

Instrument Processing Sheet

Agency: FL HIGHWAY PATROL Instrument Serial Number: 80-001123
 Date In: 10/30/2025 DI Completion Date: 11/18/2025 Ship P/U H/D CMI EE

Intake By: <u>WKP</u> Date: <u>10/30/25</u>	Quality Checks By: <u>WKP</u> Date: <u>11/14/2025</u>	Flow Adjustment By: _____ Date: _____
<input checked="" type="checkbox"/> Annual <input type="checkbox"/> Registration <input checked="" type="checkbox"/> Return from CMI / EE <input type="checkbox"/> Return unworked <input type="checkbox"/> Training 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	<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>221</u> <input checked="" type="checkbox"/> Flow Verification (L/s) Flow Column #: <u>ATP 103</u> 32 mm <u>0.160</u> (.139-.169) 36 mm <u>0.175</u> (.156-.190) 53 mm <u>0.250</u> (.228-.278) 103 mm <u>0.523</u> (.447-.547) <input checked="" type="checkbox"/> Barometric Pressure Check Gauge ID #: <u>28427</u> Gauge: <u>1018.9</u> Instrument: <u>1018</u>	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 Adjustment Verification (L/S) Flow Column #: _____ 32 mm _____ (.139-.169) 36 mm _____ (.156-.190) 53 mm _____ (.228-.278) 103 mm _____ (.447-.547)

Notes:	<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 rowspan="2">0.050</td> <td rowspan="2">MP6291</td> <td>202406K</td> </tr> <tr> <td>06/19/2026</td> </tr> <tr> <td rowspan="2">0.080</td> <td rowspan="2">MP6292</td> <td>202406L</td> </tr> <tr> <td>06/19/2026</td> </tr> <tr> <td rowspan="2">0.200</td> <td rowspan="2">MP6293</td> <td>202406N</td> </tr> <tr> <td>06/20/2026</td> </tr> <tr> <td rowspan="2">0.080 DGS</td> <td rowspan="2">N/A</td> <td>AG510701</td> </tr> <tr> <td>04/17/2027</td> </tr> </tbody> </table>	Simulator	Serial #	Lot#/Exp	0.050	MP6291	202406K	06/19/2026	0.080	MP6292	202406L	06/19/2026	0.200	MP6293	202406N	06/20/2026	0.080 DGS	N/A	AG510701	04/17/2027	Maintenance By: _____ Date: _____ <input type="checkbox"/> Battery Replacement <input type="checkbox"/> Dry Gas Regulator Replacement and Tank Sensor Tare <input type="checkbox"/> Breath Tube Replacement <input type="checkbox"/> Other: _____
Simulator	Serial #	Lot#/Exp																			
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0.200	MP6293	202406N																			
		06/20/2026																			
0.080 DGS	N/A	AG510701																			
		04/17/2027																			

Optical Bench Adjustment By: _____	Department Inspection By: <u>SLH</u>																																								
Barometric Pressure Gauge: _____ ID#: _____	Barometric Pressure ID#: <u>28427</u>																																								
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Barometric Pressure Gauge: _____ ID#: _____																																									

Notes/Suggested Service:	<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
	Digitally signed by Shayla Platt Date: 2025.12.12 10:14:34 -05'00'
	Digitally signed by Taylor Gutschow Date: 2025.11.25 23:39:41 -05'00'
	Taylor Gutschow Shayla Platt Tech Review Admin Review

