



SLH
***Suwannee**
Agency Suwannee County Sheriffs Department Office *SLH*

S/N 80-007382

Florida Department of
Law Enforcement

Date In 08/11/2025 DI Completion Date 08/14/2025 ☒ Ship ☐ P/U ☐ H/D ☐ CMI ☐ EE

Intake By <u>SLH</u> Date <u>08/11/2025</u>	Quality Checks By <u>KTS</u> Date <u>8/12/25</u>	Flow Calibration By _____ Date _____																																																																					
☒ Annual ☐ Registration ☒ Return from CMI / EE Visual Inspection: ☒ Case ☒ Handle ☒ Keyboard ☒ Dry Gas Shelf ☒ Feet ☒ Breath Tube ☒ Ports ☒ Screws Tight Other Equipment/ Accessories: ☐ Power cord ☐ Printer Cable ☒ Static Bag ☐ 12V DC Cable Notes: Arrived in FDLE loaner box. Calibration inlet port not vertically straight.SLH	☒ Breath Tube Screen ☒ Replace External O-Rings ☒ Instrument Set Up Verified ☒ R-Value <u>204</u> ☒ Flow Verification (L/s) Flow Column # <u>ATP103</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>0.496</u> (.447 - .547) ☒ Barometric Pressure Check Gauge ID # <u>28427</u> ☒ 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>MP5088</td><td>202406K 06/19/2026</td></tr><tr><td>0.080</td><td>MP5089</td><td>202406L 06/19/2026</td></tr><tr><td>0.200</td><td>MP5090</td><td>202406N 06/20/2026</td></tr><tr><td>0.080 DGS</td><td>N/A</td><td>AG429602 10/22/2026</td></tr></tbody></table>	Simulator	Serial #	Lot #/Exp	0.050	MP5088	202406K 06/19/2026	0.080	MP5089	202406L 06/19/2026	0.200	MP5090	202406N 06/20/2026	0.080 DGS	N/A	AG429602 10/22/2026	Flow Column # _____ ☐ 5L/min – 17mm ☐ 15L/min – 53mm ☐ 30L/min – 103mm ☐ R-Value _____ ☐ Post Calibration Verification (L/s) Flow Column # _____ 32 mm _____ (.139 - .169) 36 mm _____ (.156 - .190) 53 mm _____ (.228 - .278) 103 mm _____ (.447 - .547) <table border="1"><thead><tr><th>Maintenance By _____</th><th>Date _____</th></tr></thead><tbody><tr><td>☐ Battery Replacement</td><td></td></tr><tr><td>☐ Dry Gas Regulator Replacement</td><td></td></tr><tr><td>☐ Breath Tube Replacement</td><td></td></tr><tr><td>☐ Other _____</td><td></td></tr></tbody></table>	Maintenance By _____	Date _____	☐ Battery Replacement		☐ Dry Gas Regulator Replacement		☐ Breath Tube Replacement		☐ Other _____																																													
Simulator	Serial #	Lot #/Exp																																																																					
0.050	MP5088	202406K 06/19/2026																																																																					
0.080	MP5089	202406L 06/19/2026																																																																					
0.200	MP5090	202406N 06/20/2026																																																																					
0.080 DGS	N/A	AG429602 10/22/2026																																																																					
Maintenance By _____	Date _____																																																																						
☐ Battery Replacement																																																																							
☐ Dry Gas Regulator Replacement																																																																							
☐ Breath Tube Replacement																																																																							
☐ Other _____																																																																							
Calibration Adjustment By _____ Barometric Pressure Gauge _____ ID # _____ <table border="1"><thead><tr><th>Simulator</th><th>Serial #</th><th>Lot #</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> ☐ Post Calibration Adjustment Stability Checks <table border="1"><thead><tr><th>Simulator</th><th>Serial #</th><th>Lot #</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> Notes/Suggested Service: <u>Simulators had no issue attaching to the port. SLH 8/14/2025</u> <u>*9/2/25 Tech Review-Added correct spelling of Agency name to Suwannee.SLH</u> <u>9/19/25 Tech Review- Added a diagnostic check as attachment to demonstrate the name of agency was Sheriffs Office instead of Sheriffs Department and updated in the name to Office in the Agency name at the top of the IPS. SLH</u>	Simulator	Serial #	Lot #	Expiration	0.000		N/A	N/A	0.040				0.100				0.200				0.300				0.080 DGS	N/A			Simulator	Serial #	Lot #	Expiration	0.050				0.080				0.200				0.080 DGS	N/A			Department