



INSTRUMENT PROCESSING SHEET

Agency Highlands County

S/N 80-001043

Florida Department of Law Enforcement

Date In 5/21/2019 DI Completion Date 5/22/19 Ship P/U H/D CMI EE

Intake Performed By <u>DP</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 checked="" 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>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>200</u> <input checked="" type="checkbox"/> Flow Verification (L/s) Flow Column # <u>ATP103</u> 32 mm <u>.160</u> (.139 - .169) 36 mm <u>.179</u> (.156 - .190) 53 mm <u>.253</u> (.228 - .278) 103 mm <u>.515</u> (.447 - .547) <input checked="" type="checkbox"/> Barometric Pressure Check Gauge ID # <u>26932</u> <input checked="" type="checkbox"/> Stability Checks <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>201707D</u> <u>7-25-19</u></td> </tr> <tr> <td>0.080</td> <td><u>DR1279</u></td> <td><u>201707E</u> <u>7-25-19</u></td> </tr> <tr> <td>0.200</td> <td><u>SD1013</u></td> <td><u>201707C</u> <u>7-24-19</u></td> </tr> <tr> <td>0.080 DGS</td> <td><u>N/A</u></td> <td><u>AG831804</u> <u>11-14-20</u></td> </tr> </tbody> </table>	Simulator	Serial #	Lot #/Exp	0.050	<u>SD1012</u>	<u>201707D</u> <u>7-25-19</u>	0.080	<u>DR1279</u>	<u>201707E</u> <u>7-25-19</u>	0.200	<u>SD1013</u>	<u>201707C</u> <u>7-24-19</u>	0.080 DGS	<u>N/A</u>	<u>AG831804</u> <u>11-14-20</u>	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) 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>SP</u> <input checked="" type="checkbox"/> Lab Temp °C <u>21.6</u> External Digital Therm. ID#: <u>300502</u> <input checked="" type="checkbox"/> 34°C +/- .2 Serial #: <u>SD1012</u> <input checked="" type="checkbox"/> 34°C +/- .2 Serial #: <u>DR1279</u> <input checked="" type="checkbox"/> 34°C +/- .2 Serial #: <u>SD1013</u>																																	
Simulator	Serial #	Lot #/Exp																																																
0.050	<u>SD1012</u>	<u>201707D</u> <u>7-25-19</u>																																																
0.080	<u>DR1279</u>	<u>201707E</u> <u>7-25-19</u>																																																
0.200	<u>SD1013</u>	<u>201707C</u> <u>7-24-19</u>																																																
0.080 DGS	<u>N/A</u>	<u>AG831804</u> <u>11-14-20</u>																																																
Final Release Date <p style="text-align: center;">FDLE</p> <p style="text-align: center;">MAY 23 2019</p> <p style="text-align: center;">Alcohol Testing Program</p>	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		
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																																																	
Notes/Suggested Service: _____ _____ _____ _____ _____	Department Inspection Performed By <u>SP</u> Barometric Pressure ID# <u>26932</u> Gauge <u>1016</u> Instrument <u>1015</u> Mouth Alcohol Solution Lot # <u>2018-B</u> Acetone Stock Solution Lot # <u>2018-A</u> <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><u>G2408</u></td> </tr> <tr> <td>Interferent</td> <td><u>G2882</u></td> </tr> <tr> <td>0.050</td> <td><u>SD1012</u></td> </tr> <tr> <td>0.080</td> <td><u>DR1279</u></td> </tr> <tr> <td>0.200</td> <td><u>SD1013</u></td> </tr> </tbody> </table> 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 _____ <input checked="" type="checkbox"/> Instrument Complies with Chapter 11D-8, FAC <input type="checkbox"/> Instrument Does Not Comply with Chapter 11D-8, FAC <input checked="" type="checkbox"/> Return to/Place into Evidentiary Use <input type="checkbox"/> Remain Out of Evidentiary Use <input checked="" type="checkbox"/> Conduct an Agency Inspection Before Evidentiary Use <table style="width:100%;"> <tr> <td style="text-align: center;"><u>PPM 5/23/19</u></td> <td style="text-align: center;"><u>J. Drake</u></td> <td style="text-align: center;"><u>5/23/19</u></td> </tr> <tr> <td style="text-align: center;">Tech Review / Date</td> <td style="text-align: center;">Admin Review / Date</td> <td></td> </tr> </table>		Simulator	Serial Number	0.000	<u>G2408</u>	Interferent	<u>G2882</u>	0.050	<u>SD1012</u>	0.080	<u>DR1279</u>	0.200	<u>SD1013</u>	<u>PPM 5/23/19</u>	<u>J. Drake</u>	<u>5/23/19</u>	Tech Review / Date	Admin Review / Date																															
Simulator	Serial Number																																																	
0.000	<u>G2408</u>																																																	
Interferent	<u>G2882</u>																																																	
0.050	<u>SD1012</u>																																																	
0.080	<u>DR1279</u>																																																	
0.200	<u>SD1013</u>																																																	
<u>PPM 5/23/19</u>	<u>J. Drake</u>	<u>5/23/19</u>																																																
Tech Review / Date	Admin Review / Date																																																	

