



**STATE OF OKLAHOMA
BOARD OF TESTS FOR ALCOHOL AND DRUG INFLUENCE**

Post Office Box 36307

Oklahoma City, Oklahoma 73136-2307

Phone: (405) 425-2460 Fax: (405) 425-2490

www.bot.ok.gov

Dr. Jarrad Wagner, Ph.D. F-ABFT
Chairman

Joshua Smith
Director

ATTESTATION

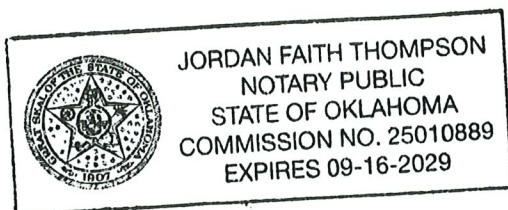
I, the undersigned Joshua Smith (Director/Records Custodian), attest under oath pursuant to 12 O.S. §2902 this record was made, at or near the time of the occurrence of the matters set forth by or from information transmitted by a person having knowledge of those matters; was kept in the course of the regularly conducted business activity of the Board; and was made pursuant to the regularly conducted activity. The duplicate record provided is listed below:

- 1) The attached "Service Overview" is a true and accurate copy of maintenance performed on the Intoxilyzer 8000, serial number 80-003189, in compliance with the agency's Maintenance Policy and Procedures.

Signed _____

Joshua Smith

Name of Position: Director/Records Custodian



State of Oklahoma

County of Oklahoma

Signed or attested before me on 10/07/2025

by Joshua Smith.

Jordan Faith Thompson

(Signature of notarial officer)

Service Overview

Board of Tests for Alcohol and Drug Influence
*Enhancing public safety by ensuring the accuracy and scientific reliability
of blood and breath testing*



2/20

3600 N. Martin Luther King Bldg #9
Oklahoma City, OK 73111
405-425-2460

BENCH CHECK DATE: 6/16/2025

SERIAL: 80-003189

DOCUMENTATION WITHIN SERVICE PACKET:

- BOT Certificate of Maintenance, Calibration and Operation
- Bench Check
- CMI Certificate of Calibration
- CMI Evaluation Form
- CMI Work Order
- BOT Dry Gas Certificate of Analysis
- Ilmo Specialty Gases Certificate of Analysis
- Mock Subject Test
- BOT Certificate of Analysis - Reference Solution (4)
- Guth Laboratories Certificate of Analysis (4)



3/20

STATE OF OKLAHOMA
BOARD OF TESTS FOR ALCOHOL AND DRUG INFLUENCE

Post Office Box 36307
Oklahoma City, Oklahoma 73136-2307
Phone: (405) 425-2460 Fax: (405) 425-2490
www.bot.ok.gov

CERTIFICATE of MAINTENANCE, CALIBRATION, and OPERATION

This certifies the **Intoxilyzer 8000** referenced below, manufactured by CMI, Inc., a subsidiary of MPD, Inc. of Owensboro, Kentucky, is maintained by the Board of Tests for Alcohol and Drug Influence in accordance with 40 O.A.C. 30-1-3. The instrument reported below is hereby deemed to be in compliance with Board rules via linearity accuracy examination and operational/functional procedure evaluation also referred to as a "Bench Check". The Intoxilyzer 8000 appears on the National Highway Traffic Safety Administration's Conforming Products List of Evidential Breath Alcohol Measurement Devices (82 FR 50940 *et seq*) as an approved device. In accordance with 40 O.A.C. 25-1-2, this instrument is approved and certified for use in the State of Oklahoma as an automated evidential breath-alcohol measurement device by the Board of Tests pursuant to 47 O.S. § 759.

All analyses conducted by this instrument are considered precise, valid, and in accordance with 40 O.A.C. 30-1-3(b) Operating Procedure(s). A printed breath test operator affidavit containing the seal of the Board by this instrument confirms a calibration check successfully verified the instrument's calibration at the time of test. The printed breath test affidavit also serves as proof that safeguards in place to protect the breath samples, including but not limited to Ambient Air Interference, Radio Frequency Interference, Residual Mouth Alcohol, Deficient Samples, etc. were not triggered and the test is a true and accurate scientific measurement of the person's alcohol concentration.

1. Maintenance was performed on the Intoxilyzer 8000, Serial No. 80-003189 on 6/16/2025 in accordance with 40 O.A.C. 30-1-3 and internal BOT maintenance policy and procedures.
2. A dry gas canister appearing on the National Highway Traffic Safety Administration's Conforming Products List of Calibrating Units for Breath Alcohol Testers (77 FR 64588 *et seq*) and approved in accordance with 40 O.A.C. 25-1-3 and BOT maintenance policy was installed.
 - Manufacturer: ILMO Unit: 208 ppm / 105 L
 - Cylinder Lot No. - Canister No.: 28424080A3-010
 - BOT analysis average test result: 0.082
 - Cylinder expiration date: 11/5/2026

3. In accordance with 40 O.A.C. 25-1-2.1, the approved reference standards and equipment were used:

Simulator Model			
Guth 2100	Guth 2100	Guth 2100	Guth 2100
Serial #			
DR3748	DR3694	DR2455	DR3028
Concentration			
.02	.04	.10	.20
LOT #			
24150	24330	24390	25020
Manufactured Date			
4/16/2024	9/10/2024	10/29/2024	1/14/2025
Expiration Date			
4/16/2026	9/10/2026	10/29/2026	1/14/2027
Solution Commission Date			
6/16/2025	6/16/2025	6/16/2025	6/16/2025

Completed by BOT Personnel:


Signature/Name Christopher Pape

Breath-Alcohol Testing Program Administrator
Title

Certified by:

Signature Name Joshua Smith

State Director
Title

STATE OF OKLAHOMA - BOARD OF TESTS FOR ALCOHOL AND DRUG INFLUENCE

CMI INTOXILYZER BENCH CHECK PROCEDURE REPORT

BENCH CHECK DATE 06/16/2025	TIME PROCEDURE BEGAN 10:31:4	INSTRUMENT LOCATION 80-003189
INSTRUMENT TYPE Intoxilyzer	INSTRUMENT MODEL I-8000	INSTRUMENT SERIAL NUMBER 80-003189

TEST RESULTS

Diagnostics

PASS

Mouth Alcohol Test

PASS

RFI Test

PASS

Abort Test

PASS

Improper Sample Test

PASS

Interferent Detect Test

PASS

No Sample Given Test

PASS

Insufficient Sample Test

PASS

Air Blank Contamination Test

PASS

Range Exceeded Test

PASS


Duplicate Breath Sampling Results

Value	Test 1	Test 2	Control Test
.02	0.018	0.017	0.020
.04	0.037	0.037	0.038
.10	0.094	0.093	0.095
.20	0.190	0.191	0.192

PASS

CERTIFYING TECHNICIAN

I swear under penalty of perjury that in regards to the above listed instrument, I have complied with the Intoxilyzer Bench Checking Procedure approved by the State of Oklahoma.

SIGNATURE 	DATE 6/16/2025
NAME PAPE, CHRISTOPHER	PERMIT # 0000023020

Certificate of Calibration

This is to certify the calibration of **Intoxilyzer**® serial number 80-003189, manufactured by CMI Inc., a subsidiary of MPD, Inc. of Owensboro, Kentucky, was tested and found to conform to the National Highway Traffic Safety Administration (NHTSA) Standard for Devices to Measure Breath Alcohol (Federal Register, Vol.58, No.179, pp 48705-48710, Sept. 17, 1993) for accuracy and precision. Reference materials are traceable through the National Institute of Standards and Technology (NIST) to the International System of Units (SI).

Date June. 06, 2025 Signed Christopher Randall
Technician



316 East 9th Street
Owensboro, KY 42303
USA

Part No. 650517 Rev.A

CMI INC.

Service Evaluation Form

This form **MUST** be completed and enclosed with item to be serviced.
***** Hazardous Material Warning! – DO NOT return gas cylinder with instrument! *****

Note: Please ship items in their original shipping container.

Contact information:

Name Chris Pape **Phone:** (405) 425-2460
Email: christopher.pape@bot.ok.gov **Customer #** 731362 (contact Customer Service)

Your Billing Address

Agency Name: Board of Tests
Address: 3600 N ML King, Bldg 9
City: Oklahoma City **State:** OK **Zip:** 73111
Credit Card/PO #: _____
Name on Card: _____
Expiration Date: _____ **CVV** _____

Your Shipping Address

Agency Name: Board of Tests
Address: 3600 N ML King, Bldg 9
City: Oklahoma City **State:** OK **Zip:** 73111
Contact Person: Chris Pape
Contact Phone: (405) 425-2460
Email: christopher.pape@bot.ok.gov

Instrument Serial Number: 80-003189

Detailed Description of Problem:

Unit will not power up. Unit had 012 "Memory full" error. Would not boot back up after reboot attempt.

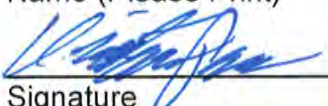
Note: For instruments not under warranty, an evaluation fee of \$83.00 (infrared and I-200) or \$43.50 (fuel cell), plus return shipping cost, will apply to all service items.

☒ I authorize all repairs up to \$500 to be performed.

After repair, add "Certificate of Calibration" for: ☐ S-D2, S-D5, and I-800 (\$19)

☐ I-200, I-240, I-300, I-400, and I-600 (\$39)

Authorized By:

Chris Pape Breath Testing Admin
Name (Please Print) **Title**
 5/15/24
Signature **Date**

Ship item to:

CMI, Inc.
Attn: Service Dept.
316 East Ninth Street
Owensboro, KY 42303



7/20

DATE: 5/31/2024

316 E 9th Street / Owensboro KY 42303 / USA
Phone: 866-835-0690 Fax: 270-685-6268

SERVICE WORK ORDER

408829

Bill To:

OK BOT
PO Box 36307
Oklahoma City, OK 73136-2307
USA
Customer #: 731362
Phone: 405-425-2424
Fax: 405-425-2490 fax

Ship To:

OK BOT
PO Box 36307
Oklahoma City OK 73105-3204 USA
Phone: 405-425-2424

MODEL #: 002480OK

Serial Number: 80-003189

BILL CODE: Out of Warranty

EXTRA PARTS RCVD:

BH, KB, BATTERY, GAS SHELF

DESCRIPTION OF PROBLEM

UNIT WILL NOT POWER UP. UNIT HAD 012 "MEMORY FULL" ERROR. WOULD NOT BOOT BACK UP AFTER REBOOT ATTEMPT.

