



**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

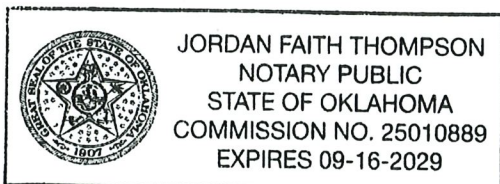
I, the undersigned Joshua Smith (Director/Records Custodian), attest under oath pursuant to 12 O.S. §2902 this record was made, at or near the time of the occurrence of the matters set forth by or from information transmitted by a person having knowledge of those matters; was kept in the course of the 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 80-004924, 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 10/01/2025

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.



2/17

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

BENCH CHECK DATE: 11/03/2022

SERIAL: 80-004924

DOCUMENTATION WITHIN SERVICE PACKET:

- BOT Certificate of Maintenance, Calibration and Operation
- Bench Check
- BOT Dry Gas Certificate of Analysis
- Ilmo Specialty Gases Certificate of Analysis
- Mock Subject Test
- BOT Certificate of Analysis on Certified Solutions (4)
- Guth Laboratories Certificate of Analysis (4)



3/17

STATE OF OKLAHOMA
BOARD OF TESTS FOR ALCOHOL AND DRUG INFLUENCE

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CERTIFICATE of MAINTENANCE, CALIBRATION, and OPERATION

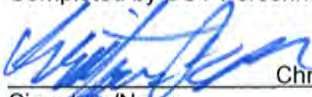
This certifies the **Intoxilyzer 8000** referenced below, manufactured by CMI, Inc., a subsidiary of MPD, Inc. of Owensboro, Kentucky, is maintained by the Board of Tests for Alcohol and Drug Influence in accordance with 40 O.A.C. 30-1-3. The instrument reported below is hereby deemed to be in compliance 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.

- Maintenance was performed on the Intoxilyzer 8000, Serial No. 80-004924 on 11/03/2022 in accordance with 40 O.A.C. 30-1-3 and internal BOT maintenance policy and procedures.
- 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.: 06022080A2-058
 - BOT analysis average test result: 0.081
 - Cylinder expiration date: 04/05/2024
- 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 # | | | |
| DR2834 | DR3694 | DR2455 | DR3470 |
| Concentration | | | |
| .02 | .04 | .10 | .20 |
| LOT # | | | |
| 21340 | 21410 | 22080 | 22050 |
| Manufactured Date | | | |
| 8/24/2021 | 9/30/2021 | 3/7/2022 | 2/7/2022 |
| Expiration Date | | | |
| 8/24/2023 | 9/30/2023 | 3/7/2024 | 2/7/2024 |
| Solution Commission Date | | | |
| 11/03/2022 | 11/03/2022 | 11/03/2022 | 11/03/2022 |

Completed by BOT Personnel:


Signature/Name Christopher Pape

Breath-Alcohol Testing Program Administrator
Title

Certified by: 
Signature Joshua Smith
Name

State Director
Title

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

CMI INTOXILYZER BENCH CHECK PROCEDURE REPORT

| | | |
|---------------------------------------|--|--|
| BENCH CHECK DATE 11/03/2022 | TIME PROCEDURE BEGAN 15:04:2 | INSTRUMENT LOCATION 80-004924 |
| INSTRUMENT TYPE Intoxilyzer | INSTRUMENT MODEL I-8000 | INSTRUMENT SERIAL NUMBER 80-004924 |

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 | 0.019 |
| .04 | 0.037 | 0.037 | 0.039 |
| .10 | 0.098 | 0.094 | 0.099 |
| .20 | 0.194 | 0.192 | 0.198 |

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 11/3/22 |
| NAME PAPE, CHRISTOPHER | PERMIT # 0000023020 |