Florida Department of Law Enforcement Alcohol Testing Program

DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: HIGHLANDS COUNTY SO
Time of Inspection: 13:14

Date of Inspection: 05/22/2019

Serial Number: 80-001043
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#:201707D Exp: 07/25/2019	0.08g/210L Test (g/210L) Lot#:201707E Exp: 07/25/2019	0.20g/210L Test (g/210L) Lot#:201707C Exp: 07/24/2019	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:AG831804 Exp: 11/14/2020
0.000	0.048	0.077	0.196	0.078
0.000	0.049	0.078	0.197	0.079
0.000	0.048	0.078	0.197	0.078
0.000	0.049	0.079	0.197	0.078
0.000	0.049	0.078	0.197	0.078
0.000	0.048	0.078	0.197	0.078
0.000	0.048	0.078	0.197	0.078
0.000	0.049	0.078	0.197	0.078
0.000	0.048	0.079	0.198	0.078
0.000	0.048	0.078	0.197	0.079

Standard Deviations	0.0005	0.0005	0.0004	0.0004
---------------------	--------	--------	--------	--------

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

gym

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.

Shayla Platt

SHAYLA D PLATT

Signature and Printed Name

05/22/2019
Date

*5/23/19
SD*

STABILITY Checks #80-001043

HIGHLANDS COUNTY SO
 Intoxilyzer - Alcohol Analyzer
 Model 8000 SN 80-001043
 05/22/2019
 Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	09:27
Control Test	0.048	09:28
Air Blank	0.000	09:28
Control Test	0.048	09:28
Air Blank	0.000	09:29
Control Test	0.048	09:30
Air Blank	0.000	09:31
Control Test Stats		
Average	0.0480	
Std Dev	0.0000	
Rel Std Dev(%)	0.0000	

SP

Operator's Signature

BOEM
 5/23/19
 JD

HIGHLANDS COUNTY SO
 Intoxilyzer - Alcohol Analyzer
 Model 8000 SN 80-001043
 05/22/2019
 Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	09:45
Control Test	0.079	09:46
Air Blank	0.000	09:46
Control Test	0.079	09:47
Air Blank	0.000	09:47
Control Test	0.079	09:48
Air Blank	0.000	09:49
Control Test Stats		
Average	0.0790	
Std Dev	0.0000	
Rel Std Dev(%)	0.0000	

SP

Operator's Signature

HIGHLANDS COUNTY SO
 Intoxilyzer - Alcohol Analyzer
 Model 8000 SN 80-001043
 05/22/2019
 Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	09:40
Control Test	0.197	09:40
Air Blank	0.000	09:41
Control Test	0.196	09:42
Air Blank	0.000	09:42
Control Test	0.197	09:43
Air Blank	0.000	09:43
Control Test Stats		
Average	0.1967	
Std Dev	0.0006	
Rel Std Dev(%)	0.2936	

SP

Operator's Signature

HIGHLANDS COUNTY SO
 Intoxilyzer - Alcohol Analyzer
 Model 8000 SN 80-001043
 05/22/2019
 Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	09:18
Control Test	0.078	09:18
Air Blank	0.000	09:19
Control Test	0.078	09:19
Air Blank	0.000	09:20
Control Test	0.078	09:20
Air Blank	0.000	09:20
Control Test Stats		
Average	0.0780	
Std Dev	0.0000	
Rel Std Dev(%)	0.0000	

DGS

SP

Operator's Signature



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

Calibration Certificate

This is to certify the calibration of Intoxilyzer 8000 serial number 80-001043, manufactured by CMI, Inc. was calibrated in accordance with FDLE/ATP Form 36 - Department Inspection Procedures - Intoxilyzer 8000.

Serial Number:	<u>80-001043</u>	UNCERTAINTY* ±	
Owning Agency:	<u>HIGHLANDS COUNTY SO</u>	0.050 g/ 210 L	0.004
Calibration Date:	<u>05/22/2019</u>	0.080 g/ 210 L	0.004
Calibration Time:	<u>13:14</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.