WORK PERFORMED:

replaced parts listed; calibrated/ final tested; 8133.16 software;

PARTS USED

Seq. No.	Part	Description	Quantity
100	650517	CERTIFICATE OF CALIBRATION	2.00 EA
110	441169	COVER DUST,5/8in x 1/2in	1.00 EA
120	470145	CAP,PLASTIC,.25IDx.50LG,RED	3.00 EA
130	470154	CAP,PLSTC,.406IDx.438-.562,RED	1.00 EA
140	470218	SEAL,TAMPER EVIDENT,SERVICE	1.00 EA
150	220284	IC,SMD,FLASH,512KB,PLCC-32	1.00 EA
160	230115	IC,SMD,DATAFLASH,4MB,TSOP-28	2.00 EA
170	140112	DISPLAY,2x20 VFD 9MM	1.00 EA
180	320643	HDR,14PIN,2ROW,.100CC,4-SIDED	1.00 EA
190	02136216	SOFTWARE, I8000 DSP, US MARKET	1.00 EA
200	690040	BATTERY,3VOLT,LITHIUM,CR2032	1.00 EA
210	530023	HOSE,1/8inI.D.	6.00 IN
220	530030	TUBING,TYGON,.375IDx.562OD	2.00 IN
230	R021357	SOLENOID ASSY,I8000, REQUAL	1.00 EA
240	R021380FL	BLOCK ASSY,SOURCE,BASIC, REQUA	1.00 EA
250	210120	SENSOR,SMD,PRESSURE	1.00 EA

LABOR / TESTING

Misc Code	Description	Hours
LABR	Service Repair Labor	
LCAL	Service - Calibration Adjust	0.50
LFT	Service - Cal / Final Test	1.00

Technician Name: Dewayne Varvel

SRV4088290001





8/20

STATE OF OKLAHOMA
BOARD OF TESTS FOR ALCOHOL AND DRUG INFLUENCE

Post Office Box 36307

Oklahoma City, Oklahoma 73136-2307

Phone: (405) 425-2460 Fax: (405) 425-2490

www.bot.ok.gov

Dr. Jarrad Wagner, Ph.D., F-ABFT
Chairman

Joshua Smith
Director

Certificate of Analysis – Dry Gas

ALPHA INSTRUMENT

Intoxilyzer - Alcohol Analyzer

Model 8000

SN 80-002591


11/14/2024

11:41

Test	g/210L	Time
Air Blank	0.000	11:42
Cal Check	0.081	11:42
Air Blank	0.000	11:42
Cal Check	0.082	11:43
Air Blank	0.000	11:43
Cal Check	0.082	11:44
Air Blank	0.000	11:44
Cal Check	0.082	11:44
Air Blank	0.000	11:45
Cal Check	0.081	11:45
Air Blank	0.000	11:46
Cal Check	0.081	11:46
Air Blank	0.000	11:47
Cal Check	0.082	11:47
Air Blank	0.000	11:47
Cal Check	0.082	11:48
Air Blank	0.000	11:48
Cal Check	0.082	11:49
Air Blank	0.000	11:49
Cal Check	0.081	11:50
Air Blank	0.000	11:50
Cal Check Stats		
Average	0.0816	
Std Dev	0.0005	
Rel Std Dev (%)	0.6328	

Known Breath-Alcohol Equivalent (g/210L) Ratio of Nitrogen and Ethanol Gas (208 ppm/105 L)

0.08 g/210L = 208 PPM + 2605*

Manufacturer: ILMO	Manufacturer Cert. No.: 16873	Cylinder Size: 105L
Lot No.: 28424080A3	Cylinder No.: 010	Expiration Date: 11/05/2026
The above 105 L cylinder has been analyzed via Infrared Spectroscopy utilizing the Intoxilyzer 8000 and was performed in accordance with the procedures prescribed by the State Director of Tests pursuant to 40 OAC 30-1-3. The above NIST traceable reference standard meets the requirements for use as a calibrating unit in accordance with 47 O.S. 759, 40 OAC 25-1-3, and appears on the current conforming products list of calibrating units for breath alcohol testers published by the U.S. Department of Transportation in the Federal Register [77 FR 64588 et seq]. * See Dubowski, K.M. and Essary N., <i>Journal of Anal. Toxicol.</i> (1996) 20(6): pp. 484-491. [g/210L = PPM + 2605].		
Signature: 		Date: 11/14/2024
Name: Christopher Pape		Permit No.: 23020



7 Eastgate Dr. • P.O. Box 790 • Jacksonville, IL 62651-0790
 217-245-2183 • Fax: 217-243-7634 • www.ilmoproducts.com

Certificate of Analysis

Certificate ID: 16873
 Part #: BAC105L080T
 Cylinder Size: 105L
 Lot Number: 28424080A3
 Expiration: 11/5/2026

RCVD
 11/13/24
 CP

0.080 BAC (For the calibration of instruments used to determine breath alcohol concentration)

Contents: 105 Liters @ 1000 psig 70°F (21°C)

Component:	Reported Concentration:	Analytical Accuracy (U, k=2): abs	Analytical Method:
Ethanol	208 ppm	+/-0.002 BAC(G/210L)	NDIR
Nitrogen	Balance	[5.2 ppm]	

Distributed by:

CMI Inc.
 316 East Ninth Street
 Owensboro, KY 42303
 Phone 866-835-0690
www.alcoholtest.com

*Reference Standard:

NIST Traceable Certified Reference Material - 262.3 $\mu\text{mol/mol}$
 Ethanol in Nitrogen - Serial No. ND7017 Lot No. 080722E2

Store in dry area, away from sources of heat, ignition and direct sunlight. Do not allow storage area to exceed 52 °C (125 °F).

Specialty Gas Lab Tech

10-18-2024
 Issuance Date



The calibration results within this certificate were obtained at the facility listed above using equipment and standards capable of producing analytical results traceable to NIST, and apply only to the items contained on this certificate. ILMO Products Company makes no warranty or representation as to the suitability of the use of any information provided for any particular purpose. The information use is at the sole discretion and risk of the user. Liability shall be limited to established replacement cost of this material or service. This certificate applies only to the items described and shall not be reproduced other than in full, without written approval from the issuing facility.