Stability Checks

0.05g/210L	0.08g/210L	0.20g/210L	DGS 0.08g/210L																																																																																																
0.047 to 0.053	0.077 to 0.083	0.194 to 0.206	0.077 to 0.083 ≤0.003 of Wet																																																																																																
✓	✓	✓	✓ ✓ ✓																																																																																																
<i>Performed Root Case Analysis</i>	<i>Performed Root Case Analysis</i>	<i>Performed Root Case Analysis</i>	<i>Performed Root Case Analysis</i>																																																																																																
<div style="text-align: center; border: 1px solid black; width: 100px; height: 15px; margin: 0 auto 10px auto;"> .063 </div> <p style="font-size: 8px;">FHP TROOP D ORLANDO Intoxilyzer - Alcohol Analyzer Model 8000 SN 80-001123 11/14/2025 Software: 8100.27</p> <table style="font-size: 8px; width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Test</th> <th style="text-align: left;">g/210L</th> <th style="text-align: left;">Time</th> </tr> </thead> <tbody> <tr><td>Air Blank</td><td>0.000</td><td>10:53</td></tr> <tr><td>Control Test</td><td>0.048</td><td>10:53</td></tr> <tr><td>Air Blank</td><td>0.000</td><td>10:54</td></tr> <tr><td>Control Test</td><td>0.049</td><td>10:55</td></tr> <tr><td>Air Blank</td><td>0.000</td><td>10:55</td></tr> <tr><td>Control Test</td><td>0.049</td><td>10:56</td></tr> <tr><td>Air Blank</td><td>0.000</td><td>10:56</td></tr> </tbody> </table> <p style="font-size: 8px;">Control Test Stats Average 0.0487 Std Dev 0.0016 Rel Std Dev(%) 1.1863</p> <div style="text-align: center; margin-top: 20px;"> <hr style="width: 100%; border: 0; border-top: 1px dashed black;"/> Operator's Signature </div>	Test	g/210L	Time	Air Blank	0.000	10:53	Control Test	0.048	10:53	Air Blank	0.000	10:54	Control Test	0.049	10:55	Air Blank	0.000	10:55	Control Test	0.049	10:56	Air Blank	0.000	10:56	<p style="font-size: 8px;">FHP TROOP D ORLANDO Intoxilyzer - Alcohol Analyzer Model 8000 SN 80-001123 11/14/2025 Software: 8100.27</p> <table style="font-size: 8px; width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Test</th> <th style="text-align: left;">g/210L</th> <th style="text-align: left;">Time</th> </tr> </thead> <tbody> <tr><td>Air Blank</td><td>0.000</td><td>10:59</td></tr> <tr><td>Control Test</td><td>0.079</td><td>11:00</td></tr> <tr><td>Air Blank</td><td>0.000</td><td>11:01</td></tr> <tr><td>Control Test</td><td>0.079</td><td>11:01</td></tr> <tr><td>Air Blank</td><td>0.000</td><td>11:02</td></tr> <tr><td>Control Test</td><td>0.079</td><td>11:03</td></tr> <tr><td>Air Blank</td><td>0.000</td><td>11:03</td></tr> </tbody> </table> <p style="font-size: 8px;">Control Test Stats Average 0.0790 Std Dev 0.0000 Rel Std Dev(%) 0.0000</p> <div style="text-align: center; margin-top: 20px;"> <hr style="width: 100%; border: 0; border-top: 1px dashed black;"/> Operator's Signature </div>	Test	g/210L	Time	Air Blank	0.000	10:59	Control Test	0.079	11:00	Air Blank	0.000	11:01	Control Test	0.079	11:01	Air Blank	0.000	11:02	Control Test	0.079	11:03	Air Blank	0.000	11:03	<p style="font-size: 8px;">FHP TROOP D ORLANDO Intoxilyzer - Alcohol Analyzer Model 8000 SN 80-001123 11/14/2025 Software: 8100.27</p> <table style="font-size: 8px; width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Test</th> <th style="text-align: left;">g/210L</th> <th style="text-align: left;">Time</th> </tr> </thead> <tbody> <tr><td>Air Blank</td><td>0.000</td><td>11:05</td></tr> <tr><td>Control Test</td><td>0.202</td><td>11:05</td></tr> <tr><td>Air Blank</td><td>0.000</td><td>11:06</td></tr> <tr><td>Control Test</td><td>0.201</td><td>11:07</td></tr> <tr><td>Air Blank</td><td>0.000</td><td>11:07</td></tr> <tr><td>Control Test</td><td>0.202</td><td>11:08</td></tr> <tr><td>Air Blank</td><td>0.000</td><td>11:08</td></tr> </tbody> </table> <p style="font-size: 8px;">Control Test Stats Average 0.2017 Std Dev 0.0006 Rel Std Dev(%) 0.2863</p> <div style="text-align: center; margin-top: 20px;"> <hr style="width: 100%; border: 0; border-top: 1px dashed black;"/> Operator's Signature </div>	Test	g/210L	Time	Air Blank	0.000	11:05	Control Test	0.202	11:05	Air Blank	0.000	11:06	Control Test	0.201	11:07	Air Blank	0.000	11:07	Control Test	0.202	11:08	Air Blank	0.000	11:08	<p style="font-size: 8px;">FHP TROOP D ORLANDO Intoxilyzer - Alcohol Analyzer Model 8000 SN 80-001123 11/14/2025 Software: 8100.27</p> <table style="font-size: 8px; width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Test</th> <th style="text-align: left;">g/210L</th> <th style="text-align: left;">Time</th> </tr> </thead> <tbody> <tr><td>Air Blank</td><td>0.000</td><td>11:11</td></tr> <tr><td>Control Test</td><td>0.079</td><td>11:11</td></tr> <tr><td>Air Blank</td><td>0.000</td><td>11:12</td></tr> <tr><td>Control Test</td><td>0.079</td><td>11:12</td></tr> <tr><td>Air Blank</td><td>0.000</td><td>11:13</td></tr> <tr><td>Control Test</td><td>0.079</td><td>11:13</td></tr> <tr><td>Air Blank</td><td>0.000</td><td>11:14</td></tr> </tbody> </table> <p style="font-size: 8px;">Control Test Stats Average 0.0790 Std Dev 0.0000 Rel Std Dev(%) 0.0000</p> <div style="text-align: center; margin-top: 20px;"> <hr style="width: 100%; border: 0; border-top: 1px dashed black;"/> Operator's Signature </div>	Test	g/210L	Time	Air Blank	0.000	11:11	Control Test	0.079	11:11	Air Blank	0.000	11:12	Control Test	0.079	11:12	Air Blank	0.000	11:13	Control Test	0.079	11:13	Air Blank	0.000	11:14
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Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: FHP TROOP D ORLANDO
Time of Inspection: 09:56

