

Alcohol Testing Program - Instrument Processing Sheet

Agency: Collier County Sheriff's Office Instrument Serial Number: 80-001651

Date In: 4/29/2026 DI Completion Date: 5/18/2026 ☐ Ship ☒ P/U ☐ H/D ☐ CMI ☐ EE

Intake By: <u>TDG</u> Date: <u>4/30/2026</u>		Quality Checks By: <u>TDG</u> Date: <u>5/18/2026</u>		Flow Adjustment By: _____																															
☒ Annual ☒ Dropped Off ☐ Registration ☐ Return from CMI / EE ☐ Training Instrument 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: No box.		☒ Breath Tube Screen ☒ Replace External O-Rings ☒ Instrument Set Up Verified ☒ R-Value: <u>210</u> ☒ Flow Verification (L/s) Flow Column #: <u>ATP104</u> 32 mm <u>0.160</u> (.139-.169) 36 mm <u>0.175</u> (.156-.190) 53 mm <u>0.242</u> (.228-.278) 103 mm <u>0.500</u> (.447-.547) ☒ Barometric Pressure Check Gauge ID #: <u>33363</u> Gauge: <u>1020</u> Instrument: <u>1019</u> ☒ Stability Checks		Flow Column #: _____ ☐ 5L/min – 17mm ☐ 15L/min – 53mm ☐ 30L/min – 103mm ☐ R-Value: _____ ☐ Post Adjustment Verification (L/S) Flow Column #: _____ 32 mm _____ (.139-.169) 36 mm _____ (.156-.190) 53 mm _____ (.228-.278) 103 mm _____ (.447-.547)																															
						<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Simulator</th> <th style="width: 20%;">Serial #</th> <th style="width: 25%;">Lot#/Exp</th> <th style="width: 40%;">Maintenance By: _____ Date: _____</th> </tr> </thead> <tbody> <tr> <td rowspan="2">0.050</td> <td rowspan="2">MP6286</td> <td>202406K</td> <td>☐ Battery Replacement</td> </tr> <tr> <td>6/19/2026</td> <td>☐ Dry Gas Regulator Replacement</td> </tr> <tr> <td rowspan="2">0.080</td> <td rowspan="2">MP6287</td> <td>202603B</td> <td>☐ Tank Sensor Tare</td> </tr> <tr> <td>3/3/2028</td> <td>☐ Breath Tube Replacement</td> </tr> <tr> <td rowspan="2">0.200</td> <td rowspan="2">MP6288</td> <td>202406N</td> <td>☐ Other: _____</td> </tr> <tr> <td>6/20/2026</td> <td></td> </tr> <tr> <td rowspan="2">0.080 DGS</td> <td rowspan="2">N/A</td> <td>AG526603</td> <td></td> </tr> <tr> <td>9/23/2027</td> <td></td> </tr> </tbody> </table>		Simulator	Serial #	Lot#/Exp	Maintenance By: _____ Date: _____	0.050	MP6286	202406K	☐ Battery Replacement	6/19/2026	☐ Dry Gas Regulator Replacement	0.080	MP6287	202603B	☐ Tank Sensor Tare	3/3/2028	☐ Breath Tube Replacement	0.200	MP6288	202406N	☐ Other: _____	6/20/2026		0.080 DGS	N/A	AG526603		9/23/2027	
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Optical Bench Adjustment By: _____		Department Inspection By: <u>TDG</u>																																	
Barometric Pressure Gauge: _____ ID#: _____		Barometric Pressure ID#: <u>33363</u>																																	
Simulator	Serial #	Lot #	Expiration	Gauge: <u>1020</u> Instrument: <u>1019</u> Mouth Alcohol Solution Lot #: <u>2025-D</u> Exp: <u>9/25/2027</u> Acetone Stock Solution Lot #: <u>2024-B</u> Exp: <u>7/19/2026</u>																															
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0.050				☒ Form 41 ☒ Stability Checks ☒ Calibration Certificate ☐ Optical Bench Adjustment ☐ Post-Stability Checks ☐ Flow Adjustment ☐ Form 40 ☐ Other: _____																															
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Gauge ID #: _____ Gauge: _____ Instrument: _____																																			
Notes/Suggested Service:				☒ 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																															
				LeAndra Higginbotham Digitally signed by LeAndra Higginbotham Date: 2026.05.20 10:10:34 -04'00'																															
				Kaitlyn Spearin Digitally signed by Kaitlyn Spearin Date: 2026.05.21 13:05:31 -04'00'																															
				Tech Review Admin Review																															

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	DGS 0.08g/210L 0.077 to 0.083 ≤0.003 of Wet																																																																																																																																																
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Florida Department of Law Enforcement Alcohol Testing Program

DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: COLLIER COUNTY SO
Time of Inspection: 14:20

Date of Inspection: 05/18/2026

Serial Number: 80-001651
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#:202603B Exp: 03/03/2028	0.20g/210L Test (g/210L) Lot#:202406N Exp: 06/20/2026	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:AG526603 Exp: 09/23/2027
0.000	0.048	0.079	0.200	0.079
0.000	0.049	0.078	0.200	0.079
0.000	0.048	0.078	0.201	0.079
0.000	0.048	0.078	0.200	0.079
0.000	0.048	0.078	0.200	0.079
0.000	0.048	0.078	0.199	0.079
0.000	0.048	0.078	0.199	0.079
0.000	0.048	0.078	0.200	0.080
0.000	0.048	0.077	0.200	0.079
0.000	0.048	0.078	0.199	0.079

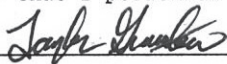
Standard Deviations	0.00003	0.00004	0.00006	0.00003
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Average Standard Deviation of 0.05, 0.08 and 0.20 g/210L Tests: 0.0004 Number of Simulators Used: 5

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.



TAYLOR D GUTSCHOW

Signature and Printed Name

05/18/2026
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 80-001651, manufactured by CMI, Inc. was calibrated in accordance with FDLE/ATP Form 36 - Department Inspection Procedures - Intoxilyzer 8000.

Serial Number:	<u>80-001651</u>	UNCERTAINTY* $\pm$	
Owning Agency:	<u>COLLIER COUNTY SO</u>	0.050 g/ 210 L	0.004
Calibration Date:	<u>05/18/2026</u>	0.080 g/ 210 L	0.004
Calibration Time:	<u>14:20</u>	0.200 g/ 210 L	0.008
		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.

05/18/2026

Date

**Taylor
Gutschow**

Digitally signed by Taylor
Gutschow
Date: 2026.05.18 14:53:41
-04'00'

**TAYLOR D GUTSCHOW,
Department Inspector**