ISO/IEC 17025:2017 Accredited Laboratory

OFFICER'S IMPAIRED DRIVING AFFIDAVIT

10/20

Section 1

ARREST DATE 06/16/2025	ARREST TIME 1045	COUNTY # 55	CITY #	CITATION #
ARREST LOCATION BOT		CITY	COUNTY OKLAHOMA	
SUBJECT NAME NORTH, GAYLON LEVERNE		DATE OF BIRTH 08/09/1961	SEX M	HEIGHT 510 WEIGHT 165
ADDRESS 3600 MARTIN LUTHER KING A		CITY OKLAHOMA CITY	STATE OK	ZIP CODE 73133
DRIVER LICENSE # T083454871		EXPIRATION DATE 06/30/2019	STATE OK	CLASS A
VEHICLE MAKE MOCK		MODEL MOCK	TAG # MOCK	STATE OK CMV N PLACARD N

On the above date, time, and location, the above named person was arrested, and I had reasonable grounds to believe the person was driving or in actual physical control of a motor vehicle upon a public road, highway, street, turnpike, public parking lot, or other public place, or upon a private road, street, alley or lane which provides access to one or more single or multi-family dwelling within this state while under the influence of alcohol and/or other intoxicating substances as prohibited by law.

(Describe driving behavior or circumstances):

MOCK SUBJECT TEST


Describe person's condition (odor, actions, etc.):

POST REPAIR MAINTENANCE, INSTALLED NEW CYLINDER

THE PERSON WAS INFORMED OF THE IMPLIED CONSENT TEST REQUEST

BREATH-ALCOHOL ANALYSIS RECORD, REPORT OF THE PERSON NAMED IN SECTION 1 ABOVE, and LOG OF TEST AND MAINTENANCE RECORD.

Section 2

EQUIPMENT I-8000	SERIAL NUMBER 80-003189	SPECIALIST BOARD OF TESTS																																					
STANDARD Dry	TARGET VALUE 0.080	PERMIT NUMBER 23020																																					
MANUFACTURER ILMO	LOT # 28424080A3	DATE CYLINDER INSTALLED 06/16/2025	DATE CYLINDER EXPIRES 11/05/2026																																				
OBSERVATION START 1100	TEST DATE 06/16/2025	A 15-minute (or greater) deprivation/observation period was observed prior to and continuing to the time of test administration.																																					
RESULT TABLE		I administered said Breath-Alcohol Test in compliance with the applicable operating procedure of the Board of Tests.																																					
<table><thead><tr><th>Test</th><th>g/210L</th><th>Time</th></tr></thead><tbody><tr><td>Air Blank</td><td>0.00</td><td>11:24</td></tr><tr><td>Subject Test</td><td>0.00</td><td>11:24</td></tr><tr><td>Breath Volume</td><td>2.152 LITERS</td><td></td></tr><tr><td>Air Blank</td><td>0.00</td><td>11:25</td></tr><tr><td>Wait</td><td></td><td>11:26</td></tr><tr><td>Air Blank</td><td>0.00</td><td>11:27</td></tr><tr><td>Subject Test</td><td>0.00</td><td>11:27</td></tr><tr><td>Breath Volume</td><td>2.046 LITERS</td><td></td></tr><tr><td>Air Blank</td><td>0.00</td><td>11:28</td></tr><tr><td>Cal Check</td><td>0.07</td><td>11:28</td></tr><tr><td>Air Blank</td><td>0.00</td><td>11:28</td></tr></tbody></table>		Test	g/210L	Time	Air Blank	0.00	11:24	Subject Test	0.00	11:24	Breath Volume	2.152 LITERS		Air Blank	0.00	11:25	Wait		11:26	Air Blank	0.00	11:27	Subject Test	0.00	11:27	Breath Volume	2.046 LITERS		Air Blank	0.00	11:28	Cal Check	0.07	11:28	Air Blank	0.00	11:28	 SIGNATURE OF OPERATOR	
Test	g/210L	Time																																					
Air Blank	0.00	11:24																																					
Subject Test	0.00	11:24																																					
Breath Volume	2.152 LITERS																																						
Air Blank	0.00	11:25																																					
Wait		11:26																																					
Air Blank	0.00	11:27																																					
Subject Test	0.00	11:27																																					
Breath Volume	2.046 LITERS																																						
Air Blank	0.00	11:28																																					
Cal Check	0.07	11:28																																					
Air Blank	0.00	11:28																																					
		NAME PAPE, CHRISTOPHER																																					
		BADGE # 0000000484	PERMIT # 0000023020																																				
		AGENCY BOARD OF TESTS																																					



Test Result
BrAC g/210L
0.00

What happens next?

Section 3

1. Upon receipt and review of the Officer's Impaired Driving Affidavit and any associated test results, if applicable, the State of Oklahoma may revoke your Oklahoma driving privileges.
2. If you hold a commercial driver license or were driving a commercial motor vehicle, the State of Oklahoma may disqualify your privilege to operate a commercial motor vehicle.
3. You will continue to have driving privileges, if otherwise eligible, unless or until an Order of Revocation and/or Disqualification is issued by the State of Oklahoma.
4. The State of Oklahoma will send you the Order of Revocation and/or Disqualification to the address you have on file with Service Oklahoma.
To confirm or change your address on file, contact Service Oklahoma.
5. The Order and Notice of Revocation will inform you of your requirements to regain driving privileges in Oklahoma.

In accordance with Title 12 O.S. Section 426, "I state under penalty of perjury under the laws of Oklahoma that the foregoing is true and correct."

