



INSTRUMENT PROCESSING SHEET

Agency ESCAMBIA COUNTY SOs/N 80-006435Florida Department of
Law EnforcementDate In 8/21/2025DI Completion Date N/A☒ Ship ☐ P/U ☐ H/D ☐ CMI ☐ EE

Intake	By	WKP	Date	8/25/2025	Quality Checks	By	Date	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: Instrument was sent to assess the mouth alcohol test. During AI, SNM was not triggered, instead gave an alcohol result.					☐ 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 # _____ ☐ Stability Checks			☐ 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)																																																															
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Notes/Suggested Service: On 9/17/25 I was able to demonstrate mouth alcohol does trigger the SNM exception. I did this by initiating the department inspection and then aborted. Spoke to agency and it will be shipped back. Instrument already had 2025 inspection. SLH 9/17/25 Tech Review: added Form 40 and breath test (Form 38) to evaluate SNM. Form 41 was not able to be printed, nor in COBRA, because of aborting the inspection directly after the alcohol free / mouth alcohol step. SLH 10/6/2025																																																																							

Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: ESCAMBIA COUNTY SO
Time of Inspection: 11:50

Date of Inspection: 10/01/2025

Serial Number: 80-006435
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:

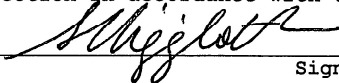
Number of Simulators Used: _____

Remarks:

BYPASS AI FOR OPERATION, COMPLIANCE UNDETERMINED

The above instrument complies (X) 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

10/01/2025
Date

FLORIDA DEPARTMENT OF LAW ENFORCEMENT
ALCOHOL TESTING PROGRAM
BREATH ALCOHOL TEST AFFIDAVIT

Instrument Type: Intoxilyzer 8000
Instrument Registered To: ESCAMBIA COUNTY SO
Instrument Serial Number: 80-006435 Software: 8100.27
Date of Test: 10/01/2025

Date of Last Agency Inspection: 10/01/2025
Observation Period Began: 11:30
Subject's Name: TEST TEST

DOB: 10/01/2025 Sex: F

The subject was observed for at least twenty-minutes prior to the administration of the breath test to ensure that the subject did not take anything orally and did not regurgitate.

Results:	Test	g/210L	Time
	Diagnostics Check	OK	11:58
	Air Blank	0.000	11:58
	Control Test	0.078	11:59
	Air Blank	0.000	11:59
	Subject Sample #1	SNM	11:59
	Air Blank	0.000	12:00
	Control Test	0.077	12:00
	Air Blank	0.000	12:01
	Diagnostics Check	OK	12:01

*Slope Not Met

Instrument Placed in breath test mode to provide a mouth alcohol breath sample to confirm the instrument triggers SNM exception.

Sut

10/1/2025

Cylinder Lot: AG429602
Exp: 10/22/2026

State of Florida, County of _____,

Personally appeared before me the undersigned authority, who () is personally known to me or () produced _____ as identification, and who after being placed under oath, states:

I LEANDRA HIGGINBOTHAM, hold a valid Breath Test Operator permit issued by the Florida Department of Law Enforcement, I administered the above breath test to the subject named above in accordance with Chapter 11D-8, Florida Administrative Code, and this form is a true and accurate report of that breath test.

Breath Test Operator: _____ Date: _____
Signature

Sworn to (or affirmed) before me this _____ day of _____, _____

Signature of Notary Public-State of Florida Printed Name of Notary Public-State of Florida

Note: Pursuant to section 117.10, Florida Statutes, law enforcement officers, correctional officers, traffic accident investigation officers and traffic infraction enforcement officers are notaries public when engaged in the performance of official duties. In accordance with section 316.1934(5), F.S., this completed form is admissible without further authentication and is presumptive proof of the results herein. To be used in accordance with Section 316.1934(5), F.S., and in administrative proceedings pursuant to 322.2615, F.S.