Inspection By <u>SLH</u> Barometric Pressure ID# <u>28662</u> Gauge <u>1013</u> Instrument <u>1011</u> Mouth Alcohol Solution Lot # <u>2025-A</u> Acetone Stock Solution Lot # <u>2024-B</u> <table border="1"><thead><tr><th>Simulator</th><th>Serial Number</th></tr></thead><tbody><tr><td>0.000</td><td>MP6289</td></tr><tr><td>Interferent</td><td>MP5087</td></tr><tr><td>0.050</td><td>MP6291</td></tr><tr><td>0.080</td><td>MP5089</td></tr><tr><td>0.200</td><td>MP5090</td></tr></tbody></table> Attachments <table border="1"><tbody><tr><td>☒ Form 41</td><td>☐ Post-Stability Checks</td></tr><tr><td>☒ Stability Checks</td><td>☐ Flow Calibration</td></tr><tr><td>☒ Calibration Certificate</td><td>☒ Form 40</td></tr><tr><td>☐ Calibration Adjustment</td><td>☒ Other <u>diagnostic</u></td></tr></tbody></table> ☒ 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 <table border="1"><tbody><tr><td>Taylor Gutschow Digitally signed by Taylor Gutschow Date: 2025.09.19 14:57:48 -04'00'</td><td>Shayla Platt Digitally signed by Shayla Platt Date: 2025.09.23 16:12:10 -04'00'</td></tr></tbody></table> Tech Review / Date _____ Admin Review / Date _____	Simulator	Serial Number	0.000	MP6289	Interferent	MP5087	0.050	MP6291	0.080	MP5089	0.200	MP5090	☒ Form 41	☐ Post-Stability Checks	☒ Stability Checks	☐ Flow Calibration	☒ Calibration Certificate	☒ Form 40	☐ Calibration Adjustment	☒ Other <u>diagnostic</u>	Taylor Gutschow Digitally signed by Taylor Gutschow Date: 2025.09.19 14:57:48 -04'00'	Shayla Platt Digitally signed by Shayla Platt Date: 2025.09.23 16:12:10 -04'00'
Simulator	Serial #	Lot #	Expiration																																																																				
0.000		N/A	N/A																																																																				
0.040																																																																							
0.100																																																																							
0.200																																																																							
0.300																																																																							
0.080 DGS	N/A																																																																						
Simulator	Serial #	Lot #	Expiration																																																																				
0.050																																																																							
0.080																																																																							
0.200																																																																							
0.080 DGS	N/A																																																																						
Simulator	Serial Number																																																																						
0.000	MP6289																																																																						
Interferent	MP5087																																																																						
0.050	MP6291																																																																						
0.080	MP5089																																																																						
0.200	MP5090																																																																						
☒ Form 41	☐ Post-Stability Checks																																																																						
☒ Stability Checks	☐ Flow Calibration																																																																						
☒ Calibration Certificate	☒ Form 40																																																																						
☐ Calibration Adjustment	☒ Other <u>diagnostic</u>																																																																						
Taylor Gutschow Digitally signed by Taylor Gutschow Date: 2025.09.19 14:57:48 -04'00'	Shayla Platt Digitally signed by Shayla Platt Date: 2025.09.23 16:12:10 -04'00'																																																																						

Florida Department of Law Enforcement

Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: SUWANNEE COUNTY SD

Time of Inspection: 07:31

Date of Inspection: 08/12/2025

Serial Number: 80-007382

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: _____

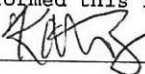
Remarks:

BYPASSED AI TO OPERATE INSTRUMENT.COMPLIANCE NOT DETERMINED

KTS 8/12/25

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.