Section 4

Date:	Place (location when signed):	Signature of arresting officer:	
NAME PAPE, CHRISTOPHER	AGENCY BOARD OF TESTS		
BADGE 0000000484	AGENCY ADDRESS INTER-AGENCY	ZIP CODE 00000	PHONE 4054252460

OTHER WITNESSES:

Section 5

1	NAME	TITLE	ADDRESS	PHONE
2	NAME	TITLE	ADDRESS	PHONE

OFFICER/SOK COPY

BOT Form AFF01 11/2024

OFFICER'S IMPAIRED DRIVING AFFIDAVIT

11/20

Section 1

ARREST DATE 06/16/2025	ARREST TIME 1045	COUNTY # 55	CITY #	CITATION #
ARREST LOCATION BOT		CITY	COUNTY OKLAHOMA	
SUBJECT NAME NORTH, GAYLON LEVERNE		DATE OF BIRTH 08/09/1961	SEX M	HEIGHT 510 WEIGHT 165
ADDRESS 3600 MARTIN LUTHER KING A		CITY OKLAHOMA CITY	STATE OK	ZIP CODE 73133
DRIVER LICENSE # T083454871	EXPIRATION DATE 06/30/2019	STATE OK	CLASS A	RESTRICTIONS M
VEHICLE MAKE MOCK	MODEL MOCK	TAG # MOCK	STATE OK	CMV N PLACARD N

On the above date, time, and location, the above named person was arrested, and I had reasonable grounds to believe the person was driving or in actual physical control of a motor vehicle upon a public road, highway, street, turnpike, public parking lot, or other public place, or upon a private road, street, alley or lane which provides access to one or more single or multi-family dwelling within this state while under the influence of alcohol and/or other intoxicating substances as prohibited by law.

(Describe driving behavior or circumstances):

MOCK SUBJECT TEST


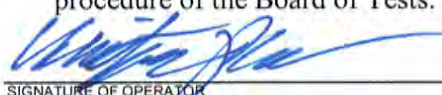
Describe person's condition (odor, actions, etc.):

POST REPAIR MAINTENANCE, INSTALLED NEW CYLINDER

THE PERSON WAS INFORMED OF THE IMPLIED CONSENT TEST REQUEST

BREATH-ALCOHOL ANALYSIS RECORD, REPORT OF THE PERSON NAMED IN SECTION 1 ABOVE, and LOG OF TEST AND MAINTENANCE RECORD.

Section 2

EQUIPMENT I-8000	SERIAL NUMBER 80-003189	SPECIALIST BOARD OF TESTS																																				
STANDARD Dry	TARGET VALUE 0.080	PERMIT NUMBER 23020																																				
MANUFACTURER ILMO	LOT # 28424080A3	DATE CYLINDER INSTALLED 06/16/2025 DATE CYLINDER EXPIRES 11/05/2026																																				
OBSERVATION START 1100	TEST DATE 06/16/2025	A 15-minute (or greater) deprivation/observation period was observed prior to and continuing to the time of test administration.																																				
RESULT TABLE																																						
<table><thead><tr><th>Test</th><th>g/210L</th><th>Time</th></tr></thead><tbody><tr><td>Air Blank</td><td>0.00</td><td>11:24</td></tr><tr><td>Subject Test</td><td>0.00</td><td>11:24</td></tr><tr><td>Breath Volume</td><td>2.152 LITERS</td><td></td></tr><tr><td>Air Blank</td><td>0.00</td><td>11:25</td></tr><tr><td>Wait</td><td></td><td>11:26</td></tr><tr><td>Air Blank</td><td>0.00</td><td>11:27</td></tr><tr><td>Subject Test</td><td>0.00</td><td>11:27</td></tr><tr><td>Breath Volume</td><td>2.046 LITERS</td><td></td></tr><tr><td>Air Blank</td><td>0.00</td><td>11:28</td></tr><tr><td>Cal Check</td><td>0.07</td><td>11:28</td></tr><tr><td>Air Blank</td><td>0.00</td><td>11:28</td></tr></tbody></table>		Test	g/210L	Time	Air Blank	0.00	11:24	Subject Test	0.00	11:24	Breath Volume	2.152 LITERS		Air Blank	0.00	11:25	Wait		11:26	Air Blank	0.00	11:27	Subject Test	0.00	11:27	Breath Volume	2.046 LITERS		Air Blank	0.00	11:28	Cal Check	0.07	11:28	Air Blank	0.00	11:28	 Test Result BrAC g/210L 0.00
Test	g/210L	Time																																				
Air Blank	0.00	11:24																																				
Subject Test	0.00	11:24																																				
Breath Volume	2.152 LITERS																																					
Air Blank	0.00	11:25																																				
Wait		11:26																																				
Air Blank	0.00	11:27																																				
Subject Test	0.00	11:27																																				
Breath Volume	2.046 LITERS																																					
Air Blank	0.00	11:28																																				
Cal Check	0.07	11:28																																				
Air Blank	0.00	11:28																																				
I administered said Breath-Alcohol Test in compliance with the applicable operating procedure of the Board of Tests.																																						
 SIGNATURE OF OPERATOR																																						
NAME PAPE, CHRISTOPHER BADGE # 0000000484 PERMIT # 0000023020 AGENCY BOARD OF TESTS																																						

What happens next?

Section 3

1. Upon receipt and review of the Officer's Impaired Driving Affidavit and any associated test results, if applicable, the State of Oklahoma may revoke your Oklahoma driving privileges.
2. If you hold a commercial driver license or were driving a commercial motor vehicle, the State of Oklahoma may disqualify your privilege to operate a commercial motor vehicle.
3. You will continue to have driving privileges, if otherwise eligible, unless or until an Order of Revocation and/or Disqualification is issued by the State of Oklahoma.
4. The State of Oklahoma will send you the Order of Revocation and/or Disqualification to the address you have on file with Service Oklahoma.
To confirm or change your address on file, contact Service Oklahoma.
5. The Order and Notice of Revocation will inform you of your requirements to regain driving privileges in Oklahoma.