5/17

**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 – Dry Gas

ALPHA INSTRUMENT

Intoxilyzer – Alcohol Analyzer

Model 8000

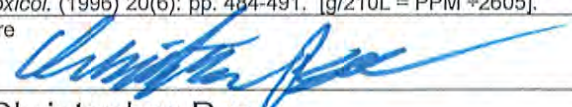
SN 80-002591

04/25/2022

14:42

| Test | g/210L | Time |
|-----------------|--------|-------|
| Air Blank | 0.000 | 14:43 |
| Cal Check | 0.081 | 14:43 |
| Air Blank | 0.000 | 14:43 |
| Cal Check | 0.081 | 14:44 |
| Air Blank | 0.000 | 14:44 |
| Cal Check | 0.081 | 14:45 |
| Air Blank | 0.000 | 14:45 |
| Cal Check | 0.081 | 14:45 |
| Air Blank | 0.000 | 14:46 |
| Cal Check | 0.081 | 14:46 |
| Air Blank | 0.000 | 14:47 |
| Cal Check | 0.081 | 14:47 |
| Air Blank | 0.000 | 14:48 |
| Cal Check | 0.080 | 14:48 |
| Air Blank | 0.000 | 14:48 |
| Cal Check | 0.081 | 14:49 |
| Air Blank | 0.000 | 14:49 |
| Cal Check | 0.081 | 14:50 |
| Air Blank | 0.000 | 14:50 |
| Cal Check | 0.081 | 14:50 |
| Air Blank | 0.000 | 14:51 |
| Cal Check Stats | | |
| Average | 0.0809 | |
| Std Dev | 0.0003 | |
| Rel Std Dev(%) | 0.3908 | |

Known Breath-Alcohol Equivalent (g/210L) Ratio of Nitrogen and Ethanol Gas (208 ppm/105 L)
 $0.08 \text{ g/210L} = 208 \text{ PPM} \div 2605^*$

| | | |
|---|--------------------------------------|------------------------------------|
| Manufacturer: ILMO | Manufacturer Cert. No.: 14689 | Cylinder Size: 105L |
| Lot No.: 06022080A2 | Cylinder No.: 58 | Expiration Date: 04/05/2024 |
| 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 \div 2605]. | | |
| Signature:  | | Date: 04/25/2022 |
| 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: 14689 ✓
Part #: BAC105L080T
Cylinder Size: 105L
Lot Number: 06022080A2 ✓
Expiration: 4/5/2024 ✓

RCV'D
4/11/2022
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): | Analytical Method: | Distributed by: |
|------------|-------------------------|-------------------------------|--------------------|--|
| Ethanol | 208 ppm | +/-0.002 BAC(6/210L) | NDIR | CMI Inc. 316 East Ninth Street Owensboro, KY 42303 Phone 866-835-0690 www.alcoholtest.com |
| Nitrogen | Balance | [5.2 ppm] | | |

*Traceable to:
Certified Reference Material - 251.8 µmol/mol
Ethanol in Nitrogen - Serial No. CC198518 Lot No. 111318E1

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

03-28-2022
Issuance Date



The calibration results within this certificate were obtained 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.

OFFICER'S AFFIDAVIT AND NOTICE OF REVOCATION/DISQUALIFICATION

7/17

Section 1

| | | | | |
|-----------------------------------|---------------------|-------------------------------|--------------------|---------------|
| ARREST DATE 11/03/2022 | ARREST TIME 1600 | COUNTY # 55 | CITY # | CITATION # |
| ARREST LOCATION BOT | | CITY | COUNTY OKLAHOMA | |
| SUBJECT NAME BREATHTEST, DELTA | | DATE OF BIRTH 01/01/1985 | SEX M | HEIGHT 510 |
| ADDRESS 3600 MLK | | CITY OKLAHOMA CITY | STATE OK | WEIGHT 200 |
| DRIVER LICENSE # B083463042 | | EXPIRATION DATE 10/31/2022 | CLASS D | RESTRICTIONS |
| 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.):