Date of Inspection: 11/18/2025

Serial Number: 80-001123
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

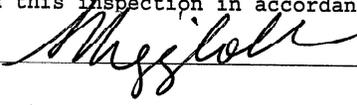
Alcohol Free Test (g/210L)	0.05g/210L Test (g/210L) Lot#: _____ Exp: _____	0.08g/210L Test (g/210L) Lot#: _____ Exp: _____	0.20g/210L Test (g/210L) Lot#: _____ Exp: _____	0.08 g/210L Dry Gas Std Test (g/210L) Lot#: _____ Exp: _____

Number of Simulators Used: _____

Remarks:
VERIFY FORMS LOADED POST REPAIR.

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.



LEANDRA HIGGINBOTHAM

Signature and Printed Name

11/18/2025

Date

Florida Department of Law Enforcement Alcohol Testing Program

DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: FHP TROOP D ORLANDO
Time of Inspection: 15:48

Date of Inspection: 11/18/2025

Serial Number: 80-001123
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#:AG510701 Exp: 04/17/2027
0.000	0.048	0.078	0.198	0.079
0.000	0.048	0.078	0.198	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	0.199	0.078
0.000	0.048	0.078	0.198	0.079
0.000	0.048	0.078	0.198	0.079
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0.000	0.048	0.078	0.198	0.079
0.000	0.048	0.078	0.198	0.079

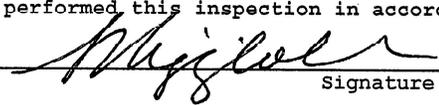
Standard Deviations	0.0000	0.0000	0.0004	0.0003
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Average Standard Deviation of 0.05, 0.08 and 0.20 g/210L Tests: 0.0001 Number of Simulators Used: 5

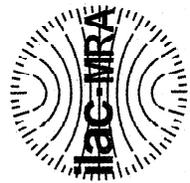
Remarks:

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

11/18/2025
 Date



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

Calibration Certificate

This is to certify the calibration of Intoxilyzer 8000 serial number 80-001123, manufactured by CMI, Inc. was calibrated in accordance with FDLE/ATP Form 36 - Department Inspection Procedures - Intoxilyzer 8000.

Serial Number:	<u>80-001123</u>	UNCERTAINTY* ±	
Owning Agency:	<u>FHP TROOP D ORLANDO</u>	0.050 g/ 210 L	0.004
Calibration Date:	<u>11/18/2025</u>	0.080 g/ 210 L	0.004
Calibration Time:	<u>15:48</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.

