

## Instrument Processing Sheet

Agency: LEON COUNTY SO Instrument Serial Number: 80-000957  
 Date In: 12/1/2025 DI Completion Date: 12/04/2025 \*  Ship  P/U  H/D  CMI  EE

<b>Intake</b> By: <u>KTS</u> Date: <u>12/1/25</u> <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 Notes:	<b>Quality Checks</b> By: <u>WKP</u> Date: <u>12/4/2025</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>214</u> <input checked="" type="checkbox"/> Flow Verification (L/s) Flow Column #: <u>ATP 103</u> 32 mm <u>0.167</u> (.139-.169) 36 mm <u>0.183</u> (.156-.190) 53 mm <u>0.250</u> (.228-.278) 103 mm <u>0.496</u> (.447-.547) <input checked="" type="checkbox"/> Barometric Pressure Check Gauge ID #: <u>28427</u> Gauge: <u>1019</u> Instrument: <u>1018</u> <input checked="" type="checkbox"/> Stability Checks	<b>Flow Adjustment</b> 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 Adjustment 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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Simulator	Serial #	Lot#/Exp	Maintenance	By:	Date:
0.050	MP6291	202406K	<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:	_____	_____
		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			

<b>Optical Bench Adjustment</b> By: _____	<b>Department Inspection</b> By: <u>WKP</u>																																								
Barometric Pressure Gauge: _____ ID#: _____	Barometric Pressure ID#: <u>28427</u>																																								
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Notes/Suggested Service: *Technical correction: Marked ship box. WKP 12/8/2025	<input checked="" type="checkbox"/> <b>Instrument Complies with Chapter 11D-8, FAC</b> <input type="checkbox"/> <b>Instrument Does Not Comply with Chapter 11D-8, FAC</b> <hr/> <input checked="" type="checkbox"/> <b>Return to/Place into Evidentiary Use</b> <input type="checkbox"/> <b>Remain Out of Evidentiary Use</b> <hr/> <input checked="" type="checkbox"/> <b>Conduct an Agency Inspection Before Evidentiary Use</b>
Digitally signed by Taylor Gutschow Date: 2025.12.08 12:16:45 -05'00'	LeAndra Higginbotham Digitally signed by LeAndra Higginbotham Date: 2025.12.09 12:47:44 -05'00'
<b>Taylor Gutschow</b>	<b>LeAndra Higginbotham</b>
<b>Tech Review</b>	<b>Admin Review</b>