ROUTINE 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 80-004924 | SPECIALIST BOARD OF TESTS |
| STANDARD Dry | TARGET VALUE 0.080 | PERMIT NUMBER 23020 |
| MANUFACTURER ILMO | LOT # 06022080A2 | DATE CYLINDER INSTALLED 11/03/2022 |
| OBSERVATION START 1615 | TEST DATE 11/03/2022 | DATE CYLINDER EXPIRES 04/05/2024 |
| RESULT TABLE | |  |
| A 15-minute (or greater) deprivation/observation period was observed prior to and continuing to the time of test administration. | | |
| I administered said Breath-Alcohol Test in compliance with the applicable operating procedure of the Board of Tests. | | Test Result BrAC g/210L 0.00 |
| SIGNATURE OF OPERATOR | | |
| NAME PAPE, CHRISTOPHER | | |
| BADGE # 0000000484 | | |
| PERMIT # 0000023020 | | |
| AGENCY BOARD OF TESTS | | |

EFFECTIVE THIRTY (30) DAYS FROM DATE SERVED. Notice of Revocation is given that your driver's license is revoked or denied for a period of one hundred eighty (180) days or more, if you refused or failed the state's test(s). In addition, your commercial driving privilege in this state will be disqualified if you refused or failed the state's test(s) (operating a CMV or CDL holder) OR a test result of .04 or more while operating a commercial motor vehicle. You may appeal any Departmental action against your driver license as a result of this arrest by filing a petition in the District Court of the County in which you were arrested. Your petition must be filed within thirty (30) days of the date listed below.

You may be eligible to participate in the Impaired Driver Accountability Program (IDAP) administered by the Department of Public Safety (DPS). Completion of IDAP may prevent a revocation as a result of this arrest from appearing on your driving record. Participation in IDAP may reduce the amount of fees you will be required to pay to the State. You must request IDAP within thirty (30) days of the date listed below. Mail the request for IDAP to the Department of Public Safety at P.O. Box 11415, Oklahoma City, OK 73136.

SERVING OF NOTICE: I personally hand delivered a copy of the above containing the Notice of Revocation and the Notice of Department Impaired Driving Accountability Program to the person named in Section 1 above.

Date served: _____ Signature of officer: _____ Badge #: _____

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/DPS COPY

BOT Form AFF01 09/2021

OFFICER'S AFFIDAVIT AND NOTICE OF REVOCATION/DISQUALIFICATION

8/17

Section 1

| | | | | | | | |
|--|--|----------------------------|--|--------------------------------------|--------|---------------------------|---------------------------|
| ARREST DATE 11/03/2022 | | ARREST TIME 1600 | | COUNTY # 55 | CITY # | CITATION # | |
| ARREST LOCATION BOT | | | | CITY | | COUNTY OKLAHOMA | |
| SUBJECT NAME BREATHTEST, DELTA | | | | DATE OF BIRTH 01/01/1985 | | SEX M | HEIGHT 510 |
| ADDRESS 3600 MLK | | | | CITY OKLAHOMA CITY | | STATE OK | WEIGHT 200 |
| DRIVER LICENSE # B083463042 | | | | EXPIRATION DATE 10/31/2022 | | STATE OK | ZIP CODE 73111 |
| VEHICLE MAKE MOCK | | | | MODEL MOCK | | TAG # MOCK | RESTRICTIONS 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

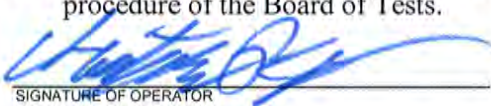

Describe person's condition (odor, actions, etc.):