11/18/2025 Date
LEANDRA HIGGINBOTHAM,
 Department Inspector

FDLE/ATP Form 69 October 2024
 Issuing Authority: Alcohol Testing Program

Service • Integrity • Respect • Quality



INSTRUMENT PROCESSING SHEET

Agency FHP

S/N 80-001123

Florida Department of Law Enforcement

Date In 5/22/2025

DI Completion Date not completed

Ship

P/U

H/D

CMI

EE

Intake By <u>SLH</u> Date <u>5/27/2025</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 checked="" type="checkbox"/> Static Bag <input type="checkbox"/> 12V DC Cable Notes: <u>Scanned note indicating 'Agency.Check'error.SLH</u>	Quality Checks By <u>WKP</u> Date <u>5/29/2025</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>220</u> <input checked="" type="checkbox"/> Flow Verification (L/s) Flow Column # <u>ATP-105</u> 32 mm <u>0.160</u> (.139 - .169) 36 mm <u>0.175</u> (.156 - .190) 53 mm <u>0.250</u> (.228 - .278) 103 mm <u>0.527</u> (.447 - .547) <input checked="" type="checkbox"/> Barometric Pressure Check Gauge ID # <u>28421</u> <input checked="" type="checkbox"/> Stability Checks	Flow Calibration By _____ Date _____ 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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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> <input type="checkbox"/> 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>	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>2025A</u> Acetone Stock Solution Lot # <u>2024B</u> <table border="1"> <thead> <tr> <th>Simulator</th> <th>Serial Number</th> </tr> </thead> <tbody> <tr> <td>0.000</td> <td>MP5086</td> </tr> <tr> <td>Interferent</td> <td>MP5087</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 <input checked="" type="checkbox"/> Form 41 <input checked="" type="checkbox"/> Stability Checks <input type="checkbox"/> Calibration Certificate <input type="checkbox"/> Calibration Adjustment <input type="checkbox"/> Post-Stability Checks <input type="checkbox"/> Flow Calibration <input checked="" type="checkbox"/> Form 40 (x4) <input checked="" type="checkbox"/> Other <u>Form 51 & note</u>	Simulator	Serial Number	0.000	MP5086	Interferent	MP5087	0.050		0.080		0.200	
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Notes/Suggested Service: Admin: Coordinated remote download of forms with CMI on 6/3 and 6/5/25, but unsuccessful. Advised to send into CMI. There was also an error reported by the agency to address. SLH 7/2/2025	<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 checked="" type="checkbox"/> Remain Out of Evidentiary Use <input type="checkbox"/> Conduct an Agency Inspection Before Evidentiary Use
Phil Nicodemo <small>Digitally signed by Phil Nicodemo Date: 2025.06.26 12:09:22 -04'00'</small>	Taylor Gutschow <small>Digitally signed by Taylor Gutschow Date: 2025.07.02 14:58:55 -04'00'</small>
Tech Review / Date	Admin Review / Date

4/11/2025

80-001123– Intoxilyzer 8000

GIVING “AGENCY.CHECK” ERROR
DESPITE MOST RECENT AGENCY
INSPECTION BEING COMPLETE.

PLEASE RETURN TO:

SERGEANT MAYKOLL SOUZA

11059 INTERNATIONAL DRIVE

ORLANDO, FL 32821

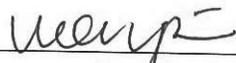
PHONE: 954-263-3252

EMAIL: MAYKOLLSOUZA@FLHSMV.GOV

0.05g/210L

FHP TROOP D ORLANDO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-001123
05/29/2025
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	12:58
Control Test	0.049	12:59
Air Blank	0.000	12:59
Control Test	0.049	13:00
Air Blank	0.000	13:01
Control Test	0.049	13:01
Air Blank	0.000	13:02
Control Test Stats		
Average	0.0490	
Std Dev	0.0000	
Rel Std Dev(%)	0.0000	



Operator's Signature

0.08g/210L
WET

FHP TROOP D ORLANDO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-001123
05/29/2025
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	13:04
Control Test	0.079	13:05
Air Blank	0.000	13:06
Control Test	0.079	13:06
Air Blank	0.000	13:07
Control Test	0.079	13:08
Air Blank	0.000	13:08
Control Test Stats		
Average	0.0790	
Std Dev	0.0000	
Rel Std Dev(%)	0.0000	