In accordance with Title 12 O.S. Section 426, "I state under penalty of perjury under the laws of Oklahoma that the foregoing is true and correct."

Section 4

Date:	Place (location when signed):	Signature of arresting officer:
NAME PAPE, CHRISTOPHER	AGENCY BOARD OF TESTS	
BADGE 0000000484	AGENCY ADDRESS INTER-AGENCY	ZIP CODE 00000 PHONE 4054252460



12/20

**STATE OF OKLAHOMA
BOARD OF TESTS FOR ALCOHOL AND DRUG INFLUENCE**

Dr. Jarrad Wagner, Ph.D., F-ABFT
Chairman

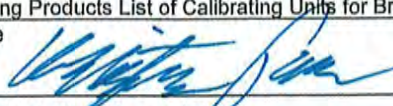
Post Office Box 36307
Oklahoma City, Oklahoma 73136-2307
Phone: (405) 425-2460 Fax: (405) 425-2490
www.bot.ok.gov

Joshua Smith
Director

Certificate of Analysis – Reference Solution

ALPHA INSTRUMENT
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-002591
01/15/2025 09:13

Test	g/210L	Time
Air Blank	0.000	09:14
Cal Check	0.021	09:14
Air Blank	0.000	09:15
Cal Check	0.021	09:16
Air Blank	0.000	09:16
Cal Check	0.021	09:17
Air Blank	0.000	09:17
Cal Check	0.021	09:18
Air Blank	0.000	09:19
Cal Check	0.020	09:19
Air Blank	0.000	09:20
Cal Check	0.021	09:21
Air Blank	0.000	09:21
Cal Check	0.021	09:22
Air Blank	0.000	09:22
Cal Check	0.021	09:23
Air Blank	0.000	09:24
Cal Check	0.021	09:24
Air Blank	0.000	09:25
Cal Check	0.020	09:26
Air Blank	0.000	09:26
Cal Check Stats		
Average	0.0208	
Std Dev	0.0004	
Rel Std Dev(%)	2.0270	

NIST Traceable Breath-Alcohol Equivalent (g/210L +/- 3%) Ratio of ethanol and water free of test interfering substances.		
Manufacturer: Guth	Manufactured Date: 4/16/2024	Concentration: 0.020
Lot No.: 24150	Expiration Date: 4/16/2026	Equipment Model: Guth 2100
The above solution has been analyzed via Infrared Spectroscopy utilizing the Intoxilyzer 8000 and was performed in accordance with the procedures prescribed by the State Director of Tests pursuant to 40 OAC 30-1-3. The above NIST traceable reference solution meets the requirements for use pursuant to 40 OAC 25-1-2.1. Approved breath-alcohol measurement equipment and reference solutions. Equipment used appears on the current or supplemented Conforming Products List of Calibrating Units for Breath Alcohol Testers (72 FR 34747), published by the National Highway Traffic Safety Administration.		
Signature: 	Date: 1/15/2025	
Name: Christopher Pape	Permit No.: 23020	

**GUTH LABORATORIES, INC.**

590 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

CERTIFICATE OF ANALYSISRCVD
12/3/24
CP

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **24080** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **February 14, 2024**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.2419%** (w/vol) ethyl alcohol. The expiration date for this lot number is **February 13, 2026** at 11:59 PM.

When used in a calibrated Simulator, operating at **34°C +/- .2°C**, this solution will give a breath alcohol analysis instrument reading of **0.200 g/210L +/- 3%**.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President
GUTH LABORATORIES, INC.

NIST Traceability:

Testing was conducted using Cerilliant Reference Standard lot number FN03132302 whose values are traceable to NIST.

All balances are calibrated annually by an outside agency using NIST traceable weights. Calibration verification is done prior to each use utilizing NIST traceable weights.



14/20

**STATE OF OKLAHOMA
BOARD OF TESTS FOR ALCOHOL AND DRUG INFLUENCE**

Dr. Jarrad Wagner, Ph.D., F-ABFT
Chairman

Post Office Box 36307
Oklahoma City, Oklahoma 73136-2307
Phone: (405) 425-2460 Fax: (405) 425-2490
www.bot.ok.gov

Joshua Smith
Director

Certificate of Analysis – Reference Solution

ALPHA INSTRUMENT

Intoxilyzer - Alcohol Analyzer

Model 8000

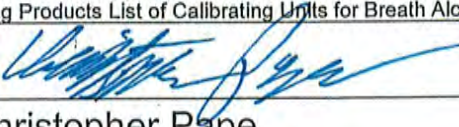
SN 80-002591

04/07/2025

10:32

Test	g/210L	Time
Air Blank	0.000	10:32
Cal Check	0.040	10:33
Air Blank	0.000	10:34
Cal Check	0.040	10:34
Air Blank	0.000	10:35
Cal Check	0.040	10:36
Air Blank	0.000	10:36
Cal Check	0.040	10:37
Air Blank	0.000	10:37
Cal Check	0.040	10:38
Air Blank	0.000	10:39
Cal Check	0.040	10:39
Air Blank	0.000	10:40
Cal Check	0.040	10:41
Air Blank	0.000	10:41
Cal Check	0.040	10:42
Air Blank	0.000	10:42
Cal Check	0.039	10:43
Air Blank	0.000	10:44
Cal Check	0.039	10:44
Air Blank	0.000	10:45
Cal Check Stats		
Average	0.0398	
Std Dev	0.0004	
Rel Std Dev (%)	1.0593	

NIST Traceable Breath-Alcohol Equivalent (g/210L +/- 3%) Ratio of ethanol and water free of test interfering substances.