ROUTINE 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 80-004924 | SPECIALIST BOARD OF TESTS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|--------------------------------|--|--|--|-----------|------|-------|--------------|------|-------|---------------|--------------|--|-----------|------|-------|------|--|-------|-----------|------|-------|--------------|------|-------|---------------|--------------|--|-----------|------|-------|-----------|------|-------|-----------|------|-------|---|--|--|
| STANDARD Dry | | TARGET VALUE 0.080 | PERMIT NUMBER 23020 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MANUFACTURER ILMO | | LOT # 06022080A2 | DATE CYLINDER INSTALLED 11/03/2022 | DATE CYLINDER EXPIRES 04/05/2024 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| OBSERVATION START 1615 | TEST DATE 11/03/2022 | A 15-minute (or greater) deprivation/observation period was observed prior to and continuing to the time of test administration. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <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>16:49</td></tr> <tr><td>Subject Test</td><td>0.00</td><td>16:50</td></tr> <tr><td>Breath Volume</td><td>2.167 LITERS</td><td></td></tr> <tr><td>Air Blank</td><td>0.00</td><td>16:50</td></tr> <tr><td>Wait</td><td></td><td>16:52</td></tr> <tr><td>Air Blank</td><td>0.00</td><td>16:53</td></tr> <tr><td>Subject Test</td><td>0.00</td><td>16:53</td></tr> <tr><td>Breath Volume</td><td>2.050 LITERS</td><td></td></tr> <tr><td>Air Blank</td><td>0.00</td><td>16:53</td></tr> <tr><td>Cal Check</td><td>0.08</td><td>16:54</td></tr> <tr><td>Air Blank</td><td>0.00</td><td>16:54</td></tr> </tbody> </table> | | Test | g/210L | Time | Air Blank | 0.00 | 16:49 | Subject Test | 0.00 | 16:50 | Breath Volume | 2.167 LITERS | | Air Blank | 0.00 | 16:50 | Wait | | 16:52 | Air Blank | 0.00 | 16:53 | Subject Test | 0.00 | 16:53 | Breath Volume | 2.050 LITERS | | Air Blank | 0.00 | 16:53 | Cal Check | 0.08 | 16:54 | Air Blank | 0.00 | 16:54 | <p>I administered said Breath-Alcohol Test in compliance with the applicable operating procedure of the Board of Tests.</p> <p style="text-align: center;"> SIGNATURE OF OPERATOR</p> | | |
| | | Test | g/210L | Time | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Air Blank | 0.00 | 16:49 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Subject Test | 0.00 | 16:50 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Breath Volume | 2.167 LITERS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Air Blank | 0.00 | 16:50 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Wait | | 16:52 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Air Blank | 0.00 | 16:53 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Subject Test | 0.00 | 16:53 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Breath Volume | 2.050 LITERS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Air Blank | 0.00 | 16:53 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Cal Check | 0.08 | 16:54 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Air Blank | 0.00 | 16:54 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NAME PAPE, CHRISTOPHER | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| BADGE # 0000000484 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| PERMIT # 0000023020 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| AGENCY BOARD OF TESTS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <div style="text-align: center;">  Test Result BrAC g/210L 0.00 </div> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

EFFECTIVE THIRTY (30) DAYS FROM DATE SERVED. Notice of Revocation is given that your driver's license is revoked or denied for a period of one hundred eighty (180) days or more, if you refused or failed the state's test(s). In addition, your commercial driving privilege in this state will be disqualified if you refused or failed the state's test(s) (operating a CMV or CDL holder) OR a test result of .04 or more while operating a commercial motor vehicle. You may appeal any Departmental action against your driver license as a result of this arrest by filing a petition in the District Court of the County in which you were arrested. Your petition must be filed within thirty (30) days of the date listed below.

You may be eligible to participate in the Impaired Driver Accountability Program (IDAP) administered by the Department of Public Safety (DPS). Completion of IDAP may prevent a revocation as a result of this arrest from appearing on your driving record. Participation in IDAP may reduce the amount of fees you will be required to pay to the State. You must request IDAP within thirty (30) days of the date listed below. Mail the request for IDAP to the Department of Public Safety at P.O. Box 11415, Oklahoma City, OK 73136.

SERVING OF NOTICE: I personally hand delivered a copy of the above containing the Notice of Revocation and the Notice of Department Impaired Driving Accountability Program to the person named in Section 1 above.