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

05/22/2019

Date

Shayla Platt

SHAYLA D PLATT,

Department Inspector

FDLE/ATP Form 69 July 2018

Issuing Authority: Alcohol Testing Program

Service • Integrity • Respect • Quality

Boan 5/23/19

Return Material Authorization

Ship to: CMI, Inc.
 Enforcement Electronics

Shipment to repair facility authorized by: Gregory Glasco on 1/24/19

Items Returned: Instrument Supplies Other Describe: _____

Instrument Model: Intoxilyzer 8000 Serial Number: 80-001043

Bill To Address:
Highlands County SO
400 Eucalyptus St
Sebring, FL 33870

Ship to Address:
FDLE- ATP

Reason for Return:
Conducted inspection 1/15/19... instrument compliant. On 1/24/19 instrument has low readings. See attached inspection and stability checks.

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: Gregory Glasco
Phone #: (863) 402-7200 Email: gglasco@highlandssheriff.org
ATP Contact Name: Shayla Platt ATP Email: shaylaplatt@fdle.state.fl.us

Shayla



INSTRUMENT PROCESSING SHEET

Agency Highlands County SOS/N 80-001043

Florida Department of Law Enforcement

Date In 01/24/19

DI Completion Date _____

 Ship P/U H/D CMI EE

Intake Performed By <u>SQC</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 checked="" type="checkbox"/> Power cord <input type="checkbox"/> Printer Cable <input checked="" type="checkbox"/> Static Bag <input type="checkbox"/> 12V DC Cable Notes: <u>see note</u>	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>197</u> <input type="checkbox"/> Flow Verification (L/s) Flow Column # _____ 32 mm _____ (.139 - .169) 36 mm _____ (.156 - .190) 53 mm _____ (.228 - .278) 103 mm _____ (.447 - .547) <input checked="" type="checkbox"/> Barometric Pressure Check Gauge ID # <u>30793</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 <div style="text-align: center; font-size: 1.2em; font-weight: bold;">FDLE</div> <div style="text-align: center; margin-top: 10px;">MAY 23 2019</div> <div style="text-align: center; margin-top: 5px;">Alcohol Testing Program</div>	<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>SD1021</td> <td>201707D 7-25-19</td> </tr> <tr> <td>0.080</td> <td>DR1275</td> <td>201707E 7-25-19</td> </tr> <tr> <td>0.200</td> <td>SD1013</td> <td>201707C 7-24-19</td> </tr> <tr> <td>0.080 DGS</td> <td>N/A</td> <td>AGS05701 2-26-20</td> </tr> </tbody> </table>	Simulator	Serial #	Lot #/Exp	0.050	SD1021	201707D 7-25-19	0.080	DR1275	201707E 7-25-19	0.200	SD1013	201707C 7-24-19	0.080 DGS	N/A	AGS05701 2-26-20	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 #: _____																																												
Simulator	Serial #	Lot #/Exp																																																											
0.050	SD1021	201707D 7-25-19																																																											
0.080	DR1275	201707E 7-25-19																																																											
0.200	SD1013	201707C 7-24-19																																																											
0.080 DGS	N/A	AGS05701 2-26-20																																																											
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	
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																																																												
Simulator	Serial Number																																																												
0.000																																																													
Interferent																																																													
0.050																																																													
0.080																																																													
0.200																																																													
Notes/Suggested Service: <u>Sending to repair due to low readings. SP</u>	<input type="checkbox"/> Instrument Complies with Chapter 11D-8, FAC <input type="checkbox"/> Instrument Does Not Comply with Chapter 11D-8, FAC <input type="checkbox"/> Return to/Place into Evidentiary Use <input type="checkbox"/> Remain Out of Evidentiary Use <input type="checkbox"/> Conduct an Agency Inspection Before Evidentiary Use																																																												
Tech Review / Date _____	Admin Review / Date _____																																																												

SP 1/23/19

80-001043
 STABILITY CHECK

.05

HIGHLANDS COUNTY SO
 Intoxilyzer - Alcohol Analyzer
 Model 8000 SN 80-001043
 01/24/2019
 Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	14:05
Control Test	0.024	14:06
Air Blank	0.000	14:06
Control Test	0.025	14:07
Air Blank	0.000	14:08
Control Test	0.024	14:08
Air Blank	0.000	14:09
Control Test Stats		
Average	0.0243	
Std Dev	0.0006	
Rel Std Dev(%)	2.3727	

