INSTRUMENT PROCESSING SHEET

Florida Department of Law Enforcement

Agency ESCAMBIA COUNTY SO S/N 80-006435

Date In 8/21/2025 DI Completion Date N/A ■Ship ❑P/U ❑H/D ❑CMI ❑EE

Intake By WKP Date 8/25/2025

❑ 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 trigger-ed, instead gave an alcohol result.

Quality Checks By_____ Date_____

❑ 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

Simulator	Serial #	Lot #/Exp
0.050		
0.080		
0.200		
0.080 DGS	N/A	

Flow Calibration By_____ Date_____

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 _____

Calibration Adjustment By_____

Barometric Pressure Gauge _____ ID # _____

Simulator	Serial #	Lot #	Expiration
0.000		N/A	N/A
0.040			
0.100			
0.200			
0.300			
0.080 DGS	N/A		

❑ Post Calibration Adjustment Stability Checks

Simulator	Serial #	Lot #	Expiration
0.050			
0.080			
0.200			
0.080 DGS	N/A		

Department Inspection By_____

Barometric Pressure ID# _____
Gauge _____ Instrument _____
Mouth Alcohol Solution Lot # _____
Acetone Stock Solution Lot # _____

Simulator	Serial Number
0.000	
Interferent	
0.050	
0.080	
0.200	

Attachments

❑ Form 41
❑ Stability Checks
❑ Calibration Certificate
❑ Calibration Adjustment
❑ Post-Stability Checks
❑ Flow Calibration
☒ Form 40 SLH added both attachments 10/6/25
☒ Other breath test

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

❑ **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: 2025.10.06 13:11:02 -04'00'
Tech Review / Date

Shayla Platt Digitally signed by Shayla Platt Date: 2025.10.16 09:25:47 -04'00'
Admin Review / Date

Florida Department of Law Enforcement
Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: ESCAMBIA COUNTY SO
Serial Number: 80-006435
Time of Inspection: 11:50
Date of Inspection: 10/01/2025
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 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

FDLE/ATP Form 40 – March 2004

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.
SWT
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.

FDLE/ATP FORM 38 - MARCH 2004, Ref. 11D-8.007

Florida Department of Law Enforcement

INSTRUMENT PROCESSING SHEET

Agency Escambia County SO S/N 80-006435

Date In 03/28/2025 DI Completion Date 03/31/2025 ■Ship ❑P/U ❑H/D ❑CMI ❑EE

Intake By ALL Date 03/28/2025

■ 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: _____

Quality Checks By DA Date 03/31/2025

■ Breath Tube Screen
■ Replace External O-Rings
■ Instrument Set Up Verified
■ R-Value 215
■ Flow Verification (L/s)
Flow Column # ATP103
32 mm 0.152 (.139 - .169)
36 mm 0.175 (.156 - .190)
53 mm 0.246 (.228 - .278)
103 mm 0.515 (.447 - .547)
■ Barometric Pressure Check
Gauge ID # 30793
■ Stability Checks

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 Calibration By_____ Date_____

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 _____

Calibration Adjustment By_____

Barometric Pressure Gauge _____ ID #_____

Simulator	Serial #	Lot #	Expiration
0.000		N/A	N/A
0.040			
0.100			
0.200			
0.300			
0.080 DGS	N/A		

❑ Post Calibration Adjustment Stability Checks

Simulator	Serial #	Lot #	Expiration
0.050			
0.080			
0.200			
0.080 DGS	N/A		

Department Inspection By DA

Barometric Pressure ID# 30793
Gauge 1010 Instrument 1012
Mouth Alcohol Solution Lot # 2024-A
Acetone Stock Solution Lot # 2024-B

Simulator	Serial Number
0.000	MP5086
Interferent	MP5087
0.050	MP5088
0.080	MP5089
0.200	MP5090

Attachments

■ Form 41
■ Stability Checks
■ Calibration Certificate
❑ Calibration Adjustment
❑ Post-Stability Checks
❑ Flow Calibration
❑ Form 40
❑ Other _____

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**

Phil Nicodemo Digitally signed by Phil Nicodemo Date: 2025.04.02 12:51:50 -04'00'
Tech Review / Date

Shayla Platt Digitally signed by Shayla Platt Date: 2025.04.02 14:47:36 -04'00'
Admin Review / Date

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

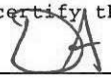
Standard Deviations	0.0004	0.0003	0.0006	0.0000

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 (X) 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

FDLE/ATP Form 41 –Revised August 2005

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:	80-006435
Owning Agency:	ESCAMBIA COUNTY SO
Calibration Date:	03/31/2025
Calibration Time:	12:12

	UNCERTAINTY* ±
0.050 g/ 210 L	0.004
0.080 g/ 210 L	0.004
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.

03/31/2025
Date

DESTINEE N ARMSTRONG,
Department Inspector

INSTRUMENT PROCESSING SHEET

Florida Department of Law Enforcement

Agency Escambia County SO S/N 80-006435

Date In 02/25/2025 DI Completion Date 02/26/2025 ■Ship ❑P/U ❑H/D ❑CMI ❑EE

Intake By ALL Date 02/25/2025

■ 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: _____

Quality Checks By DA Date 02/26/2025

■ Breath Tube Screen
■ Replace External O-Rings
■ Instrument Set Up Verified
■ R-Value 223
■ Flow Verification (L/s)
Flow Column # ATP102
32 mm 0.160 (.139 - .169)
36 mm 0.175 (.156 - .190)
53 mm 0.257 (.228 - .278)
103 mm 0.531 (.447 - .547)
■ Barometric Pressure Check
Gauge ID # 30793
■ Stability Checks

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 Calibration By _____ Date _____

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 _____

Calibration Adjustment By _____

Barometric Pressure Gauge _____ ID # _____

Simulator	Serial #	Lot #	Expiration
0.000		N/A	N/A
0.040			
0.100			
0.200			
0.300			
0.080 DGS	N/A		

❑ Post Calibration Adjustment Stability Checks

Simulator	Serial #	Lot #	Expiration
0.050			
0.080			
0.200			
0.080 DGS	N/A		

Department Inspection By DA

Barometric Pressure ID# 30793
Gauge 1014 Instrument 1016
Mouth Alcohol Solution Lot # 2024-A
Acetone Stock Solution Lot # 2024-B

Simulator	Serial Number
0.000	MP5086
Interferent	MP5087
0.050	MP5088
0.080	MP5089
0.200	MP5090

Attachments

■ Form 41
■ Stability Checks
■ Calibration Certificate
❑ Calibration Adjustment
❑ Post-Stability Checks
❑ Flow Calibration
❑ Form 40
❑ Other _____

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**

Taylor Gutschow — Digitally signed by Taylor Gutschow Date: 2025.03.04 10:52:06 -05'00'
Tech Review / Date

Phil Nicodemo — Digitally signed by Phil Nicodemo Date: 2025.03.05 15:24:56 -05'00'
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 (X) 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:	80-006435
Owning Agency:	ESCAMBIA COUNTY SO
Calibration Date:	02/26/2025
Calibration Time:	12:34

	UNCERTAINTY* ±
0.050 g/ 210 L	0.004
0.080 g/ 210 L	0.004
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.

02/26/2025
Date

DESTINEE N ARMSTRONG,
Department Inspector