Date served: _____ Signature of officer: _____ Badge #: _____

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 |



**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

09/23/2022

09:37

| Test | g/210L | Time |
|-----------------|--------|-------|
| Air Blank | 0.000 | 09:37 |
| Cal Check | 0.019 | 09:38 |
| Air Blank | 0.000 | 09:39 |
| Cal Check | 0.019 | 09:39 |
| Air Blank | 0.000 | 09:40 |
| Cal Check | 0.019 | 09:41 |
| Air Blank | 0.000 | 09:41 |
| Cal Check | 0.019 | 09:42 |
| Air Blank | 0.000 | 09:42 |
| Cal Check | 0.019 | 09:43 |
| Air Blank | 0.000 | 09:44 |
| Cal Check | 0.019 | 09:44 |
| Air Blank | 0.000 | 09:45 |
| Cal Check | 0.019 | 09:46 |
| Air Blank | 0.000 | 09:46 |
| Cal Check | 0.019 | 09:47 |
| Air Blank | 0.000 | 09:47 |
| Cal Check | 0.019 | 09:48 |
| Air Blank | 0.000 | 09:49 |
| Cal Check | 0.019 | 09:49 |
| Air Blank | 0.000 | 09:50 |
| Cal Check Stats | | |
| Average | 0.0190 | |
| Std Dev | 0.0000 | |
| Rel Std Dev(%) | 0.0000 | |

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

| | | |
|--|-------------------------------------|-----------------------------------|
| Manufacturer: Guth | Manufactured Date: 8/24/2021 | Concentration: 0.02 |
| Lot No.: 21340 | Expiration Date: 8/24/2023 | 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: 9/23/2022 |
| Name: Christopher Pape | | Permit No.: 23020 |



**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

10/24/2022

15:45

| Test | g/210L | Time |
|-----------------|--------|-------|
| Air Blank | 0.000 | 15:45 |
| Cal Check | 0.039 | 15:46 |
| Air Blank | 0.000 | 15:47 |
| Cal Check | 0.039 | 15:47 |
| Air Blank | 0.000 | 15:48 |
| Cal Check | 0.039 | 15:49 |
| Air Blank | 0.000 | 15:49 |
| Cal Check | 0.039 | 15:50 |
| Air Blank | 0.000 | 15:50 |
| Cal Check | 0.039 | 15:51 |
| Air Blank | 0.000 | 15:52 |
| Cal Check | 0.039 | 15:52 |
| Air Blank | 0.000 | 15:53 |
| Cal Check | 0.039 | 15:54 |
| Air Blank | 0.000 | 15:54 |
| Cal Check | 0.039 | 15:55 |
| Air Blank | 0.000 | 15:56 |
| Cal Check | 0.039 | 15:56 |
| Air Blank | 0.000 | 15:57 |
| Cal Check | 0.040 | 15:57 |
| Air Blank | 0.000 | 15:58 |
| Cal Check Stats | | |
| Average | 0.0391 | |
| Std Dev | 0.0003 | |
| Rel Std Dev(%) | 0.8087 | |

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

| | | |
|--|-------------------------------------|-----------------------------------|
| Manufacturer: Guth | Manufactured Date: 10/4/2021 | Concentration: 0.040 |
| Lot No.: 21410 | Expiration Date: 9/30/2023 | 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: 10/24/2022 | |
| Name Christopher Pape | Permit No.: 23020 | |