SJP

Operator's Signature

.68

HIGHLANDS COUNTY SO
 Intoxilyzer - Alcohol Analyzer
 Model 8000 SN 80-001043
 01/24/2019
 Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	14:13
Control Test	0.035	14:13
Air Blank	0.000	14:14
Control Test	0.036	14:14
Air Blank	0.000	14:15
Control Test	0.036	14:16
Air Blank	0.000	14:16
Control Test Stats		
Average	0.0357	
Std Dev	0.0006	
Rel Std Dev(%)	1.6187	

SJP

Operator's Signature

.20

HIGHLANDS COUNTY SO
 Intoxilyzer - Alcohol Analyzer
 Model 8000 SN 80-001043
 01/24/2019
 Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	14:17
Control Test	0.099	14:18
Air Blank	0.000	14:18
Control Test	0.102	14:19
Air Blank	0.000	14:19
Control Test	0.102	14:20
Air Blank	0.000	14:21
Control Test Stats		
Average	0.1010	
Std Dev	0.0017	
Rel Std Dev(%)	1.7149	

SJP

Operator's Signature

HIGHLANDS COUNTY SO
 Intoxilyzer - Alcohol Analyzer
 Model 8000 SN 80-001043
 01/24/2019
 Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	14:09
Control Test	0.079	14:10
Air Blank	0.000	14:10
Control Test	0.078	14:10
Air Blank	0.000	14:11
Control Test	0.079	14:11
Air Blank	0.000	14:12
Control Test Stats		
Average	0.0787	
Std Dev	0.0006	
Rel Std Dev(%)	0.7339	

DGS

SJP

Operator's Signature

5/23/19
 [Signature]

This instrument is not
fixed.

I just did the inspection
on my other Instrument
to include pre testing and it
passed inspection with no issue.

Used SAME Sims on this
Instrument and it failed miserably.
Unable to do inspection.

Sgt L/ASCO

1-18-19

sq
1/24/19

HIGHLANDS COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-001043
01/18/2019
Software: 8100.27

DIAGNOSTICS

Voltage/Current Test	OK
RAM Test	OK
EEPROM Checksum Test	OK
Real Time Clock Test	OK
DSP Test	OK
Analytical Stability Test	OK
Internal Printer Test	OK
Modem Test	OK
Temperature Regulation Test	OK

5/23/19
DE

HIGHLANDS COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-001043
01/18/2019
Software: 8100.27

WET CONTROL TEST

Test	g/210L	Time
Air Blank	0.000	01:08
Control Test	0.031	01:09
Air Blank	0.000	01:09

Operator's Signature

5/23/19
JL

HIGHLANDS COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-001043
01/18/2019
Software: 8100.27

WET CONTROL TEST

Test	g/210L	Time
Air Blank	0.000	01:10
Control Test	0.034	01:11
Air Blank	0.000	01:11

Operator's Signature

5/23/19
JO

HIGHLANDS COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-001043
01/18/2019
Software: 8100.27

WET CONTROL TEST

Test	g/210L	Time
Air Blank	0.000	01:14
Control Test	0.033	01:14
Air Blank	0.000	01:15

Operator's Signature

5/23/19
SS

HIGHLANDS COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-001043
01/18/2019
Software: 8100.27

WET CONTROL TEST

Test	g/210L	Time
Air Blank	0.000	01:17
Control Test	0.032	01:18
Air Blank	0.000	01:18

Operator's Signature

5/23/19
JR

HIGHLANDS COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-001043
01/18/2019
Software: 8100.27

WET CONTROL TEST

Test	g/210L	Time
Air Blank	0.000	01:20
Control Test	0.021	01:21
Air Blank	0.000	01:21

Operator's Signature

5/23/19
20

Return Material Authorization

Ship to: CMI, Inc.
 Enforcement Electronics

Shipment to repair facility authorized by: Gregory Glasco on 1/24/19

Items Returned: Instrument Supplies Other Describe: _____

Instrument Model: Intoxilyzer 8000 Serial Number: 80-001043

Bill To Address:
Highlands County SO
400 Eucalyptus St
Sebring, FL 33870

Ship to Address:
FDLE- ATP

Reason for Return:

Conducted inspection 1/15/19... instrument compliant. On 1/24/19 instrument has low readings. See attached inspection and stability checks.