# 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																																																																																																																																																
Performed Root Case Analysis																																																																																																																																																			
<p>LEON COUNTY SO Intoxilyzer - Alcohol Analyzer Model: 8000 SN 80-003957 12/04/2025 Software: 8100.27</p> <table border="1"> <thead> <tr> <th>Test</th> <th>g/210L</th> <th>Time</th> </tr> </thead> <tbody> <tr><td>Air Blank</td><td>0.000</td><td>10:37</td></tr> <tr><td>Control Test</td><td>0.050</td><td>10:38</td></tr> <tr><td>Air Blank</td><td>0.000</td><td>10:38</td></tr> <tr><td>Control Test</td><td>0.050</td><td>10:39</td></tr> <tr><td>Air Blank</td><td>0.000</td><td>10:40</td></tr> <tr><td>Control Test</td><td>0.050</td><td>10:40</td></tr> <tr><td>Air Blank</td><td>0.000</td><td>10:41</td></tr> <tr><td>Control Test</td><td>0.050</td><td>10:41</td></tr> <tr><td>Average</td><td>0.0500</td><td></td></tr> <tr><td>Std Dev</td><td>0.0000</td><td></td></tr> <tr><td>Rel. Std Dev(%)</td><td>0.0000</td><td></td></tr> </tbody> </table> <p>Operator's Signature: <i>menpi</i></p>	Test	g/210L	Time	Air Blank	0.000	10:37	Control Test	0.050	10:38	Air Blank	0.000	10:38	Control Test	0.050	10:39	Air Blank	0.000	10:40	Control Test	0.050	10:40	Air Blank	0.000	10:41	Control Test	0.050	10:41	Average	0.0500		Std Dev	0.0000		Rel. Std Dev(%)	0.0000		<p>LEON COUNTY SO Intoxilyzer - Alcohol Analyzer Model: 8000 SN 80-003957 12/04/2025 Software: 8100.27</p> <table border="1"> <thead> <tr> <th>Test</th> <th>g/210L</th> <th>Time</th> </tr> </thead> <tbody> <tr><td>Air Blank</td><td>0.000</td><td>10:43</td></tr> <tr><td>Control Test</td><td>0.080</td><td>10:43</td></tr> <tr><td>Air Blank</td><td>0.000</td><td>10:44</td></tr> <tr><td>Control Test</td><td>0.079</td><td>10:45</td></tr> <tr><td>Air Blank</td><td>0.000</td><td>10:45</td></tr> <tr><td>Control Test</td><td>0.080</td><td>10:46</td></tr> <tr><td>Air Blank</td><td>0.000</td><td>10:46</td></tr> <tr><td>Control Test</td><td>0.079</td><td>10:46</td></tr> <tr><td>Average</td><td>0.0797</td><td></td></tr> <tr><td>Std Dev</td><td>0.0016</td><td></td></tr> <tr><td>Rel. Std Dev(%)</td><td>0.7247</td><td></td></tr> </tbody> </table> <p>Operator's Signature: <i>menpi</i></p>	Test	g/210L	Time	Air Blank	0.000	10:43	Control Test	0.080	10:43	Air Blank	0.000	10:44	Control Test	0.079	10:45	Air Blank	0.000	10:45	Control Test	0.080	10:46	Air Blank	0.000	10:46	Control Test	0.079	10:46	Average	0.0797		Std Dev	0.0016		Rel. Std Dev(%)	0.7247		<p>LEON COUNTY SO Intoxilyzer - Alcohol Analyzer Model: 8000 SN 80-003957 12/04/2025 Software: 8100.27</p> <table border="1"> <thead> <tr> <th>Test</th> <th>g/210L</th> <th>Time</th> </tr> </thead> <tbody> <tr><td>Air Blank</td><td>0.000</td><td>10:48</td></tr> <tr><td>Control Test</td><td>0.201</td><td>10:49</td></tr> <tr><td>Air Blank</td><td>0.000</td><td>10:49</td></tr> <tr><td>Control Test</td><td>0.211</td><td>10:50</td></tr> <tr><td>Air Blank</td><td>0.000</td><td>10:51</td></tr> <tr><td>Control Test</td><td>0.202</td><td>10:51</td></tr> <tr><td>Air Blank</td><td>0.000</td><td>10:52</td></tr> <tr><td>Control Test</td><td>0.2013</td><td>10:52</td></tr> <tr><td>Average</td><td>0.2013</td><td></td></tr> <tr><td>Std Dev</td><td>0.0016</td><td></td></tr> <tr><td>Rel. Std Dev(%)</td><td>0.2868</td><td></td></tr> </tbody> </table> <p>Operator's Signature: <i>menpi</i></p>	Test	g/210L	Time	Air Blank	0.000	10:48	Control Test	0.201	10:49	Air Blank	0.000	10:49	Control Test	0.211	10:50	Air Blank	0.000	10:51	Control Test	0.202	10:51	Air Blank	0.000	10:52	Control Test	0.2013	10:52	Average	0.2013		Std Dev	0.0016		Rel. Std Dev(%)	0.2868		<p>LEON COUNTY SO Intoxilyzer - Alcohol Analyzer Model: 8000 SN 80-003957 12/04/2025 Software: 8100.27</p> <table border="1"> <thead> <tr> <th>Test</th> <th>g/210L</th> <th>Time</th> </tr> </thead> <tbody> <tr><td>Air Blank</td><td>0.000</td><td>10:55</td></tr> <tr><td>Control Test</td><td>0.080</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>0.079</td><td>10:56</td></tr> <tr><td>Air Blank</td><td>0.000</td><td>10:56</td></tr> <tr><td>Control Test</td><td>0.080</td><td>10:57</td></tr> <tr><td>Air Blank</td><td>0.000</td><td>10:57</td></tr> <tr><td>Control Test</td><td>0.080</td><td>10:57</td></tr> <tr><td>Average</td><td>0.0797</td><td></td></tr> <tr><td>Std Dev</td><td>0.0016</td><td></td></tr> <tr><td>Rel. Std Dev(%)</td><td>0.7247</td><td></td></tr> </tbody> </table> <p>Operator's Signature: <i>menpi</i></p>	Test	g/210L	Time	Air Blank	0.000	10:55	Control Test	0.080	10:55	Air Blank	0.000	10:55	Control Test	0.079	10:56	Air Blank	0.000	10:56	Control Test	0.080	10:57	Air Blank	0.000	10:57	Control Test	0.080	10:57	Average	0.0797		Std Dev	0.0016		Rel. Std Dev(%)	0.7247	
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# Florida Department of Law Enforcement Alcohol Testing Program

## DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: LEON COUNTY SO  
Time of Inspection: 13:39

Date of Inspection: 12/04/2025

Serial Number: 80-000957  
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	0.200	0.079
0.000	0.048	0.078	0.200	0.079
0.000	0.049	0.077	0.200	0.080
0.000	0.048	0.078	0.200	0.079
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0.000	0.048	0.078	0.200	0.080
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	0.200	0.079
0.000	0.047	0.078	0.200	0.079

Standard Deviations	0.0004	0.0003	0.0003	0.0004
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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.