Manufacturer: Guth	Manufactured Date: 9/10/2024	Concentration: 0.040
Lot No.: 24330	Expiration Date: 9/10/2026	Equipment Model: Guth 2100
The above solution has been analyzed via Infrared Spectroscopy utilizing the Intoxilyzer 8000 and was performed in accordance with the procedures prescribed by the State Director of Tests pursuant to 40 OAC 30-1-3. The above NIST traceable reference solution meets the requirements for use pursuant to 40 OAC 25-1-2.1. Approved breath-alcohol measurement equipment and reference solutions. Equipment used appears on the current or supplemented Conforming Products List of Calibrating Units for Breath Alcohol Testers (72 FR 34747), published by the National Highway Traffic Safety Administration.		
Signature: 	Date: 4/7/2025	
Name: Christopher Pape	Permit No.: 23020	

**GUTH LABORATORIES, INC.**

590 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

CERTIFICATE OF ANALYSISRCVD
12/3/24
CP

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **24330** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **September 11, 2024**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.0480%** (w/vol) ethyl alcohol. The expiration date for this lot number is **September 10, 2026** at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of **0.040 g/210L +/- 3%**.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President
GUTH LABORATORIES, INC.

NIST Traceability:

Testing was conducted using Cerilliant Reference Standard lot number **FN06032102** whose values are traceable to NIST.

All balances are calibrated annually by an outside agency using NIST traceable weights. Calibration verification is done prior to each use utilizing NIST traceable weights.



16/20

**STATE OF OKLAHOMA
BOARD OF TESTS FOR ALCOHOL AND DRUG INFLUENCE**

Dr. Jarrad Wagner, Ph.D., F-ABFT
Chairman

Post Office Box 36307
Oklahoma City, Oklahoma 73136-2307
Phone: (405) 425-2460 Fax: (405) 425-2490
www.bot.ok.gov

Joshua Smith
Director

Certificate of Analysis – Reference Solution

ALPHA INSTRUMENT

Intoxilyzer - Alcohol Analyzer

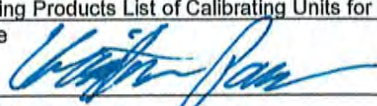
Model 8000

SN 80-002591

01/15/2025

09:30

Test	g/210L	Time
Air Blank	0.000	09:31
Cal Check	0.100	09:31
Air Blank	0.000	09:32
Cal Check	0.100	09:33
Air Blank	0.000	09:33
Cal Check	0.099	09:34
Air Blank	0.000	09:35
Cal Check	0.099	09:35
Air Blank	0.000	09:36
Cal Check	0.099	09:37
Air Blank	0.000	09:37
Cal Check	0.099	09:38
Air Blank	0.000	09:38
Cal Check	0.100	09:39
Air Blank	0.000	09:40
Cal Check	0.099	09:40
Air Blank	0.000	09:41
Cal Check	0.099	09:42
Air Blank	0.000	09:42
Cal Check	0.100	09:43
Air Blank	0.000	09:43
Cal Check Stats		
Average	0.0994	
Std Dev	0.0005	
Rel Std Dev(%)	0.5195	

NIST Traceable Breath-Alcohol Equivalent (g/210L +/- 3%) Ratio of ethanol and water free of test interfering substances.		
Manufacturer: Guth	Manufactured Date: 10/29/2024	Concentration: 0.100
Lot No.: 24390	Expiration Date: 10/29/2026	Equipment Model: Guth 2100
The above solution has been analyzed via Infrared Spectroscopy utilizing the Intoxilyzer 8000 and was performed in accordance with the procedures prescribed by the State Director of Tests pursuant to 40 OAC 30-1-3. The above NIST traceable reference solution meets the requirements for use pursuant to 40 OAC 25-1-2.1. Approved breath-alcohol measurement equipment and reference solutions. Equipment used appears on the current or supplemented Conforming Products List of Calibrating Units for Breath Alcohol Testers (72 FR 34747), published by the National Highway Traffic Safety Administration.		
Signature 	Date: 1/15/2025	
Name Christopher Pape	Permit No.: 23020	



GUTH LABORATORIES, INC.

690 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

17/20

CERTIFICATE OF ANALYSIS

RCVP
12/3/24
CP

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **24390** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **October 30, 2024**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.1205%** (w/vol) ethyl alcohol. The expiration date for this lot number is **October 29, 2026** at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of **0.100 g/210L +/- 3%**.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President
GUTH LABORATORIES, INC.

NIST Traceability:

Testing was conducted using Cerilliant Reference Standard lot number **FN03072301** whose values are traceable to NIST.

All balances are calibrated annually by an outside agency using NIST traceable weights. Calibration verification is done prior to each use utilizing NIST traceable weights.



