

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

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 80-005144, in compliance with the agency's Maintenance Policy and Procedures.

Signed

Joshua Smith

Name of Position: Director/Records Custodian

JORDAN FAITH THOMPSON NOTARY PUBLIC STATE OF OKLAHOMA COMMISSION NO. 25010889 EXPIRES 09-16-2029 State of Oklahoma

County of Oklahoma

Signed or attested before me on 0 0 1 2025 by

Joshua Smith.

Signature of notarial officer)

Service Overview

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

BENCH CHECK DATE: 08/17/2022

SERIAL: 80-005144

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)



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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. 80-005144 on 08/17/2022 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.: <u>15922080A3-002</u>
 - BOT analysis average test result: 0.080
 - Cylinder expiration date: 08/05/2024

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

| Simulator Model | | | 1 |
|--------------------------|------------|------------|------------|
| Guth 2100 | Guth 2100 | Guth 2100 | Guth 2100 |
| Serial # | | | |
| DR2834 | DR3694 | DR2455 | DR3470 |
| Concentration | | | |
| .02 | .04 | .10 | .20 |
| LOT# | | | |
| 21120 | 21070 | 22080 | 22050 |
| Manufactured Date | | | 1 |
| 4/7/2021 | 3/1/2021 | 3/7/2022 | 2/7/2022 |
| Expiration Date | | | |
| 4/7/2023 | 3/1/2023 | 3/7/2022 | 2/7/2024 |
| Solution Commission Date | | | |
| 07/21/2022 | 07/21/2022 | 07/21/2022 | 08/17/2022 |
| | | | |

| Completed by BOT Personnel: | |
|-----------------------------|--|
| 1-1- | |
| 11/6/2 0 | |

Breath-Alcohol Testing Program Administrator
Title

Certified by:

Signature

Signature/Nam

Joshua Smith Name

Christopher Pape

State Director Title

STATE OF OKLAHOMA - BOARD OF TESTS FOR ALCOHOL AND DRUG INFLUENCE CMI INTOXILYZER BENCH CHECK PROCEDURE REPORT

| BENCH CHECK DATE 08/17/2022 | 15:08:4 | 80-005 | | |
|--------------------------------|----------------------------|------------|------------------------------------|--|
| Instrument TYPE Intoxilyzer | INSTRUMENT MODEL I - 8000 | | INSTRUMENT SERIAL NUMBER 80-005144 | |
| | TE | ST 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 | 0.016 | 0.019 |
| .04 | 0.036 | 0.036 | 0.038 |
| .10 | 0.096 | 0.094 | 0.098 |
| .20 | 0.191 | 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 Intoxliyzer Bench Checking Procedure approved by the State of Oklahoma.

PAPE, CHRISTOPHER

DATE

8/17/2022

PERMIT #
0000023020

Certificate of Calibration

This is to certify the calibration of **INIONITYET** serial number 80-005144, 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 Aug. 3,2002

Signed 💉

Technician

INC.

316 East 9th Street Owensboro, KY 42303 USA

Part No. 650517 Rev.A



This form MUST be completed and enclosed with item to be serviced.