Wen-Chi K Pierson  
Signature and Printed Name

12/04/2025  
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 80-000957, manufactured by CMI, Inc. was calibrated in accordance with FDLE/ATP Form 36 - Department Inspection Procedures - Intoxilyzer 8000.

Serial Number:	<u>80-000957</u>	UNCERTAINTY* ±	
Owning Agency:	<u>LEON COUNTY SO</u>	0.050 g/ 210 L	0.004
Calibration Date:	<u>12/04/2025</u>	0.080 g/ 210 L	0.004
Calibration Time:	<u>13:39</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.

12/04/2025

Date

WEN-CHI K PIERSON,  
Department Inspector

FDLE/ATP Form 69 October 2024

Issuing Authority: Alcohol Testing Program

Service • Integrity • Respect • Quality



LEON COUNTY SO  
Intoxilyzer - Alcohol Analyzer  
Model 8000 SN 80-000957  
05/19/2025  
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	15:53
Control Test	0.050	15:54
Air Blank	0.000	15:54
Control Test	0.049	15:55
Air Blank	0.000	15:55
Control Test	0.049	15:56
Air Blank	0.000	15:57
Control Test Stats		
Average	0.0493	
Std Dev	0.0006	
Rel Std Dev(%)	1.1703	



Operator Signature

LEON COUNTY SO  
Intoxilyzer - Alcohol Analyzer  
Model 8000 SN 80-000957  
05/19/2025  
Software: 8100.27

Test	g/210L	Time
-----		
Air Blank	0.000	16:00
Control Test	0.080	16:01
Air Blank	0.000	16:02
Control Test	0.080	16:02
Air Blank	0.000	16:03
Control Test	0.079	16:03
Air Blank	0.000	16:04
Control Test Stats		
Average	0.0797	
Std Dev	0.0006	
Rel Std Dev(%)	0.7247	

  
Operator Signature

LEON COUNTY SO  
Intoxilyzer - Alcohol Analyzer  
Model 8000 SN 80-000957  
05/19/2025  
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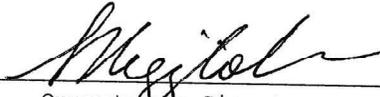
DGS

Test	g/210L	Time
Air Blank	0.000	16:13
Control Test	0.078	16:13
Air Blank	0.000	16:14
Control Test	0.079	16:14
Air Blank	0.000	16:15
Control Test	0.078	16:15
Air Blank	0.000	16:16
Control Test Stats		
Average	0.0783	
Std Dev	0.0006	
Rel Std Dev(%)	0.7370	

  
Operator's Signature

LEON COUNTY SO  
Intoxilyzer - Alcohol Analyzer  
Model 8000 SN 80-000957  
05/19/2025  
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	16:07
Control Test	0.200	16:08
Air Blank	0.000	16:09
Control Test	0.198	16:09
Air Blank	0.000	16:10
Control Test	0.199	16:10
Air Blank	0.000	16:11
Control Test Stats		
Average	0.1990	
Std Dev	0.0010	
Rel Std Dev(%)	0.5025	

  
Operator's Signature

# Florida Department of Law Enforcement Alcohol Testing Program

## AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: LEON COUNTY SO  
Time of Inspection: 10:45

Date of Inspection: 04/08/2025

Serial Number: 80-000957  
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

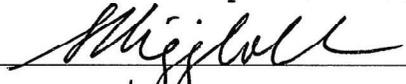
Alcohol Free Test (g/210L)	0.05g/210L Test (g/210L) Lot#: _____ Exp: _____	0.08g/210L Test (g/210L) Lot#: _____ Exp: _____	0.20g/210L Test (g/210L) Lot#: _____ Exp: _____	0.08 g/210L Dry Gas Std Test (g/210L) Lot #: _____ Exp: _____

Number of Simulators Used: \_\_\_\_\_

Remarks:  
BYPASS AI TO OPERATE INSTRUMENT COMPLIANCE UNDETERMINED

The above instrument complies ( *N/A* ) does not comply ( *sub 6/2/25* ) 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

Signed 6/2/25  
 04/08/2025  
 Date

# Florida Department of Law Enforcement Alcohol Testing Program

## AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: LEON COUNTY SO  
Time of Inspection: 13:28

Date of Inspection: 05/19/2025

Serial Number: 80-000957  
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: \_\_\_\_\_ *sub 6/2/25*

Remarks:  
BYPASS AI FOR OPERATION, COMPLIANCE UNDETERMINED  
*compliance*

The above instrument complies ( *N/A sub* ) 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.