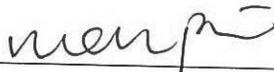


Operator's Signature

0.200g/210L

FHP TROOP D ORLANDO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-001123
05/29/2025
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	13:13
Control Test	0.199	13:14
Air Blank	0.000	13:15
Control Test	0.199	13:15
Air Blank	0.000	13:16
Control Test	0.199	13:17
Air Blank	0.000	13:17
Control Test Stats		
Average	0.1990	
Std Dev	0.0000	
Rel Std Dev(%)	0.0000	



Operator's Signature

0.08g/210L
Dry Gas
Standard

FHP TROOP D ORLANDO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-001123
05/29/2025
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	13:20
Control Test	0.080	13:20
Air Blank	0.000	13:21
Control Test	0.080	13:21
Air Blank	0.000	13:22
Control Test	0.080	13:22
Air Blank	0.000	13:22
Control Test Stats		
Average	0.0800	
Std Dev	0.0000	
Rel Std Dev(%)	0.0000	



Operator's Signature

Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: FHP TROOP D ORLANDO

Serial Number: 80-001123

Time of Inspection: 12:36

Date of Inspection: 05/29/2025

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: 'did not enter remark of 'bypass' AI to operate instrument, compliance not determined".
not determined WKP 05/29/2025

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.

Wen-Chi K Pierson

WEN-CHI K PIERSON

Signature and Printed Name

05/29/2025

Date

Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: FHP TROOP D ORLANDO

Serial Number: 80-001123

Time of Inspection: 12:37

Date of Inspection: 05/29/2025

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:

BYPASS AI TO OPERATE INSTRUMENT COMPLIANCE NOT DETERMINED

WKP 6/10/2025

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.

Wen-Chi K Pierson

WEN-CHI K PIERSON

Signature and Printed Name

05/29/2025

Date

Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: FHP TROOP D ORLANDO

Serial Number: 80-001123

Time of Inspection: 10:46

Date of Inspection: 06/03/2025

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:

BYPASS AI, COMPLIANCE UNDETERMINED

*AI = agency inspection
Subs*

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.

Leandra Higginbotham

LEANDRA HIGGINBOTHAM

Signature and Printed Name

06/03/2025

Date

Florida Department of Law Enforcement Alcohol Testing Program

DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: FHP TROOP D ORLANDO

Serial Number: 80-001123

Time of Inspection: 12:28

Date of Inspection: 06/03/2025

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		No

Noted
Sub
6/9/25

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: _____
0.000				
0.000				
0.000				
0.000				
0.000				
0.000				
0.000				
0.000				
0.000				
0.000				

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

Remarks:

FORMS NEED TO BE LOADED PRIOR TO DEPARTMENT INSPECTION

- Aborted after Dept. Inspection initiated, sub 6/9/25

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.

Miggel

LEANDRA HIGGINBOTHAM

Signature and Printed Name

06/03/2025

Date

Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: FHP TROOP D ORLANDO

Serial Number: 80-001123

Time of Inspection: 10:33

Date of Inspection: 06/06/2025

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:

BYPASS AI TO CHECK FORMS

AI = agency inspection

SAT 6/9/2025

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.

[Handwritten Signature]

LEANDRA HIGGINBOTHAM

Signature and Printed Name

06/06/2025

Date

Return Material Authorization

Ship to: CMI, Inc.
 Enforcement Electronics

Shipment to repair facility authorized by: Sgt Maykoll Souza on 06/09/2025

Items Returned: Instrument Supplies Other Describe: _____
Instrument Model: Intoxilyzer 8000 Serial Number: 80-001123

Bill To Address: <u>FHP (Orlando)</u> _____ _____ _____ _____	Ship to Address: <u>FDLE- Tallahassee</u> _____ _____ _____ _____
--	--

Reason for Return:
Please download Forms - remote download failed 6/3 and 6/6/2025.
Please attempt upload before performing any repairs
Agency reports 'Agency Check Error'

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: Sgt Maykoll Souza
Phone #: 954-263-3252 Email: MaykollSouza@flhsmv.gov

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