Stability Checks

80-006435

DA

3/31/25

ESCAMBIA COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-006435
03/31/2025
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	09:34
Control Test	0.047	09:35
Air Blank	0.000	09:35
Control Test	0.047	09:36
Air Blank	0.000	09:37
Control Test	0.047	09:37
Air Blank	0.000	09:38
Control Test Stats		
Average	0.0470	
Std Dev	0.0000	
Rel Std Dev(%)	0.0000	

DA

Operator's Signature

ESCAMBIA COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-006435
03/31/2025
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	09:51
Control Test	0.078	09:51
Air Blank	0.000	09:52
Control Test	0.077	09:53
Air Blank	0.000	09:53
Control Test	0.077	09:54
Air Blank	0.000	09:54
Control Test Stats		
Average	0.0773	
Std Dev	0.0006	
Rel Std Dev(%)	0.7466	

wet

DA

Operator's Signature

ESCAMBIA COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-006435
03/31/2025
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	10:16
Control Test	0.199	10:16
Air Blank	0.000	10:17
Control Test	0.198	10:18
Air Blank	0.000	10:18
Control Test	0.198	10:19
Air Blank	0.000	10:19
Control Test Stats		
Average	0.1983	
Std Dev	0.0006	
Rel Std Dev(%)	0.2911	

DA

Operator's Signature

ESCAMBIA COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-006435
03/31/2025
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	09:40
Control Test	0.077	09:40
Air Blank	0.000	09:41
Control Test	0.077	09:41
Air Blank	0.000	09:42
Control Test	0.077	09:42
Air Blank	0.000	09:42
Control Test Stats		
Average	0.0770	
Std Dev	0.0000	
Rel Std Dev(%)	0.0000	

DGS

DA

Operator's Signature

Florida Department of Law Enforcement Alcohol Testing Program

DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: ESCAMBIA COUNTY SO
Time of Inspection: 12:12

Date of Inspection: 03/31/2025

Serial Number: 80-006435
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	0.046	0.077	0.196	0.077
0.000	0.046	0.077	0.197	0.077
0.000	0.046	0.077	0.198	0.077
0.000	0.046	0.077	0.197	0.077
0.000	0.047	0.077	0.197	0.077
0.000	0.046	0.077	0.198	0.077
0.000	0.046	0.077	0.197	0.077
0.000	0.047	0.077	0.197	0.077
0.000	0.046	0.078	0.198	0.077
0.000	0.047	0.077	0.198	0.077
Standard Deviations	0.0004	0.0003	0.0006	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.

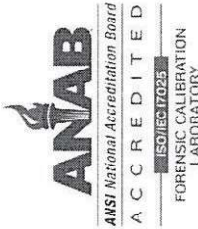
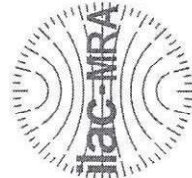
I certify that I performed this inspection in accordance with the provisions of Chapter 11D-8, FAC.



DESTINEE N ARMSTRONG

Signature and Printed Name

03/31/2025
Date



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 80-006435, manufactured by CMI, Inc. was calibrated in accordance with FDLE/ATP Form 36 - Department Inspection Procedures - Intoxilyzer 8000.

Serial Number:	<u>80-006435</u>	UNCERTAINTY* $\pm$	
Owning Agency:	<u>ESCAMBIA COUNTY SO</u>	0.050 g/ 210 L	0.004
Calibration Date:	<u>03/31/2025</u>	0.080 g/ 210 L	0.004
Calibration Time:	<u>12:12</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.

03/31/2025

Date

DESTINEE N ARMSTRONG,
Department Inspector

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

Service • Integrity • Respect • Quality



INSTRUMENT PROCESSING SHEET

Agency Escambia County SOS/N 80-006435Florida Department of
Law EnforcementDate In 02/25/2025 DI Completion Date 02/26/2025☒ Ship ☐ P/U ☐ H/D ☐ CMI ☐ EE

Intake	By <u>ALL</u>	Date <u>02/25/2025</u>	Quality Checks	By <u>DA</u>	Date <u>02/26/2025</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 <u>223</u> ☒ Flow Verification (L/s) Flow Column # <u>ATP102</u> 32 mm <u>0.160</u> (.139 - .169) 36 mm <u>0.175</u> (.156 - .190) 53 mm <u>0.257</u> (.228 - .278) 103 mm <u>0.531</u> (.447 - .547) ☒ Barometric Pressure Check Gauge ID # <u>30793</u> ☒ 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>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) Maintenance By _____ Date _____ ☐ Battery Replacement ☐ Dry Gas Regulator Replacement ☐ Breath Tube Replacement ☐ Other _____ _____ _____ _____																								
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Barometric Pressure Gauge _____ ID # _____			Barometric Pressure ID# <u>30793</u> Gauge <u>1014</u> Instrument <u>1016</u> Mouth Alcohol Solution Lot # <u>2024-A</u> Acetone Stock Solution Lot # <u>2024-B</u>																																										
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						Taylor Gutschow Digitally signed by Taylor Gutschow Date: 2025.03.04 10:52:06 -05'00' Phil Nicodemo Digitally signed by Phil Nicodemo Date: 2025.03.05 15:24:56 -05'00' Tech Review / Date _____ Admin Review / Date _____																																							

