



INSTRUMENT PROCESSING SHEET

Agency St. Lucie County SO

S/N 80-000788

Florida Department of Law Enforcement

Date In 04/10/2020 DI Completion Date 04/16/2020

Ship  P/U  H/D  CMI  EE

<b>Intake</b> Performed By <u>MH</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 checked="" type="checkbox"/> Static Bag <input type="checkbox"/> 12V DC Cable Notes: _____ _____ <b>Final Release Date</b> <u>FDLE</u> <p style="text-align: center;">APR 30 2020 Alcohol Testing Program</p>	<b>Quality Checks</b> Performed By <u>MH</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>223</u> <input checked="" type="checkbox"/> Flow Verification (L/s) Flow Column # <u>ATP 101</u> 32 mm <u>0.164</u> (.139 - .169) 36 mm <u>0.187</u> (.156 - .190) 53 mm <u>0.253</u> (.228 - .278) 103 mm <u>0.503</u> (.447 - .547) <input checked="" type="checkbox"/> Barometric Pressure Check Gauge ID # <u>68639</u> <input checked="" type="checkbox"/> Stability Checks <table border="1"> <thead> <tr> <th>Simulator</th> <th>Serial #</th> <th>Lot #/Exp</th> </tr> </thead> <tbody> <tr> <td>0.050</td> <td>MP4863</td> <td>201905A 05/14/2021</td> </tr> <tr> <td>0.080</td> <td>MP4864</td> <td>201905B 05/14/2021</td> </tr> <tr> <td>0.200</td> <td>MP5097</td> <td>201904D 04/30/2021</td> </tr> <tr> <td>0.080 DGS</td> <td>N/A</td> <td>AG931603 11/12/2021</td> </tr> </tbody> </table>	Simulator	Serial #	Lot #/Exp	0.050	MP4863	201905A 05/14/2021	0.080	MP4864	201905B 05/14/2021	0.200	MP5097	201904D 04/30/2021	0.080 DGS	N/A	AG931603 11/12/2021	<b>Flow Calibration</b> 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) <b>Maintenance</b> Performed By _____ <input type="checkbox"/> Battery Replacement <input type="checkbox"/> Dry Gas Regulator Replacement <input type="checkbox"/> Breath Tube Replacement <input type="checkbox"/> Other _____ <b>Temperature Checks</b> Performed By <u>MH</u> <input checked="" type="checkbox"/> Lab Temp °C <u>22.36</u> External Digital Therm. ID#: <u>300504</u> <input checked="" type="checkbox"/> 34°C +/- .2 Serial #: <u>MP4863</u> <input checked="" type="checkbox"/> 34°C +/- .2 Serial #: <u>MP4864</u> <input checked="" type="checkbox"/> 34°C +/- .2 Serial #: <u>MP5097</u>
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Notes/Suggested Service: <u>E-mailed</u> <input checked="" type="checkbox"/> <b>APPROVED</b> <u>4/17/2020</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 <u>SRP 4/27/20</u> <u>Butt/Kirkland 4/28/2020</u> Tech Review / Date Admin Review / Date
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# Florida Department of Law Enforcement Alcohol Testing Program

## DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: ST LUCIE COUNTY SO  
Time of Inspection: 13:30

Date of Inspection: 04/16/2020

Serial Number: 80-000788  
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	0.050	0.082	0.202	0.079
0.000	0.050	0.081	0.203	0.079
0.000	0.050	0.082	0.203	0.079
0.000	0.050	0.082	0.203	0.080
0.000	0.050	0.082	0.203	0.080
0.000	0.050	0.082	0.203	0.080
0.000	0.050	0.082	0.203	0.080
0.000	0.050	0.082	0.204	0.079
0.000	0.049	0.082	0.204	0.080
0.000	0.050	0.082	0.203	0.080
Standard Deviations	0.0003	0.0003	0.0005	0.0005

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

Remarks:

SP  
BK  
4/28/2020

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.