KATIE T SPEARIN

Signature and Printed Name

08/12/2025
Date

SUWANNEE COUNTY SD

Intoxilyzer - Alcohol Analyzer

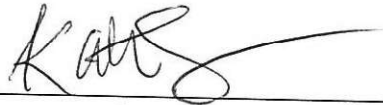
Model 8000

SN 80-007382

08/12/2025

Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	07:37
Control Test	0.079	07:37
Air Blank	0.000	07:38
Control Test	0.079	07:38
Air Blank	0.000	07:38
Control Test	0.079	07:39
Air Blank	0.000	07:39
Control Test Stats		
Average	0.0790	
Std Dev	0.0000	
Rel Std Dev(%)	0.0000	



Operator's Signature

DGS

SUWANNEE COUNTY SD
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-007382
08/12/2025
Software: 8100.27

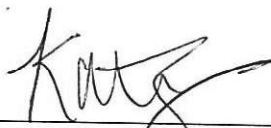
Test	g/210L	Time
Air Blank	0.000	07:41
Control Test	0.050	07:41
Air Blank	0.000	07:42
Control Test	0.050	07:42
Air Blank	0.000	07:43
Control Test	0.049	07:44
Air Blank	0.000	07:44
Control Test Stats		
Average	0.0497	
Std Dev	0.0006	
Rel Std Dev(%)	1.1625	



Operator's Signature

SUWANNEE COUNTY SD
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-007382
08/12/2025
Software: 8100.27

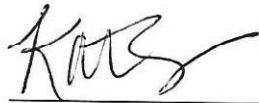
Test	g/210L	Time
Air Blank	0.000	07:46
Control Test	0.079	07:47
Air Blank	0.000	07:48
Control Test	0.078	07:48
Air Blank	0.000	07:49
Control Test	0.079	07:50
Air Blank	0.000	07:50
Control Test Stats		
Average	0.0787	
Std Dev	0.0006	
Rel Std Dev(%)	0.7339	



Operator's Signature

SUWANNEE COUNTY SD
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-007382
08/12/2025
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	07:52
Control Test	0.200	07:52
Air Blank	0.000	07:53
Control Test	0.198	07:54
Air Blank	0.000	07:54
Control Test	0.197	07:55
Air Blank	0.000	07:56
Control Test Stats		
Average	0.1983	
Std Dev	0.0015	
Rel Std Dev(%)	0.7702	



Operator's Signature

Florida Department of Law Enforcement

Alcohol Testing Program

DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: SUWANNEE COUNTY SD

Serial Number: 80-007382

Time of Inspection: 13:18

Date of Inspection: 08/14/2025

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#: 202406K Exp: 06/19/2026	0.08g/210L Test (g/210L) Lot#: 202406L Exp: 06/19/2026	0.20g/210L Test (g/210L) Lot#: 202406N Exp: 06/20/2026	0.08 g/210L Dry Gas Std Test (g/210L) Lot#: AG429602 Exp: 10/22/2026
0.000	0.050	0.078	0.197	0.078
0.000	0.049	0.078	0.197	0.078
0.000	0.049	0.079	0.197	0.078
0.000	0.049	0.079	0.198	0.078
0.000	0.050	0.079	0.198	0.078
0.000	0.050	0.078	0.198	0.078
0.000	0.050	0.079	0.198	0.078
0.000	0.050	0.079	0.198	0.078
0.000	0.050	0.079	0.198	0.078
0.000	0.050	0.079	0.198	0.078
0.000	0.050	0.079	0.198	0.078

Standard Deviations	0.0004	0.0004	0.0004	0.0000
---------------------	--------	--------	--------	--------

Average Standard Deviation of 0.05, 0.08 and 0.20 g/210L Tests: 0.0003

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.



