial Number	Lot Number	Expiration
0.05			
0.08			
0.20			
0.08 DGS	N/A		

Department Inspection Performed By DEAR

Barometric Pressure 1016 Gauge
 ID# 68639 1015 Instrument

Mouth Alcohol Solution Lot # 2016 A
 Acetone Stock Solution Lot # 2016 B

Simulator	Serial Number
0.00	<u>503965</u>
Interferent	<u>503966</u>
0.05	<u>503967</u>
0.08	<u>503968</u>
0.20	<u>503969</u>

Attachments

Form 41
 Pre-Stability Tests
 Flow Calibration
 Optical Bench Cal
 Post-Stability Tests
 Other FORM 40

Notes: **E-MAILED** **APPROVED**
01/25/2017
DA/AC OK QSM 2/8/2017

Brett Haveland
 Quality Control Review

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

2/10/17
 Date

TYPE OF TEST	SERIAL NUMBER	AGENCY	DATE	PERFORMED BY
Stabilities	80-001254	Monroe County Sheriff's Office	01/25/2017	<i>AW</i>

0.05g/210L <input checked="" type="checkbox"/>	0.077 to 0.083 <input checked="" type="checkbox"/>	0.20g/210L <input checked="" type="checkbox"/>	DGS 0.08g/210L <input checked="" type="checkbox"/>
0.047 to 0.053 <input checked="" type="checkbox"/>	0.077 to 0.083 <input checked="" type="checkbox"/>	0.194 to 0.206 <input checked="" type="checkbox"/>	0.077 to 0.083 <input checked="" type="checkbox"/>

MONROE COUNTY S.O.
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-001254
01/25/2017
Software: 8100.27

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Test	g/210L	Time
Air Blank	0.000	09:40
Control Test	0.050	09:40
Air Blank	0.000	09:41
Control Test	0.049	09:42
Air Blank	0.000	09:42
Control Test	0.050	09:43
Air Blank	0.000	09:43
Control Test Stats		
Average	0.0497	
Std Dev	0.0006	
Rel Std Dev(%)	1.1625	

Test	g/210L	Time
Air Blank	0.000	09:45
Control Test	0.080	09:46
Air Blank	0.000	09:47
Control Test	0.079	09:47
Air Blank	0.000	09:48
Control Test	0.079	09:49
Air Blank	0.000	09:49
Control Test Stats		
Average	0.0793	
Std Dev	0.0006	
Rel Std Dev(%)	0.7277	

Test	g/210L	Time
Air Blank	0.000	09:50
Control Test	0.198	09:51
Air Blank	0.000	09:52
Control Test	0.197	09:52
Air Blank	0.000	09:53
Control Test	0.197	09:54
Air Blank	0.000	09:54
Control Test Stats		
Average	0.1973	
Std Dev	0.0006	
Rel Std Dev(%)	0.2926	

Test	g/210L	Time
Air Blank	0.000	09:56
Control Test	0.080	09:56
Air Blank	0.000	09:57
Control Test	0.079	09:57
Air Blank	0.000	09:58
Control Test	0.079	09:58
Air Blank	0.000	09:58
Control Test Stats		
Average	0.0793	
Std Dev	0.0006	
Rel Std Dev(%)	0.7277	

AW
Operator's Signature

AW
Operator's Signature

AW
Operator's Signature

AW
Operator's Signature

AW
SK