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ALPHA INSTRUMENT

Intoxilyzer – Alcohol Analyzer


Model 8000

SN 80-002591

06/27/2022

11:40

| Test | g/210L | Time |
|-----------------|--------|-------|
| Air Blank | 0.000 | 11:40 |
| Cal Check | 0.100 | 11:41 |
| Air Blank | 0.000 | 11:41 |
| Cal Check | 0.100 | 11:42 |
| Air Blank | 0.000 | 11:43 |
| Cal Check | 0.100 | 11:43 |
| Air Blank | 0.000 | 11:44 |
| Cal Check | 0.100 | 11:45 |
| Air Blank | 0.000 | 11:45 |
| Cal Check | 0.100 | 11:46 |
| Air Blank | 0.000 | 11:47 |
| Cal Check | 0.101 | 11:47 |
| Air Blank | 0.000 | 11:48 |
| Cal Check | 0.101 | 11:49 |
| Air Blank | 0.000 | 11:49 |
| Cal Check | 0.101 | 11:50 |
| Air Blank | 0.000 | 11:50 |
| Cal Check | 0.100 | 11:51 |
| Air Blank | 0.000 | 11:52 |
| Cal Check | 0.100 | 11:52 |
| Air Blank | 0.000 | 11:53 |
| Cal Check Stats | | |
| Average | 0.1003 | |
| Std Dev | 0.0004 | |
| Rel Std Dev(%) | 0.4815 | |

| | | |
|--|--------------------------------------|-----------------------------------|
| NIST Traceable Breath-Alcohol Equivalent (g/210L +/- 3%) Ratio of ethanol and water free of test interfering substances. | | |
| Manufacturer: Guth | Manufactured Date: 03/07/2022 | Concentration: 0.10 |
| Lot No.: 22080 | Expiration Date: 03/07/2024 | 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: 06/27/2022 |
| Name Christopher Pape | | Permit No.: 23020 |



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Joshua Smith
Director

Certificate of Analysis – Reference Solution

ALPHA INSTRUMENT

Intoxilyzer - Alcohol Analyzer


Model 8000

SN 80-002591

06/27/2022

11:11

| Test | g/210L | Time |
|-----------------|--------|-------|
| Air Blank | 0.000 | 11:11 |
| Cal Check | 0.199 | 11:12 |
| Air Blank | 0.000 | 11:12 |
| Cal Check | 0.200 | 11:13 |
| Air Blank | 0.000 | 11:14 |
| Cal Check | 0.200 | 11:14 |
| Air Blank | 0.000 | 11:15 |
| Cal Check | 0.200 | 11:16 |
| Air Blank | 0.000 | 11:16 |
| Cal Check | 0.201 | 11:17 |
| Air Blank | 0.000 | 11:17 |
| Cal Check | 0.200 | 11:18 |
| Air Blank | 0.000 | 11:19 |
| Cal Check | 0.201 | 11:19 |
| Air Blank | 0.000 | 11:20 |
| Cal Check | 0.200 | 11:21 |
| Air Blank | 0.000 | 11:21 |
| Cal Check | 0.200 | 11:22 |
| Air Blank | 0.000 | 11:23 |
| Cal Check | 0.201 | 11:23 |
| Air Blank | 0.000 | 11:24 |
| Cal Check Stats | | |
| Average | 0.2002 | |
| Std Dev | 0.0006 | |
| Rel Std Dev(%) | 0.3159 | |

| | | |
|--|--------------------------------------|-----------------------------------|
| NIST Traceable Breath-Alcohol Equivalent (g/210L +/- 3%) Ratio of ethanol and water free of test interfering substances. | | |
| Manufacturer: Guth | Manufactured Date: 02/07/2022 | Concentration: 0.20 |
| Lot No.: 22050 | Expiration Date: 02/07/2024 | 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: 06/27/2022 |
| Name: Christopher Pape | | Permit No.: 23020 |

**GUTH LABORATORIES, INC.**

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

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **21340** ✓ of
Alcohol Reference Solution for Simulator were analyzed by
gas chromatography on **August 25, 2021**, using a Perkin Elmer Gas
Chromatograph Autosystem XL S/N: 610N9030209, and found to contain
0.0242% (w/vol) ethyl alcohol. The expiration date for this lot
number is **August 24, 2023** 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 **0.020 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 **FN05122004** 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.

RCVD
5/9/2022
CP

**GUTH LABORATORIES, INC.**

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

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **21410** ✓ of
Alcohol Reference Solution for Simulator were analyzed by
gas chromatography on **October 4, 2021**, using a Perkin Elmer Gas
Chromatograph Autosystem XL S/N: 610N9030209, and found to contain
0.0485% (w/vol) ethyl alcohol. The expiration date for this lot
number is **September 30, 2023** 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 FN08211802 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.