18/20

**STATE OF OKLAHOMA
BOARD OF TESTS FOR ALCOHOL AND DRUG INFLUENCE**

Dr. Jarrad Wagner, Ph.D., F-ABFT
Chairman

Post Office Box 36307
Oklahoma City, Oklahoma 73136-2307
Phone: (405) 425-2460 Fax: (405) 425-2490
www.bot.ok.gov

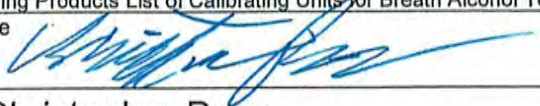
Joshua Smith
Director

Certificate of Analysis – Reference Solution

ALPHA INSTRUMENT 2
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-004923
06/06/2025 11:23

Test	g/210L	Time
Air Blank	0.000	11:24
Cal Check	0.200	11:24
Air Blank	0.000	11:25
Cal Check	0.199	11:26
Air Blank	0.000	11:26
Cal Check	0.199	11:27
Air Blank	0.000	11:27
Cal Check	0.198	11:28
Air Blank	0.000	11:29
Cal Check	0.199	11:29
Air Blank	0.000	11:30
Cal Check	0.199	11:31
Air Blank	0.000	11:31
Cal Check	0.199	11:32
Air Blank	0.000	11:33
Cal Check	0.197	11:33
Air Blank	0.000	11:34
Cal Check	0.199	11:35
Air Blank	0.000	11:35
Cal Check	0.198	11:36
Air Blank	0.000	11:36
Cal Check Stats		
Average	0.1987	
Std Dev	0.0008	
Rel Std Dev(%)	0.4143	

NIST Traceable Breath-Alcohol Equivalent (g/210L +/- 3%) Ratio of ethanol and water free of test interfering substances.

Manufacturer: Guth	Manufactured Date: 1/14/2025	Concentration: 0.200
Lot No.: 25020	Expiration Date: 1/14/2027	Equipment Model: Guth 2100
The above solution has been analyzed via Infrared Spectroscopy utilizing the Intoxilyzer 8000 and was performed in accordance with the procedures prescribed by the State Director of Tests pursuant to 40 OAC 30-1-3. The above NIST traceable reference solution meets the requirements for use pursuant to 40 OAC 25-1-2.1. Approved breath-alcohol measurement equipment and reference solutions. Equipment used appears on the current or supplemented Conforming Products List of Calibrating Units for Breath Alcohol Testers (72 FR 34747), published by the National Highway Traffic Safety Administration.		
Signature: 	Date: 6/6/2025	
Name: Christopher Pape	Permit No.: 23020	

**GUTH LABORATORIES, INC.**

590 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

CERTIFICATE OF ANALYSISRCVD
5/30/25
CP

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **25020** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **January 15, 2025**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.2409%** (w/vol) ethyl alcohol. The expiration date for this lot number is **January 14, 2027** at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of **0.200 g/210L +/- 3%**.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President
GUTH LABORATORIES, INC.

NIST Traceability:

Testing was conducted using Cerilliant Reference Standard lot number FN03132302 whose values are traceable to NIST.

All balances are calibrated annually by an outside agency using NIST traceable weights. Calibration verification is done prior to each use utilizing NIST traceable weights.

<u>Location Returned From</u> Bixby PD		<u>Unit Serial #</u> 80-003189		<u>Date:</u> 20/20 5/8/24	
<u>Inventory Process</u>					
<input checked="" type="checkbox"/> Unit checked in to BOT <input checked="" type="checkbox"/> New Unit Checked out		<input checked="" type="checkbox"/> Unlink Gas Canister from Unit <input checked="" type="checkbox"/> Remove old cylinder from unit (After Lab Evaluation)		Old Cylinder #: 01923080A4-003 <input type="checkbox"/> Old cylinder disposed in inventory <input type="checkbox"/> Old cylinder archived	
<u>Check in Procedure</u> <input type="checkbox"/> Connect unit to ethernet connection 172.019.004. 140 <input type="checkbox"/> Download any stored records _____ <input type="checkbox"/> Change unit location to Serial number <input type="checkbox"/> Update Unit Date and time Previous time: _____ New Time: _____ <input type="checkbox"/> Execute a new Forms load on the unit			<u>Notes from the Field</u> <input type="checkbox"/> Routine Swap <input checked="" type="checkbox"/> Issues in the Field Unit will not power up.		
<u>Lab Evaluation</u> Breath Hose Hold Vacuum?: <input type="checkbox"/> Test Chamber Hold Vacuum?: <input type="checkbox"/>					
<u>DVM</u> 3µm _____ Chamber Temp _____ Snap Test ok? <input type="checkbox"/> 9µm _____ Breath Hose Temp _____ RFI Detected? <input type="checkbox"/>					
<u>Peripheral Tests</u> Speaker (F5) <input type="checkbox"/> Power LED Green (F6) <input type="checkbox"/> Red (F7) <input type="checkbox"/> Fan (F9) <input type="checkbox"/> Gas Regulator (F11) <input type="checkbox"/> Pump (F10) <input type="checkbox"/> Receipt paper <input type="checkbox"/>					
<u>Atmospheric Sensor</u> Pressure _____ Correction Factor _____ Resistance _____ Value _____					
<div style="display: flex; justify-content: space-between;"> <div> <u>Flow Sensor</u> Tank Sensor Value? Yes / No </div> <div> <u>Tank Sensor</u> Is regulator close to Tank Sensor Value? Yes / No </div> </div>					
Sent to CMI (If needed) Reason Sent					
Date Sent 5/15/24 Invoice Sent 11/4/24 Date Returned 6/12/25		Unit will not power up. unit has 012 memory full error. would not boot back up after reboot attempt			
<u>Repairs needed:</u>			<u>Repairs Made:</u>		
Ready for Bench Check? <input checked="" type="checkbox"/>					
<u>Inventory Process</u>					
<input type="checkbox"/> Linked Cylinder to Unit <input type="checkbox"/> Changed Unit Status <input type="checkbox"/> Bench Check Report Completed		<input type="checkbox"/> Bench Check Technician Report <input type="checkbox"/> Mock Subject Test Completed <input type="checkbox"/> Certificate of Calibration and Operation <input type="checkbox"/> Service Overview Completed		To complete if unit sent to CMI <input type="checkbox"/> CMI Workorder <input type="checkbox"/> CMI Certificate of Calibration _____ <input type="checkbox"/> CMI Service Evaluation Form	