

CERTIFICATE OF CALIBRATION

INTOXILYZER® 8000

This is to certify that the calibration of INTOXILYZER serial number 80-000912, manufactured by CMI, subsidiary of MPD, Inc. of Owensboro, Kentucky, was tested and found to be in compliance with the National Safety Administration Standard for Devices to Measure Breath Alcohol (F.R., No. 179 48705-48710 Sept. 17, 1993) and with International Recommendation OIML R126 Edition 1998 (E). Calibration solutions are traceable to NIST (NBS) standard material 1828.

Date 3/9/07 Signed Deb Scheffeld
Technician



316 EAST 9TH STREET
OWENSBORO, KY. 42303

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Date 3.20.08 Signed Dale Howard
Technician



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Date 5/27/05

Signed *Debra Howard*

Technician



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Date 11/30/05

Signed *Debra Howard*

Technician



316 EAST 9TH STREET
OWENSBORO, KY. 42303

CERTIFICATE OF CALIBRATION

INTOXILYZER® 8000

This is to certify that the calibration of INTOXILYZER serial number 0200912, manufactured by CMI, subsidiary of MPD, Inc. of Owensboro, Kentucky, was tested and found to be in compliance with the National Safety Administration Standard for Devices to Measure Breath Alcohol (F.R., No. 179 48705-48710 Sept. 17, 1993) and with International Recommendation OIML R126 Edition 1998 (E). Calibration solutions are traceable to NIST (NBS) standard material 1828.

Date Sept 17, 2004 Signed Bob Sheffield
Technician



316 EAST 9TH STREET
OWENSBORO, KY. 42303

Florida Department of Law Enforcement Alcohol Testing Program

REGISTRATION OF EVIDENTIARY BREATH TEST INSTRUMENT

MANUFACTURER: CMI, Inc.
MODEL: Intoxilyzer 8000
SERIAL NUMBER: 80-000912
OWNER: Manatee County Sheriff's Office
DATE OF REGISTRATION: January 19, 2006

The above instrument is hereby approved for evidentiary breath alcohol testing in the State of Florida pursuant to Chapter 11D-8, Florida Administrative Code. This instrument and related records are subject to inspection at any time by the Florida Department of Law Enforcement.



Authorized Representative
Alcohol Testing Program
Florida Department of Law Enforcement

I Hereby Certify this to be a true and accurate duplicate of the original document authorized to be filed, recorded and maintained as a public record by the Florida Department of Law Enforcement. I Further Certify that I have affixed hereto my signature in my official capacity as Custodian of Records of the Alcohol Testing Program, Florida Department of Law Enforcement.



Tanya D. Shrum 2/25/2006
Florida Department of Law Enforcement