Michael D Haughey MICHAEL D HAUGHEY  
Signature and Printed Name

04/16/2020  
Date

TYPE OF TEST	SERIAL NUMBER	AGENCY	DATE	PERFORMED BY
Stabilities	80-00			

0.05g/210L  
0.047 to 0.053

0.08g/210L  
0.077 to 0.083

0.20g/210L  
0.194 to 0.206

DGS 0.08g/210L  
0.077 to 0.083

ST LUCIE COUNTY SO  
Intoxilyzer - Alcohol Analyzer  
Model 8000 SN 80-000788  
04/16/2020  
Software: 8100.27

ST LUCIE COUNTY SO  
Intoxilyzer - Alcohol Analyzer  
Model 8100 SN 80-000788  
04/16/2020  
Software: 8100.27

ST LUCIE COUNTY SO  
Intoxilyzer - Alcohol Analyzer  
Model 8000 SN 80-000788  
04/16/2020  
Software: 8100.27

ST LUCIE COUNTY SO  
Intoxilyzer - Alcohol Analyzer  
Model 8000 SN 80-000788  
04/16/2020  
Software: 8100.27

Test g/210L Time

Air Blank 0.000 10:30  
Control Test 0.051 10:30  
Air Blank 0.000 10:31  
Control Test 0.050 10:32  
Air Blank 0.000 10:32  
Control Test 0.050 10:33  
Air Blank 0.000 10:33  
Control Test 0.000 10:33

Average 0.0503  
Std Dev 0.0006  
Rel Std Dev(%) 1.1471

Test g/210L Time

Air Blank 0.000 10:35  
Control Test 0.083 10:36  
Air Blank 0.000 10:36  
Control Test 0.082 10:37  
Air Blank 0.000 10:37  
Control Test 0.082 10:38  
Air Blank 0.000 10:39

Average 0.0823  
Std Dev 0.0006  
Rel Std Dev(%) 0.7012

Test g/210L Time

Air Blank 0.000 10:40  
Control Test 0.204 10:41  
Air Blank 0.000 10:41  
Control Test 0.203 10:42  
Air Blank 0.000 10:43  
Control Test 0.203 10:43  
Air Blank 0.000 10:44

Average 0.2033  
Std Dev 0.0006  
Rel Std Dev(%) 0.2839

Test g/210L Time

Air Blank 0.000 10:47  
Control Test 0.081 10:47  
Air Blank 0.000 10:47  
Control Test 0.078 10:48  
Air Blank 0.000 10:48  
Control Test 0.079 10:49  
Air Blank 0.000 10:49

Average 0.0793  
Std Dev 0.0015  
Rel Std Dev(%) 1.9255

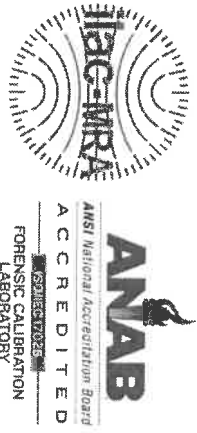
Operator's Signature *MW*

Operator's Signature *MW*

Operator's Signature *MW*

Operator's Signature *MW*

*SP*  
*PK*  
*4/23/2020*



# Calibration Certificate

Florida Department of Law Enforcement  
Alcohol Testing Program  
4700 Terminal Drive, Suite 1  
Ft. Myers, FL 33907

This is to certify the calibration of Intoxilyzer 8000 serial number 80-000788, manufactured by CMI, Inc. was calibrated in accordance with FDLE/ATP Form 36 - Department Inspection Procedures - Intoxilyzer 8000.

Serial Number:	<u>80-000788</u>	UNCERTAINTY* ±	
Owning Agency:	<u>ST LUCIE COUNTY SO</u>	0.050 g/ 210 L	0.004
Calibration Date:	<u>04/16/2020</u>	0.080 g/ 210 L	0.005
Calibration Time:	<u>13:30</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.

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

Service • Integrity • Respect • Quality

04/16/2020 Date *Michael D Haughey*

**MICHAEL D HAUGHEY,**  
Department Inspector

*02/28/20  
BK  
4/28/2020*

Interferent Flagged on 0.05  
 Stability. <sup>MM</sup> Additional Checks ran,  
 Additional  
 No interferent detected.