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: Gregory Glasco

Phone #: (863) 402-7200 Email: gglasco@highlandssheriff.org

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

80-001043
STABILITY CHECK

05
HIGHLANDS COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-001043
01/24/2019
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	14:05
Control Test	0.024	14:06
Air Blank	0.000	14:06
Control Test	0.025	14:07
Air Blank	0.000	14:08
Control Test	0.024	14:08
Air Blank	0.000	14:09
Control Test Stats		
Average	0.0243	
Std Dev	0.0006	
Rel Std Dev(%)	2.3727	

SP
Operator's Signature

08
HIGHLANDS COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-001043
01/24/2019
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	14:13
Control Test	0.035	14:13
Air Blank	0.000	14:14
Control Test	0.036	14:14
Air Blank	0.000	14:15
Control Test	0.036	14:16
Air Blank	0.000	14:16
Control Test Stats		
Average	0.0357	
Std Dev	0.0006	
Rel Std Dev(%)	1.6187	

SP
Operator's Signature

20
HIGHLANDS COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-001043
01/24/2019
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	14:17
Control Test	0.099	14:18
Air Blank	0.000	14:18
Control Test	0.102	14:19
Air Blank	0.000	14:19
Control Test	0.102	14:20
Air Blank	0.000	14:21
Control Test Stats		
Average	0.1010	
Std Dev	0.0017	
Rel Std Dev(%)	1.7149	

SP
Operator's Signature

HIGHLANDS COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-001043
01/24/2019
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	14:09
Control Test	0.079	14:10
Air Blank	0.000	14:10
Control Test	0.078	14:10
Air Blank	0.000	14:11
Control Test	0.079	14:11
Air Blank	0.000	14:12
Control Test Stats		
Average	0.0787	
Std Dev	0.0006	
Rel Std Dev(%)	0.7339	

SP
Operator's Signature

DAS

Florida Department of Law Enforcement

Alcohol Testing Program

Inspection Test Electronic Data

CMI, Inc. Intoxilyzer 8000 Serial Number: 80-001043

Agency	HIGHLANDS COUNTY SO	Date	01/15/2019	Type	Department Inspection
Inspector	GRAHAM, THOMAS, J	Time	14:21:15	Software	8100.27
0.05 Lot #	201707D	0.08 Lot #	201707E	0.20 Lot #	201707C
Expiration	07/25/2019	Expiration	07/25/2019	Expiration	07/24/2019
				0.08 Gas Lot #	AG805701
				Expiration	02/26/2020
Number of Simulators	5	Average Standard Deviation	0.0004	Compliance	Yes

Check or Test	Result	Test	Result
Diagnostic Check (Pre-Inspection): OK	Yes	Alcohol Free Test # 1	0.000
Date and/or Time Adjusted	No	0.05 g/210L Test # 1	0.050
Minimum Sample Volume Check: OK	Yes	0.08 g/210L Test # 1	0.079
Barometric Pressure Sensor Check: OK	Yes	0.20 g/210L Test # 1	0.196
Alcohol Free Subject Test: 0.000	Yes	0.08 g/210L Dry Gas Std Test # 1	0.078
Mouth Alcohol Test: Slope Not Met	Yes	Interferent Detect Test # 1	INT
Interferent Detect Test: Interferent Detect	Yes	Alcohol Free Test # 2	0.000
Diagnostic Check (Post-Inspection): OK	Yes	0.05 g/210L Test # 2	0.049
Alcohol Free Test: OK	Yes	0.08 g/210L Test # 2	0.080
0.05 g/210L Test: OK	Yes	0.20 g/210L Test # 2	0.196
0.08 g/210L Test: OK	Yes	0.08 g/210L Dry Gas Std Test # 2	0.079
0.20 g/210L Test: OK	Yes	Interferent Detect Test # 2	INT
0.08 g/210L Dry Gas Std Test: OK	Yes	Alcohol Free Test # 3	0.000
		0.05 g/210L Test # 3	0.049
		0.08 g/210L Test # 3	0.080
		0.20 g/210L Test # 3	0.196
		0.08 g/210L Dry Gas Std Test # 3	0.079
		Interferent Detect Test # 3	INT
		Alcohol Free Test # 4	0.000
		0.05 g/210L Test # 4	0.049
		0.08 g/210L Test # 4	0.080
		0.20 g/210L Test # 4	0.196
		0.08 g/210L Dry Gas Std Test # 4	0.079
		Interferent Detect Test # 4	INT
		Alcohol Free Test # 5	0.000
		0.05 g/210L Test # 5	0.050
		0.08 g/210L Test # 5	0.080
		0.20 g/210L Test # 5	0.196