RCVD
5/9/2022
CD

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

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **22080** of
Alcohol Reference Solution for Simulator were analyzed by
gas chromatography on **March 9, 2022**, using a Perkin Elmer Gas
Chromatograph Autosystem XL S/N: 610N9030209, and found to contain
0.1214% (w/vol) ethyl alcohol. The expiration date for this lot
number is **March 7, 2024** 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 **FN03052002** 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.

RCVD
5/9/2022
CP

**GUTH LABORATORIES, INC.**

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CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **22050** ✓ of
Alcohol Reference Solution for Simulator were analyzed by
gas chromatography on **February 9, 2022**, using a Perkin Elmer Gas
Chromatograph Autosystem XL S/N: 610N9030209, and found to contain
0.2437% (w/vol) ethyl alcohol. The expiration date for this lot
number is **February 7, 2024** 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 **FN06231703** 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.

RCVD
5/9/2022
CP

| | | |
|---|-----------------------------------|-------------------------------|
| <u>Location Returned From</u> Troop B HQ | <u>Unit Serial #</u> 80-004924 | <u>Date:</u> 17/17 11/2/22 |
|---|-----------------------------------|-------------------------------|

Inventory Process

☒ Unit checked in to BOT
☒ New Unit Checked out

☒ Unlink Gas Canister from Unit
☒ Remove old cylinder from unit (After Lab Evaluation)

Old Cylinder #: 22620080A2-008
☒ Old cylinder disposed in inventory
☒ Old cylinder archived

| | |
|---|--|
| <u>Check in Procedure</u> <input checked="" type="checkbox"/> Connect unit to ethernet connection 172.019.004. 133 <input checked="" type="checkbox"/> Download any stored records <u>3</u> <input checked="" type="checkbox"/> Change unit location to Serial number <input checked="" type="checkbox"/> Update Unit Date and time Previous time: <u>11/3/22 1029</u> New Time: <u>Time OK</u> <input checked="" type="checkbox"/> Execute a new Forms load on the unit | <u>Notes from the Field</u> <input checked="" type="checkbox"/> Routine Swap <input type="checkbox"/> Issues in the Field |
|---|--|

Lab Evaluation
Breath Hose Hold Vacuum?: ☒ Test Chamber Hold Vacuum?: ☒
DVM
3µm 13118 Chamber Temp 47.00 Snap Test ok? ☒
9µm 13358 Breath Hose Temp 45 RFI Detected? ☒

Peripheral Tests
Speaker (F5) ☒ Power LED Green (F6) ☒ Red (F7) ☒ Fan (F9) ☒
Gas Regulator (F11) ☒ Pump (F10) ☒ Receipt paper ☒

| | | |
|---|-----------------------|---|
| <u>Atmospheric Sensor</u> | <u>Flow Sensor</u> | <u>Tank Sensor</u> |
| Pressure <u>948</u> Correction Factor <u>1.06</u> | Resistance <u>142</u> | Value <u>674</u> |
| | | Is regulator close to Tank Sensor Value? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No |

| | |
|--------------------------------|-------------|
| <u>Sent to CMI (If needed)</u> | Reason Sent |
| Date Sent _____ | |
| Invoice Sent _____ | |
| Date Returned _____ | |

| | |
|------------------------|----------------------|
| <u>Repairs needed:</u> | <u>Repairs Made:</u> |
|------------------------|----------------------|

Inventory Process
☐ Linked Cylinder to Unit
☐ Changed Unit Status
☐ Bench Check Report Completed

☐ Bench Check Technician Report
☐ Mock Subject Test Completed
☐ Certificate of Calibration and Operation
☐ Service Overview Completed

To complete if unit sent to CMI
☐ CMI Workorder
☐ CMI Certificate of Calibration _____
☐ CMI Service Evaluation Form

☒ Ready for Bench Check?

For BOT Internal Use Only

Intoxilyzer Check-in sheet Version 2.0