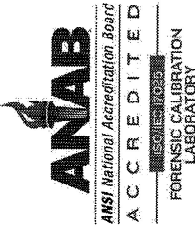
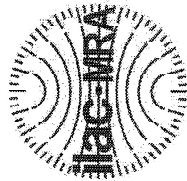
LEANDRA HIGGINBOTHAM

Signature and Printed Name

08/14/2025

Date

noted - external printer
not operational. *Sub*
8/15/25



Calibration Certificate

Florida Department of Law Enforcement
Alcohol Testing Program
2331 Phillips Road
Tallahassee, FL 32308

This is to certify the calibration of Intoxilyzer 8000 serial number 80-007382, manufactured by CMI, Inc. was calibrated in accordance with FDLE/ATP Form 36 - Department Inspection Procedures - Intoxilyzer 8000.

Serial Number:	<u>80-007382</u>	UNCERTAINTY* $\pm$
Owning Agency:	<u>SUWANNEE COUNTY SD</u>	0.050 g/210 L 0.004
Calibration Date:	<u>08/14/2025</u>	0.080 g/210 L 0.004
Calibration Time:	<u>13:18</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.

FDLE/ATP Form 69 October 2024

Issuing Authority: Alcohol Testing Program

08/14/2025

Date

LEANDRA HIGGINBOTHAM,

Department Inspector

Service • Integrity • Respect • Quality

INTOXILYZER 8000
Instrument Initialization
10:28 09/19/2025

SUWANNEE COUNTY SO *
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-007382
09/19/2025
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

80-007382 9/19/25 sut

Performed Diagnostic to
show name of agency was
updated correctly in the
instrument settings. sut



INSTRUMENT PROCESSING SHEET

Agency Suwannee County SOS/N 80-007382Florida Department of
Law EnforcementDate In 3/11/2025DI Completion Date N/A☐ Ship ☐ P/U ☐ H/D ☒ CMI ☐ EE