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

Inspection Test Electronic Data

CMI, Inc. Intoxilyzer 8000 Serial Number: 80-001043

0.08 g/210L Dry Gas Std Test # 5	0.079
Interferent Detect Test # 5	INT
Alcohol Free Test # 6	0.000
0.05 g/210L Test # 6	0.049
0.08 g/210L Test # 6	0.080
0.20 g/210L Test # 6	0.196
0.08 g/210L Dry Gas Std Test # 6	0.079
Interferent Detect Test # 6	INT
Alcohol Free Test # 7	0.000
0.05 g/210L Test # 7	0.050
0.08 g/210L Test # 7	0.080
0.20 g/210L Test # 7	0.197
0.08 g/210L Dry Gas Std Test # 7	0.079
Interferent Detect Test # 7	INT
Alcohol Free Test # 8	0.000
0.05 g/210L Test # 8	0.050
0.08 g/210L Test # 8	0.081
0.20 g/210L Test # 8	0.197
0.08 g/210L Dry Gas Std Test # 8	0.079
Interferent Detect Test # 8	INT
Alcohol Free Test # 9	0.000
0.05 g/210L Test # 9	0.050
0.08 g/210L Test # 9	0.080
0.20 g/210L Test # 9	0.197
0.08 g/210L Dry Gas Std Test # 9	0.079
Interferent Detect Test # 9	INT
Alcohol Free Test # 10	0.000
0.05 g/210L Test # 10	0.050
0.08 g/210L Test # 10	0.080
0.20 g/210L Test # 10	0.197
0.08 g/210L Dry Gas Std Test # 10	0.079
Interferent Detect Test # 10	INT
0.05 g/210L Test (Std Dev)	0.0005
0.08 g/210L Test (Std Dev)	0.0004
0.20 g/210L Test (Std Dev)	0.0005
0.08 g/210L Dry Gas Std Test (Std Dev)	0.0003

Remarks:



INSTRUMENT PROCESSING SHEET

Agency Highlands County SOS/N 80-001043

Florida Department of Law Enforcement

Date In 01/07/19DI Completion Date 1/15/19 Ship P/U H/D CMI EE

Intake Performed By <u>SQC</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 checked="" type="checkbox"/> Power cord <input type="checkbox"/> Printer Cable <input checked="" type="checkbox"/> Static Bag <input type="checkbox"/> 12V DC Cable Notes: <u>see note</u>	Quality Checks Performed By <u>JD</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>195</u> <input checked="" type="checkbox"/> Flow Verification (L/s) Flow Column # <u>ATP-105</u> 32 mm <u>.164</u> (.139 - .169) 36 mm <u>.179</u> (.156 - .190) 53 mm <u>.246</u> (.228 - .278) 103 mm <u>.519</u> (.447 - .547) <input checked="" type="checkbox"/> Barometric Pressure Check Gauge ID # <u>28421</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 <div style="text-align: center; font-weight: bold; font-size: 1.2em;">FDLE</div> <div style="text-align: center; font-weight: bold; font-size: 1.2em;">JAN 16 2019</div> <div style="text-align: center; font-weight: bold;">Alcohol Testing Program</div>	<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>201707 D</u> <u>7/25/19</u></td> </tr> <tr> <td>0.080</td> <td><u>DR1279</u></td> <td><u>201707 E</u> <u>7/25/19</u></td> </tr> <tr> <td>0.200</td> <td><u>DR3856</u></td> <td><u>201707 C</u> <u>7/24/19</u></td> </tr> <tr> <td>0.080 DGS</td> <td><u>N/A</u></td> <td><u>AG805701</u> <u>2/26/20</u></td> </tr> </tbody> </table>	Simulator	Serial #	Lot #/Exp	0.050	<u>SD1012</u>	<u>201707 D</u> <u>7/25/19</u>	0.080	<u>DR1279</u>	<u>201707 E</u> <u>7/25/19</u>	0.200	<u>DR3856</u>	<u>201707 C</u> <u>7/24/19</u>	0.080 DGS	<u>N/A</u>	<u>AG805701</u> <u>2/26/20</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 _____																	
Simulator	Serial #	Lot #/Exp																																
0.050	<u>SD1012</u>	<u>201707 D</u> <u>7/25/19</u>																																
0.080	<u>DR1279</u>	<u>201707 E</u> <u>7/25/19</u>																																
0.200	<u>DR3856</u>	<u>201707 C</u> <u>7/24/19</u>																																
0.080 DGS	<u>N/A</u>	<u>AG805701</u> <u>2/26/20</u>																																
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><u>N/A</u></td> <td><u>N/A</u></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><u>N/A</u></td> <td></td> <td></td> </tr> </tbody> </table> <input type="checkbox"/> Post Calibration Adjustment Stability Checks	Simulator	Serial Number	Lot Number	Expiration	0.000		<u>N/A</u>	<u>N/A</u>	0.040				0.100				0.200				0.300				0.080 DGS	<u>N/A</u>			Department Inspection Performed By <u>JD</u> Barometric Pressure ID# <u>26932</u> Gauge <u>1023</u> Instrument <u>1022</u> Mouth Alcohol Solution Lot # <u>2018-B</u> Acetone Stock Solution Lot # <u>2018-A</u>				
Simulator	Serial Number	Lot Number	Expiration																															
0.000		<u>N/A</u>	<u>N/A</u>																															
0.040																																		
0.100																																		
0.200																																		
0.300																																		
0.080 DGS	<u>N/A</u>																																	
<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><u>N/A</u></td> <td></td> <td></td> </tr> </tbody> </table>	Simulator	Serial Number	Lot Number	Expiration	0.050				0.080				0.200				0.080 DGS	<u>N/A</u>			<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><u>G2408</u></td> </tr> <tr> <td>Interferent</td> <td><u>G2882</u></td> </tr> <tr> <td>0.050</td> <td><u>SD1012</u></td> </tr> <tr> <td>0.080</td> <td><u>DR1279</u></td> </tr> <tr> <td>0.200</td> <td><u>DR3856</u></td> </tr> </tbody> </table>	Simulator	Serial Number	0.000	<u>G2408</u>	Interferent	<u>G2882</u>	0.050	<u>SD1012</u>	0.080	<u>DR1279</u>	0.200	<u>DR3856</u>	Temperature Checks Performed By <u>JD</u> <input checked="" type="checkbox"/> Lab Temp °C <u>21.6</u> External-Digital Therm. ID#: <u>300504</u> <input checked="" type="checkbox"/> 34°C +- .2 Serial #: <u>SD1012</u> <input checked="" type="checkbox"/> 34°C +- .2 Serial #: <u>DR1279</u> <input checked="" type="checkbox"/> 34°C +- .2 Serial #: <u>DR3856</u>
Simulator	Serial Number	Lot Number	Expiration																															
0.050																																		
0.080																																		
0.200																																		
0.080 DGS	<u>N/A</u>																																	
Simulator	Serial Number																																	
0.000	<u>G2408</u>																																	
Interferent	<u>G2882</u>																																	
0.050	<u>SD1012</u>																																	
0.080	<u>DR1279</u>																																	
0.200	<u>DR3856</u>																																	
Notes/Suggested Service: <u>Please change level 2 password to something unique. JD</u> <u>Instrument was able to upload data after the Department inspection. JD</u>	<input checked="" type="checkbox"/> Instrument Complies with Chapter 11D-8, FAC <input type="checkbox"/> Instrument Does Not Comply with Chapter 11D-8, FAC <input checked="" type="checkbox"/> Return to/Place into Evidentiary Use <input type="checkbox"/> Remain Out of Evidentiary Use <input checked="" type="checkbox"/> Conduct an Agency Inspection Before Evidentiary Use	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;"><input checked="" type="checkbox"/> Form 41</td> <td style="width:50%;"><input type="checkbox"/> Post-Stability Checks</td> </tr> <tr> <td><input checked="" type="checkbox"/> Stability Checks</td> <td><input type="checkbox"/> Flow Calibration</td> </tr> <tr> <td><input checked="" type="checkbox"/> Calibration Certificate</td> <td><input checked="" type="checkbox"/> Form 40</td> </tr> <tr> <td><input type="checkbox"/> Calibration Adjustment</td> <td><input type="checkbox"/> Other _____</td> </tr> </table>	<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 checked="" type="checkbox"/> Form 40	<input type="checkbox"/> Calibration Adjustment	<input type="checkbox"/> Other _____																								
<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 checked="" type="checkbox"/> Form 40																																	
<input type="checkbox"/> Calibration Adjustment	<input type="checkbox"/> Other _____																																	
_____ _____ _____	<u>SP 1/15/19</u> <u>Brett Kirkland</u> <u>1/16/19</u> Tech Review / Date Admin Review / Date	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 checked="" type="checkbox"/> Form 40 <input type="checkbox"/> Calibration Adjustment <input type="checkbox"/> Other _____																																

Florida Department of Law Enforcement Alcohol Testing Program

DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: HIGHLANDS COUNTY SO
Time of Inspection: 14:21