*** Hazardous Material Warning! – DO NOT return gas cylinder with instrument! ***

| Note: Ple | ase ship items in the | eir original shippi | ing cont | ainer. | |
|--|--|---------------------|----------|-----------------------------------|------------------------|
| Contact information: | | | | | |
| Name Chris Pape | | Phone | : (405 | 425-2460 | |
| Email: christopher.pape@bot.ok.go | Cus | tomer #73 | 1362 | (contact Custo | mer Service |
| Your Billing Address Agency Name: Board of Tests | | Your Shippin | e: Board | l of Tests | |
| Address: 3600 N ML King, Bldg | 9 | Address: 36 | 00 N ML | King, Bldg 9 | |
| City: Oklahoma City State | : OK Zip : 73111 | City: Oklahon | na City | State: OK | Zip:7311 |
| Credit Card/PO #: | | Contact Pers | on: Chr | is Pape | |
| Name on Card: | | Contact Phon | ne: (40 | 5) 425-2460 | |
| Expiration Date: | CVV | Email: christo | pher.pa | ape@bot.ok.gov | • |
| Note: For instruments <u>not</u> unde (fuel cell), plus return ship | 하다. 그렇게 보이 다른데 보면 보고 아주지네는 그리고 있다고 말하는 데 하다 같아요? | | | red and I-200) c | or \$43. ⁵⁰ |
| ☑ I authorize all repairs up t | o \$500 to be perfor | med. | | | |
| After repair, add "Certificate | of Calibration" for: | : 🔲 s-D2, s-D9 | 5, and I | -800 (\$19) | |
| | | - | | , I-400, and I-60 | n (\$39) |
| Authorized By: | | 1-200, 1-24 | 0, 1-500 | , 1-400, and 1-00 | ο (ψοσ) |
| Chris Pape | Breath Tes | ting Admin | Ship | item to: | |
| Name (Please Print) | Title | , | CMI, | Inc. | |
| Mitwellen | 12 | /30/2021 | Attn | : Service Dept. | 57.0 |
| Signature | Date | e | | East Ninth Stre nsboro. KY 42: | |



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

SERVICE WORK ORDER

406611

Bill To:

Oklahoma Board Of Tests Blvd Adcu Annex Bldg #9 3600 Martin Luther King Oklahoma City, OK 73136-3000

USA

DATE: 1/6/2022

Customer #: 731362 Phone: 405-425-2424 Fax: 405-425-2490 fax Ship To:

Oklahoma Board Of Tests Blvd Adcu Annex Bldg #9 3600 Martin Luther King Oklahoma City OK 73136-3000

USA

Phone: 405-425-2424

MODEL #: 0024800K

Serial Number: 80-005144

BILL CODE: Out of Warranty

EXTRA PARTS RCVD:

BH,KB,BATTERY,GAS SHELF W/REG

DESCRIPTION OF PROBLEM

3UM AND 9UM ARE CLOSE. 3UM=12917 AND 9UM=13048. FLOW SENSOR NEEDS REPLACED. VALUE IS AT 88. ATMO SENSOR MAY NEED CALIBRATED. BH IS LEAKING.

WORK PERFORMED:

Display was dim; Flow sensor read low; Breath Hose leaked; Replaced all parts listed; Calibrated and Final Tested; Software 8133.15.00;

PARTS USED

| Seq. No. | Part | Description | Quantity |
|----------|----------|-------------------------------|----------|
| 60 | 320643 | HDR,14PIN,2ROW,.100CC,4-SIDED | 1.00 EA |
| 80 | 650517 | CERTIFICATE OF CALIBRATION | 2.00 EA |
| 85 | 210120 | SENSOR,SMD,PRESSURE | 1.00 EA |
| 90 | 441169 | COVER DUST,5/8in x 1/2in | 1.00 EA |
| 100 | 470145 | CAP,PLASTIC,.25IDx.50LG,RED | 3.00 EA |
| 110 | 470154 | CAP,PLSTC,.406IDx.438562,RED | 1.00 EA |
| 112 | 021307FL | HOSE ASSY,BREATH,I8000 | 1.00 EA |
| 115 | 140112 | DISPLAY,2x20 VFD 9MM | 1.00 EA |
| 120 | 470218 | SEAL, TAMPER EVIDENT, SERVICE | 1.00 EA |