Stability Checks 80-006435 DA 2/26/25

ESCAMBIA COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-006435
02/26/2025
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	10:39
Control Test	0.049	10:40
Air Blank	0.000	10:41
Control Test	0.049	10:41
Air Blank	0.000	10:42
Control Test	0.050	10:43
Air Blank	0.000	10:43
Control Test Stats		
Average	0.0493	
Std Dev	0.0006	
Rel Std Dev(%)	1.1703	

Operator's Signature

ESCAMBIA COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-006435
02/26/2025
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	10:34
Control Test	0.079	10:35
Air Blank	0.000	10:35
Control Test	0.078	10:36
Air Blank	0.000	10:36
Control Test	0.078	10:37
Air Blank	0.000	10:38
Control Test Stats		
Average	0.0783	
Std Dev	0.0006	
Rel Std Dev(%)	0.7370	

Wet

Operator's Signature

ESCAMBIA COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-006435
02/26/2025
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	10:49
Control Test	0.198	10:50
Air Blank	0.000	10:50
Control Test	0.199	10:51
Air Blank	0.000	10:51
Control Test	0.198	10:52
Air Blank	0.000	10:53
Control Test Stats		
Average	0.1983	
Std Dev	0.0006	
Rel Std Dev(%)	0.2911	

Operator's Signature

ESCAMBIA COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-006435
02/26/2025
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	10:45
Control Test	0.079	10:45
Air Blank	0.000	10:46
Control Test	0.078	10:46
Air Blank	0.000	10:46
Control Test	0.078	10:47
Air Blank	0.000	10:47
Control Test Stats		
Average	0.0783	
Std Dev	0.0006	
Rel Std Dev(%)	0.7370	

DGS

DA 2/26/25

Operator's Signature

Florida Department of Law Enforcement Alcohol Testing Program

DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: ESCAMBIA COUNTY SO
Time of Inspection: 12:34

Date of Inspection: 02/26/2025

Serial Number: 80-006435
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	

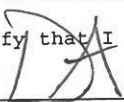
Alcohol Free Test (g/210L)	0.05g/210L Test (g/210L) Lot#:202406K Exp: 06/19/2026	0.08g/210L Test (g/210L) Lot#:202406L Exp: 06/19/2026	0.20g/210L Test (g/210L) Lot#:202406N Exp: 06/20/2026	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:AG429602 Exp: 10/22/2026
0.000	0.048	0.079	0.201	0.078
0.000	0.048	0.079	0.201	0.078
0.000	0.048	0.079	0.201	0.078
0.000	0.048	0.079	0.202	0.078
0.000	0.049	0.079	0.202	0.077
0.000	0.048	0.080	0.201	0.078
0.000	0.049	0.079	0.201	0.078
0.000	0.049	0.080	0.201	0.077
0.000	0.049	0.079	0.201	0.077
0.000	0.049	0.080	0.201	0.077
Standard Deviations	0.0005	0.0004	0.0004	0.0005

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.



DESTINEE N ARMSTRONG

Signature and Printed Name

02/26/2025
Date



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 80-006435, manufactured by CMI, Inc. was calibrated in accordance with FDLE/ATP Form 36 - Department Inspection Procedures - Intoxilyzer 8000.

Serial Number:	<u>80-006435</u>	UNCERTAINTY* $\pm$
Owning Agency:	<u>ESCAMBIA COUNTY SO</u>	0.050 g/ 210 L 0.004
Calibration Date:	<u>02/26/2025</u>	0.080 g/ 210 L 0.004
Calibration Time:	<u>12:34</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.

[Signature]

Date 02/26/2025 DESTINEE N ARMSTRONG,

Department Inspector

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

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