Date of Inspection: 01/15/2019

Serial Number: 80-001043
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#:201707D Exp: 07/25/2019	0.08g/210L Test (g/210L) Lot#:201707E Exp: 07/25/2019	0.20g/210L Test (g/210L) Lot#:201707C Exp: 07/24/2019	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:AG805701 Exp: 02/26/2020
0.000	0.050	0.079	0.196	0.078
0.000	0.049	0.080	0.196	0.079
0.000	0.049	0.080	0.196	0.079
0.000	0.049	0.080	0.196	0.079
0.000	0.050	0.080	0.196	0.079
0.000	0.049	0.080	0.196	0.079
0.000	0.050	0.080	0.197	0.079
0.000	0.050	0.081	0.197	0.079
0.000	0.050	0.080	0.197	0.079
0.000	0.050	0.080	0.197	0.079

Standard Deviations	0.0005	0.0004	0.0005	0.0003
---------------------	--------	--------	--------	--------

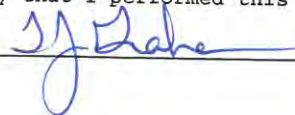
Average Standard Deviation of 0.05, 0.08 and 0.20 g/210L Tests: 0.0004 Number of Simulators Used: 5

Remarks:

SP
BK
1/16/19

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.



 Signature and Printed Name THOMAS J GRAHAM

01/15/2019
 Date

80-001043

11/5/19
JPA

HIGHLANDS COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-001043
01/15/2019
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	12:05
Control Test	0.050	12:06
Air Blank	0.000	12:06
Control Test	0.050	12:07
Air Blank	0.000	12:07
Control Test	0.050	12:08
Air Blank	0.000	12:08
Control Test Stats		
Average	0.0500	
Std Dev	0.0000	
Rel. Std Dev(%)	0.0000	

JPA

Operator's Signature

HIGHLANDS COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-001043
01/15/2019
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	12:10
Control Test	0.081	12:11
Air Blank	0.000	12:11
Control Test	0.080	12:12
Air Blank	0.000	12:13
Control Test	0.081	12:13
Air Blank	0.000	12:14
Control Test Stats		
Average	0.0807	
Std Dev	0.0006	
Rel. Std Dev(%)	0.7157	

JPA

Operator's Signature

HIGHLANDS COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-001043
01/15/2019
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	12:15
Control Test	0.196	12:16
Air Blank	0.000	12:16
Control Test	0.197	12:17
Air Blank	0.000	12:17
Control Test	0.197	12:18
Air Blank	0.000	12:19
Control Test Stats		
Average	0.1967	
Std Dev	0.0006	
Rel. Std Dev(%)	0.2936	

JPA

Operator's Signature

HIGHLANDS COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-001043
01/15/2019
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	12:20
Control Test	0.079	12:20
Air Blank	0.000	12:21
Control Test	0.079	12:21
Air Blank	0.000	12:22
Control Test	0.079	12:22
Air Blank	0.000	12:23
Control Test Stats		
Average	0.0790	
Std Dev	0.0000	
Rel. Std Dev(%)	0.0000	

DGS

SP BK
11/6/19

JPA

Operator's Signature



Calibration Certificate

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

This is to certify the calibration of Intoxilyzer 8000 serial number 80-001043, manufactured by CMI, Inc. was calibrated in accordance with FDLE/ATP Form 36 - Department Inspection Procedures - Intoxilyzer 8000.

Serial Number:	<u>80-001043</u>	UNCERTAINTY * ±	
Owning Agency:	<u>HIGHLANDS COUNTY SO</u>	0.050 g/ 210 L	0.004
Calibration Date:	<u>01/15/2019</u>	0.080 g/ 210 L	0.004
Calibration Time:	<u>14:21</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.

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

SP

01/15/2019

Date

JK
1/16/19
THOMAS J GRAHAM,
Department Inspector

FDLE/ATP Form 69 July 2018

Issuing Authority: Alcohol Testing Program

Service • Integrity • Respect • Quality

Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: HIGHLANDS COUNTY SO
Time of Inspection: 11:39

Date of Inspection: 01/15/2019

Serial Number: 80-001043
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. NOT A COMPLIANCE CHECK.

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.

Thomas J. Graham

THOMAS J GRAHAM
Signature and Printed Name

01/15/2019
Date

SP
BK
1/16/19

TJ,

THIS INSTRUMENT KEEPS
SAYING "NO DIAL TONE".

WAS UNABLE TO DO
COMMS TRANSFER
AFTER THE MONTHLY
INSPECTION.

THANKS
SHON ABELN
Highlands Co. So.

80-001043 SDC

SP
BK
1/16/19