ST LUCIE COUNTY SO  
 Intoxilyzer - Alcohol Analyzer  
 Model 8000 SN 80-000788  
 04/16/2020  
 Software: 8100.27

ST LUCIE COUNTY SO  
 Intoxilyzer - Alcohol Analyzer  
 Model 8000 SN 80-000788  
 04/16/2020  
 Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	10:00
Control Test	INT*	10:01
Air Blank	0.000	10:01
Control Test	0.051	10:02
Air Blank	0.000	10:02
Control Test	0.050	10:03
Air Blank	0.000	10:04

Control Test Stats  
 Average 0.0527  
 Std Dev 0.0038  
 Rel Std Dev(%) 7.1885

\*Interferent Detect

Test	g/210L	Time
Air Blank	0.000	10:05
Control Test	0.051	10:05
Air Blank	0.000	10:06
Control Test	0.050	10:06
Air Blank	0.000	10:07
Control Test	0.051	10:08
Air Blank	0.000	10:08
Control Test	0.051	10:09
Air Blank	0.000	10:09
Control Test	0.050	10:10
Air Blank	0.000	10:11
Control Test	0.050	10:11
Air Blank	0.000	10:12
Control Test	0.050	10:13
Air Blank	0.000	10:13
Control Test	0.050	10:14
Air Blank	0.000	10:14
Control Test	0.050	10:15
Air Blank	0.000	10:16
Control Test	0.050	10:16
Air Blank	0.000	10:17
Control Test	0.050	10:17
Air Blank	0.000	10:18
Control Test	0.050	10:19
Air Blank	0.000	10:19
Control Test	0.050	10:20
Air Blank	0.000	10:20
Control Test	0.051	10:21
Air Blank	0.000	10:22
Control Test	0.050	10:22
Air Blank	0.000	10:23
Control Test	0.050	10:24
Air Blank	0.000	10:24
Control Test	0.050	10:25
Air Blank	0.000	10:25
Control Test	0.050	10:26
Air Blank	0.000	10:26
Control Test	0.050	10:27
Air Blank	0.000	10:28
Control Test	0.049	10:28
Air Blank	0.000	10:29

Control Test Stats  
 Average 0.0501  
 Std Dev 0.0005  
 Rel Std Dev(%) 0.9758

  
 Operator's Signature

  
 Operator's Signature

SP  
 BK  
 4/28/2020

**Return Material Authorization**

**Ship to:**  CMI, Inc.  
 Enforcement Electronics

Shipment to repair facility authorized by: David Caglioni on 02/06/2020

**Items Returned:** Instrument  Supplies  Other  Describe: \_\_\_\_\_

Instrument Model: Intoxilyzer 8000 Serial Number: 80-000788

**Bill To Address:**  
St. Lucie County Sheriff's Office  
Attn: David Caglioni  
4700 W Midway Road  
Fort Pierce, FL. 34981

**Ship to Address:**  
FDLE ATP  
Attn: Michael Haughey  
4700 Terminal Drive, Suite 1  
Fort Myers, FL. 33907

**Reason for Return:**

DSP Fail. DVM of 3 and 9 at 0.

**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: David Caglioni

Phone #: 772-462-3296 Email: \_\_\_\_\_

ATP Contact Name: Michael Haughey ATP Email: MichaelHaughey@fdle.state.fl.



# INSTRUMENT PROCESSING SHEET

Agency St. Lucie County SOS/N 80-000788

Florida Department of Law Enforcement

Date In 02/05/2020 DI Completion Date \_\_\_\_\_ Ship  P/U  H/D  CMI  EE

<b>Intake</b> Performed By <u>JLG</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 type="checkbox"/> Power cord <input type="checkbox"/> Printer Cable <input type="checkbox"/> Static Bag <input type="checkbox"/> 12V DC Cable Notes: <u>Missing left middle foot. Form 38 with non-compliance.</u>	<b>Quality Checks</b> Performed By _____ <input type="checkbox"/> Breath Tube Screen <input type="checkbox"/> Replace External O-Rings <input type="checkbox"/> Instrument Set Up Verified <input type="checkbox"/> R-Value _____ <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 type="checkbox"/> Barometric Pressure Check Gauge ID # _____ <input 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></td><td></td></tr> <tr><td>0.080</td><td></td><td></td></tr> <tr><td>0.200</td><td></td><td></td></tr> <tr><td>0.080 DGS</td><td>N/A</td><td></td></tr> </tbody> </table>	Simulator	Serial #	Lot #/Exp	0.050			0.080			0.200			0.080 DGS	N/A		<b>Flow Calibration</b> 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)																																													
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