| _A | | | | | |
|----|--|--|--|--|--|
| | | | | | |
| | | | | | |
| | | | | | |

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



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Joshua Smith Director

Certificate of Analysis - Dry Gas

ALPHA INSTRUMENT

Intoxilyzer - Alcohol Analyzer

Model 8000

SN 80-002591

10:42

08/11/2022

| Test | g/210L | Time |
|-----------------|--------|-------|
| Air Blank | 0.000 | 10:42 |
| Cal Check | 0.080 | 10:43 |
| Air Blank | 0.000 | 10:43 |
| Cal Check | 0.080 | 10:44 |
| Air Blank | 0.000 | 10:44 |
| Cal Check | 0.080 | 10:44 |
| Air Blank | 0.000 | 10:45 |
| Cal Check | 0.080 | 10:45 |
| Air Blank | 0.000 | 10:46 |
| Cal Check | 0.080 | 10:46 |
| Air Blank | 0.000 | 10:47 |
| Cal Check | 0.080 | 10:47 |
| Air Blank | 0.000 | 10:47 |
| Cal Check | 0.080 | 10:48 |
| Air Blank | 0.000 | 10:48 |
| Cal Check | 0.080 | 10:49 |
| Air Blank | 0.000 | 10:49 |
| Cal Check | 0.080 | 10:50 |
| Air Blank | 0.000 | 10:50 |
| Cal Check | 0.080 | 10:50 |
| Air Blank | 0.000 | 10:51 |
| Cal Check Stats | | |
| Average | 0.0800 | |
| Std Dev | 0.0000 | |
| Rel Std Dev(%) | 0.0000 | |

| | n-Alcohol Equivalent (g/210L) Ratio of Nitrogen a 0.08 g/210L = 208 PPM ÷ 2605 | |
|--|---|---|
| Manufacturer: ILMO | Manufacturer Cert. No.: 14879 | Cylinder Size: 105L |
| Lot No.: 15922080A3 | Cylinder No.: 002 | Expiration Date: 08/05/2024 |
| prescribed by the State Director of Tests p calibrating unit in accordance with 47 O.S. | ursuant to 40 OAC 30-1-3. The above NIST traceat 759, 40 OAC 25-1-3, and appears on the current co of Transportation in the Federal Register [77 FR 645 | 8000 and was performed in accordance with the procedures oble reference standard meets the requirements for use as a conforming products list of calibrating units for breath alcohol 888 et seq]. * See Dubowski, K.M. and Essary N., Journal of |
| Signature | Date: 08/1 | 1/2022 |
| Name Christopher Pape | Permit No.: 2 | 3020 |



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:

14879

Part #:

BAC105L080T

Cylinder Size:

105L

Lot Number:

15922080A3

Expiration:

8/5/2024 *

RLV) 7/29/2022 CP

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

Contents:

105 Liters @ 1000 psig 70°F (21°C)

Analytical

Reported

208 ppm

Balance

Accuracy

Analytical

Component:

Concentration:

(U, k=2):

Method:

Ethanol

Nitrogen

+/-0.002 BAC(G/210L) NDIR

[5.2 ppm]

Distributed by:

CMI Inc.

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

*Traceable to:

NIST Research Gas Mixture - 212.6 µmol/mol Ethanol in Nitrogen - Serial No. SA15944

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



The calibration esuits 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.

