

Alcohol Testing Program - Instrument Processing Sheet

Agency: MANATEE COUNTY SO

Instrument Serial Number: 80-006631

Date In: 7/20/2026

DI Completion Date: 7/21/2026

☒ Ship ☐ P/U ☐ H/D ☐ CMI ☐ EE

Intake By: <u>WKP</u> Date: <u>7/21/2026</u>		Quality Checks By: <u>KTS</u> Date: <u>7/21/2026</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:		☒ Breath Tube Screen ☒ Replace External O-Rings ☒ Instrument Set Up Verified ☒ R-Value: <u>ATP105 217</u> ☒ Flow Verification (L/s) Flow Column #: <u>ATP105</u> 32 mm <u>0.164</u> (.139-.169) 36 mm <u>0.179</u> (.156-.190) 53 mm <u>0.253</u> (.228-.278) 103 mm <u>0.523</u> (.447-.547) ☒ Barometric Pressure Check Gauge ID #: <u>28427</u> Gauge: <u>1008</u> Instrument: <u>1010</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">MP5088</td> <td>202603A</td> <td>☐ Battery Replacement</td> </tr> <tr> <td>3/3/2028</td> <td>☐ Dry Gas Regulator Replacement</td> </tr> <tr> <td rowspan="2">0.080</td> <td rowspan="2">MP5089</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">MP5090</td> <td>202603D</td> <td>☐ Other:</td> </tr> <tr> <td>3/4/2028</td> <td></td> </tr> <tr> <td rowspan="2">0.080 DGS</td> <td rowspan="2">N/A</td> <td>23825080A1</td> <td></td> </tr> <tr> <td>10/5/2027</td> <td></td> </tr> </tbody> </table>		Simulator	Serial #	Lot#/Exp	Maintenance By: _____ Date: _____	0.050	MP5088	202603A	☐ Battery Replacement	3/3/2028	☐ Dry Gas Regulator Replacement	0.080	MP5089	202603B	☐ Tank Sensor Tare	3/3/2028	☐ Breath Tube Replacement	0.200	MP5090	202603D	☐ Other:	3/4/2028		0.080 DGS	N/A	23825080A1		10/5/2027	
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Optical Bench Adjustment By: _____		Department Inspection By: <u>KTS</u>																																	
Barometric Pressure Gauge: _____ ID#: _____		Barometric Pressure ID#: <u>28427</u>																																	
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0.000		N/A	N/A	Mouth Alcohol Solution Lot #: <u>2025-D</u> Exp: <u>9/25/2027</u>																															
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0.080				☒ Form 41 ☐ Post-Stability Checks ☒ Stability Checks ☐ Flow Adjustment ☒ Calibration Certificate ☐ Form 40 ☐ Optical Bench Adjustment ☐ Other:																															
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Gauge ID #: _____ Gauge: _____ Instrument: _____																																			
Notes/Suggested Service: Tech Review: corrected inadvertently putting flow column serial number as R-value. KTS 8/3/26				☒ 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		LeAndra Higginbotham		Digitally signed by LeAndra Higginbotham Date: 2026.08.03 17:39:48 -04'00'																															
Digitally signed by Taylor Gutschow Date: 2026.08.03 10:54:13 -04'00'		Tech Review		Admin Review																															

Stability Checks

0.050 g/210L 0.047 to 0.053 g/210L	0.080 g/210L 0.077 to 0.083 g/210L	0.200 g/210L 0.194 to 0.206 g/210L	DGS 0.080 g/210L 0.077 to 0.083 g/210L ≤0.003 g/210L of Wet																																																																																																																																																
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Florida Department of Law Enforcement Alcohol Testing Program

DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: MANATEE COUNTY SO
Time of Inspection: 14:11

Date of Inspection: 07/21/2026

Serial Number: 80-006631
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#:202603A Exp: 03/03/2028	0.08g/210L Test (g/210L) Lot#:202603B Exp: 03/03/2028	0.20g/210L Test (g/210L) Lot#:202603D Exp: 03/04/2028	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:23825080A1 Exp: 10/05/2027
0.000	0.049	0.077	0.197	0.080
0.000	0.049	0.077	0.196	0.080
0.000	0.048	0.077	0.196	0.080
0.000	0.048	0.077	0.196	0.080
0.000	0.047	0.077	0.196	0.080
0.000	0.047	0.077	0.196	0.080
0.000	0.048	0.078	0.197	0.080
0.000	0.049	0.078	0.197	0.080
0.000	0.049	0.077	0.196	0.080
0.000	0.049	0.078	0.196	0.080

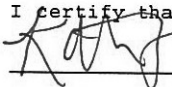
Standard Deviations	0.0008	0.0004	0.0004	0.0000
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Average Standard Deviation of 0.05, 0.08 and 0.20 g/210L Tests: 0.0004 Number of Simulators Used: 5

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.



KATIE T SPEARIN

Signature and Printed Name

07/21/2026
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 80-006631, manufactured by CMI, Inc. was calibrated in accordance with FDLE/ATP Form 36 - Department Inspection Procedures - Intoxilyzer 8000.

Serial Number:	<u>80-006631</u>	UNCERTAINTY* $\pm$	
Owning Agency:	<u>MANATEE COUNTY SO</u>	0.050 g/ 210 L	0.004
Calibration Date:	<u>07/21/2026</u>	0.080 g/ 210 L	0.004
Calibration Time:	<u>14:11</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.

07/21/2026

Date

KATIE T SPEARIN,
Department Inspector

FDLE/ATP Form 69 January 2026

Issuing Authority: Alcohol Testing Program

Service • Integrity • Respect • Quality

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