Intake By <u>ALL</u> Date <u>3/11/2025</u>		Quality Checks By <u>SLH</u> Date <u>03/26/2025</u>		Flow Calibration By _____ Date _____																																																															
☒ Annual ☐ Registration ☒ Return from CMI / EE Visual Inspection: ☒ Case ☒ Handle ☒ Keyboard ☒ Dry Gas Shelf ☒ Feet ☒ Breath Tube ☒ Ports ☒ Screws Tight Other Equipment/ Accessories: ☐ Power cord ☐ Printer Cable ☒ Static Bag ☐ 12V DC Cable Notes: _____ _____ _____ _____ _____ _____ _____ _____ _____ _____		☒ Breath Tube Screen ☒ Replace External O-Rings ☐ Instrument Set Up Verified ☐ R-Value _____ ☐ Flow Verification (L/s) Flow Column # _____ 32 mm _____ (.139 - .169) 36 mm _____ (.156 - .190) 53 mm _____ (.228 - .278) 103 mm _____ (.447 - .547) ☒ Barometric Pressure Check Gauge ID # <u>28427</u> ☐ Stability Checks <table border="1" style="width:100%"><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		Flow Column # _____ ☐ 5L/min – 17mm ☐ 15L/min – 53mm ☐ 30L/min – 103mm ☐ R-Value _____ ☐ Post Calibration Verification (L/s) Flow Column # _____ 32 mm _____ (.139 - .169) 36 mm _____ (.156 - .190) 53 mm _____ (.228 - .278) 103 mm _____ (.447 - .547) Maintenance By _____ Date _____ ☐ Battery Replacement ☐ Dry Gas Regulator Replacement ☐ Breath Tube Replacement ☐ Other _____ _____ _____ _____ _____																																																
Simulator	Serial #	Lot #/Exp																																																																	
0.050																																																																			
0.080																																																																			
0.200																																																																			
0.080 DGS	N/A																																																																		
Calibration Adjustment By _____				Department Inspection By _____																																																															
Barometric Pressure Gauge _____ ID # _____ <table border="1" style="width:100%"><thead><tr><th>Simulator</th><th>Serial #</th><th>Lot #</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> ☐ Post Calibration Adjustment Stability Checks <table border="1" style="width:100%"><thead><tr><th>Simulator</th><th>Serial #</th><th>Lot #</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 #	Lot #	Expiration	0.000		N/A	N/A	0.040				0.100				0.200				0.300				0.080 DGS	N/A			Simulator	Serial #	Lot #	Expiration	0.050				0.080				0.200				0.080 DGS	N/A			Barometric Pressure ID# _____ Gauge _____ Instrument _____ Mouth Alcohol Solution Lot # _____ Acetone Stock Solution Lot # _____ <table border="1" style="width:100%"><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> Attachments <table style="width:100%"><tr><td>☐ Form 41 ☐ Stability Checks ☐ Calibration Certificate ☐ Calibration Adjustment</td><td>☐ Post-Stability Checks ☐ Flow Calibration ☐ Form 40 ☒ Other <u>Form 51</u></td></tr></table>		Simulator	Serial Number	0.000		Interferent		0.050		0.080		0.200		☐ Form 41 ☐ Stability Checks ☐ Calibration Certificate ☐ Calibration Adjustment	☐ Post-Stability Checks ☐ Flow Calibration ☐ Form 40 ☒ Other <u>Form 51</u>
Simulator	Serial #	Lot #	Expiration																																																																
0.000		N/A	N/A																																																																
0.040																																																																			
0.100																																																																			
0.200																																																																			
0.300																																																																			
0.080 DGS	N/A																																																																		
Simulator	Serial #	Lot #	Expiration																																																																
0.050																																																																			
0.080																																																																			
0.200																																																																			
0.080 DGS	N/A																																																																		
Simulator	Serial Number																																																																		
0.000																																																																			
Interferent																																																																			
0.050																																																																			
0.080																																																																			
0.200																																																																			
☐ Form 41 ☐ Stability Checks ☐ Calibration Certificate ☐ Calibration Adjustment	☐ Post-Stability Checks ☐ Flow Calibration ☐ Form 40 ☒ Other <u>Form 51</u>																																																																		
Notes/Suggested Service: <u>Bypass AI-but not able to upload due to instrument not able to initialize subsequent to an update of Level 3 password (PW) after being reset at repair. I updated the PW to the evidentiary Level 3 PW within the Setup menu. Unable to log onto Level 3 after update. SLH 3/27/2025</u> <u>Form 40 not able to be acquired due to instrument not initializing. SLH 4/1/2025</u>				☐ 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 Taylor Gutschow Digitally signed by Taylor Gutschow Date: 2025.04.03 13:17:18 -0400 Shayla Platt Digitally signed by Shayla Platt Date: 2025.04.03 14:57:57 -0400 Tech Review / Date _____ Admin Review / Date _____																																																															

Return Material Authorization

Ship to: ☒ CMI, Inc.

☐ Enforcement Electronics

Shipment to repair facility authorized by: Talena Carver on 11/13/2024

Items Returned: Instrument ☒ Supplies ☐ Other ☐ Describe: _____

Instrument Model: Intoxilyzer 8000 Serial Number: 80-007382

Bill To Address:

Suwannee County SO

Attn: Talena Carver

Ship to Address:

FDLE Off-Site Mail Facility

c/o Florida Department of Law Enforcement

Alcohol Testing Program

813 B Lake Bradford Rd

Tallahassee, FL 32304

Reason for Return:

Instrument will not turn on. Instrument returned from CMI. Instrument needs to be uploaded.

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: Talena Carver

Phone #: 386-362-2222 Email: talena.carver@suwanneesherriff.com

ATP Contact Name: LeAndra Higginbotham ATP Email: leandrahigginbotham@fdle.state.fl.us