



INSTRUMENT PROCESSING SHEET

Agency Desoto CSOS/N 80-007508

Florida Department of Law Enforcement

Date In 09/07/2023 DI Completion Date 09/19/2023 Ship P/U H/D CMI EE

Intake	By TDG	Quality Checks	By TDG	Date	09/19/2023	Flow Calibration	By	Date																																																									
<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: _____ _____ _____ _____ _____ _____		<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>196</u> <input checked="" type="checkbox"/> Flow Verification (L/s) Flow Column # <u>ATP104</u> 32 mm <u>0.152</u> (.139 - .169) 36 mm <u>0.167</u> (.156 - .190) 53 mm <u>0.242</u> (.228 - .278) 103 mm <u>0.500</u> (.447 - .547) <input checked="" type="checkbox"/> Barometric Pressure Check Gauge ID # <u>26932</u> <input checked="" type="checkbox"/> Stability Checks				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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Notes/Suggested Service: <u>Added plastic caps for return to agency. (TDG)</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																																																											
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Stability Checks

0.05g/210L 0.047 to 0.053	0.08g/210L 0.077 to 0.083	0.20g/210L 0.194 to 0.206	0.08g/210L 0.077 to 0.083	0.20g/210L 0.194 to 0.206	0.08g/210L 0.077 to 0.083	0.05g/210L 0.047 to 0.053																																																																																																																																																																																																																							
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Rel Std Dev(%)	1.2500																																																																																																																																																																																																																												
Test	g/210L	Time																																																																																																																																																																																																																											
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Control Test	0.081	10:10																																																																																																																																																																																																																											
Air Blank	0.000	10:10																																																																																																																																																																																																																											
Control Test	0.079	10:10																																																																																																																																																																																																																											
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Florida Department of Law Enforcement Alcohol Testing Program

DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: DESOTO COUNTY SO
Time of Inspection: 12:05

Date of Inspection: 09/19/2023

Serial Number: 80-007508
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#:202201C Exp: 01/11/2024	0.08g/210L Test (g/210L) Lot#:202201D Exp: 01/18/2024	0.20g/210L Test (g/210L) Lot#:202201E Exp: 01/18/2024	0.08 g/210L Dry Gas Std Test* (g/210L) Lot#:AG223802 Exp: 08/26/2024
0.000	0.047	0.077	0.197	0.079
0.000	0.047	0.077	0.198	0.081
0.000	0.048	0.077	0.198	0.080
0.000	0.048	0.077	0.198	0.080
0.000	0.048	0.078	0.198	0.080
0.000	0.048	0.078	0.198	0.080
0.000	0.048	0.078	0.198	0.080
0.000	0.048	0.078	0.198	0.080
0.000	0.048	0.078	0.198	0.080
0.000	0.048	0.078	0.198	0.080
0.000	0.048	0.078	0.199	0.080

Standard Deviations	0.0004	0.0005	0.0004	0.0004
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Average Standard Deviation of 0.05, 0.08 and 0.20 g/210L Tests: 0.0004 Number of Simulators Used: 5

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.



 Signature and Printed Name

TAYLOR D GUTSCHOW

09/19/2023
 Date



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 80-007508, manufactured by CMI, Inc. was calibrated in accordance with FDLE/ATP Form 36 - Department Inspection Procedures - Intoxilyzer 8000.

Serial Number:	<u>80-007508</u>	UNCERTAINTY* ±	
Owning Agency:	<u>DESOTO COUNTY SO</u>	0.050 g/ 210 L	0.004
Calibration Date:	<u>09/19/2023</u>	0.080 g/ 210 L	0.004
Calibration Time:	<u>12:05</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).

The instrument results before and after any adjustment are found in the associated pre and post stability checks.

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. Simulator temperatures are checked with NIST traceable digital thermometers calibrated by Precision Metrology in accordance with ISO/ IEC 17025 standards.

Dry gas control measurements are traceable to NIST through the use 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.



TAYLOR D GUTSCHOW,
Date

09/19/2023

Department Inspector

FDLE/ATP Form 69 December 2021

Issuing Authority: Alcohol Testing Program

Service • Integrity • Respect • Quality