*Myrtle*  
\_\_\_\_\_  
Signature and Printed Name LEANDRA HIGGINBOTHAM

05/19/2025  
Date

# Florida Department of Law Enforcement Alcohol Testing Program

## AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: LEON COUNTY SO  
Time of Inspection: 10:27

Date of Inspection: 05/30/2025

Serial Number: 80-000957  
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:**

BYPASSED AI TO OPERATE INSTRUMENT. COMPLIANCE NOT DETERMINED

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.

  
 \_\_\_\_\_ PHIL NICODEMO  
 Signature and Printed Name

05/30/2025  
 Date

# Florida Department of Law Enforcement Alcohol Testing Program

## DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: LEON COUNTY SO  
Time of Inspection: 12:24

Date of Inspection: 05/30/2025

Serial Number: 80-000957  
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		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:
0.000 / 0.000				
0.000 / 0.000				
INT / 0.000				
/ INT				

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:**

00: Interferent Detect, Interferent Detect. Non-compliance: .

*Inspector in training used highly scented hand lotion in room.  
Turned in two fans to ensure room was cleared of scent.  
PN: 5/30/2025 WILL REPEAT INSPECTION.*

The above instrument complies ( ) does not comply ( X ) with Chapter 11D-8, FAC.

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

 \_\_\_\_\_  
Signature and Printed Name

PHIL NICODEMO

05/30/2025  
Date

# Florida Department of Law Enforcement Alcohol Testing Program

## DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: LEON COUNTY SO  
Time of Inspection: 13:36

Date of Inspection: 05/30/2025

Serial Number: 80-000957  
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

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#: Exp:	0.08 g/210L Dry Gas Std Test (g/210L) Lot#: Exp:
0.000 / 0.000	0.048	0.080 / 0.079		
0.000 / 0.000	0.049	0.081 / 0.079		
INT / 0.000	0.050	0.082 / 0.079		
/ 0.000	0.050	INT / 0.079		
/ 0.000	0.050	/ INT		
/ 0.000	0.050			
/ 0.000	0.051			
/ 0.000	0.051			
/ 0.000	0.051			

Standard Deviations	0.0009		
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Average Standard Deviation of 0.05, 0.08 and 0.20 g/210L Tests: \_\_\_\_\_ Number of Simulators Used: 5

**Remarks:**

00: Interferent Detect. 08: Interferent Detect, Interferent Detect. Non-compliance: .

*Despite having two fans present to clear area of scent, this instrument continued to display "INT ~~DEFECT~~ DETECT" MESSAGE. WILL SPEAK WITH AGENCY INSPECTOR AND SEND TO REPAIR.  
PN 5/30/2025*

The above instrument complies ( ) does not comply ( X ) with Chapter 11D-8, FAC.

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

PHIL NICODEMO

\_\_\_\_\_  
Signature and Printed Name

05/30/2025  
Date

# Return Material Authorization

**Ship to:**  CMI, Inc.  
 Enforcement Electronics

Shipment to repair facility authorized by: \_\_\_\_\_ on \_\_\_\_\_

Items Returned: Instrument  Supplies  Other  Describe: \_\_\_\_\_  
Instrument Model: Intoxilyzer 8000 Serial Number: 80-000957

Bill To Address:  
Leon County SO  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Ship to Address:  
FDLE Off-Site Mail Facility  
Florida Department of Law Enforcement  
Alcohol Testing Program  
813 B Lake Bradford Road  
Tallahassee, FL 32304

Reason for Return:

Instrument returned from repair and has remained at FDLE until inspector was able to  
process instrument. Upon inspection, inspector observed repeated "Interferent Detect"  
messages across two inspection attempts. Returning to repair for additional evaluation.  
\_\_\_\_\_  
\_\_\_\_\_

**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: Fred Hening  
Phone #: 850-445-8001 Email: FredrickHening@flhsmv.gov

ATP Contact Name: Phil Nicodemo ATP Email: philipnicodemo@fdle.state.fl.us

Nicodemo PN 6/3/2025

fdle PN 6/3/2025