10/20

OFFICER'S AFFIDAVIT AND NOTICE OF REVOCATION/DISQUALIFICATION

| ADDECT BATE | | REST TIME | TOW/D | COUNTY | | ICITY | / V / / . | CITATIO | NI # | | Section |
|--|---|---|---|---|--|--|---|--|---|---|--------------------------|
| 08/17/2022 | | .530 | | 55 | | City | " | CHAIL | | | |
| RREST LOCATION BOT | | | | | CITY | | | | COUN | TY CLAHC | AMO |
| UBJECT NAME | 7354507076 | | | | | ATE OF | | SE | X | HEIGHT | WEIGHT |
| BREATHTEST, | DELTA | | TOUT W | | - 14 | 01/ | 01/1 | 985 N | 1 | 510 | The second second second |
| 3600 MLK | | | OKL | AHOMA C | ITY | | | OK | | 73 | |
| PRIVER LICENSE # | | | 1.2. | EXPIRATION DA | ATE | | STATE | CLASS | REST | RICTIONS | ENDORSEMENTS |
| B083463042 | | MODEL | | 10/31 | /202 | TAG | OK | D | STATE | CMV | PLACARD |
| MOCK | | MOCK | | | | | CK | | OK | N | N |
| ighway, street, tumpike, public publi | ntoxicating substances as imstances): TEST , actions, etc.): | prohibited by law. | | | 000000 | | inte single (| | Telling Tilling | | |
| | | | WAS INFORMED OF | | | | | | | | Castlan |
| REATH-ALCOHOL ANALYSIS QUIPMENT | RECORD, REPORT OF T | | NUMBER | E, and LOG OF TE SPECIALIST | ST AND I | MAINTEN | ANGE REC | ORD. | | | Section : |
| I-8000 | | | -005144 | BOARD | OF ' | | | | | | |
| Dry | | | 0.080 | | PERMIT 230 | | 3 | | | | |
| MANUFACTURER | | | LOT# | elefolal a | DATE CY | LINDER | INSTALLE | | ATE CYLING | | |
| ILMO DESERVATION START TEST | DATE | | 15922 | | - | | 2022 | | 08/0 | 5/20: | 24 |
| | 717/2022 | | period w | te (or greater) as observed p | orior to | and c | ontinuir | | | THE S | TAN |
| Test | g/210L | Time | | the time of tesered said B | A. C | A 633 | 3 / 1 7 | 57.5 | 13/3 | | |
| Subject Test Breath Volume Air Blank Wait Air Blank Subject Test Breath Volume | 0.00 2.257 LITERS 0.00 0.00 0.00 2.140 LITERS | 16:11 16:13 16:13 16:13 | CONTRACTOR OF THE PARTY | ce with the | | | | ting | S TABERT 8 | 180 | |
| Air Blank Cal Check | 0.00 | 16:14 16:14 | NAME | | | | | | 10.00 | Test R | esult |
| Air Blank | 0.00 | 16:15 | PAPE, CH | RISTOPHE | R TPERMIT | , | | | I | BrAC g | /210L |
| | | | 0000000 | 484 | 000 | 0002 | 3020 |) | 11111 | 0 | 0.0 |
| | | | BOARD O | F TESTS | | | | | 1 | 0. | 00 |
| FFECTIVE THIRTY (30) DAY as or more, if you refused or perating a CMV or CDL holde is a result of this arrest by filing ou may be eligible to participle of this equest IDAP within thirty (30 ERVING OF NOTICE: accountability Program to late served: | failed the state's test(s). ar) OR a test result of .04 g a petition in the District pate in the Impaired D arrest from appearing days of the date liste personally hand de the person named | In addition, your co 4 or more while opera 5 Court of the County river Accountability on your driving rec ad below. Mail the r elivered a copy of | mmercial driving priv ating a commercial m in which you were an Program (IDAP) ac ord. Participation i equest for IDAP to the above conta- ve. | ilege in this state valotor vehicle. You rested. Your petil dministered by the in IDAP may redu the Department of | will be dis may app tion must te Depart te the au of Public | qualified eal any l be filed ment of mount o Safety a | if you refu Departmen within thirty Public Sa f fees you at P.O. Box | sed or failed the tall action againt (30) days of fety (DPS). Consider the will be required 11415, Oklah | ne state's te nst your driv the date liste completion red to pay to noma City, | st(s) ver license ed below. of IDAP made to the State OK 73136. | a. You must |
| ate served: | | | | mada it i | | و و د د دا د | the title | (avarates t | | | Section |
| accordance with Title 1 ate: | 2 O.S. Section 426, Place (location | | enalty of perjury | under the laws | | | | foregoing is g officer: | true and | correct." | Section |
| AME | Since State Street | ,,,,orr orginod) | | AGENCY | | | Z-1-1- | 3 55511 | | | |
| ADGE | STOPHER AGENCY ADDRESS | | | BOARD | OF | TES | IP CODE | PHONE | -40=5 | 460 | |
| 0000000484 | INTER-AG | ENCY | | | | | 0000 | 0 40 | 54252 | 460 | |
| THER WITNESSES: | | | | | | | | | | | Section |
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| 2 | | | | 4 77 11 14 11 | | | | | | | |

11/20

OFFICER'S AFFIDAVIT AND NOTICE OF REVOCATION/DISQUALIFICATION

| REST DATE 08/17/2022 | | ARREST TIME | | COUNTY# | _ | CITY# | CITATI | ON# | | Sectio |
|--|--|--|---|---|---|--|---|---|--|--|
| RREST LOCATION | | 1530 | | 155 | ICITY | | | Icoun | ITY | 5272 |
| BOT | | | | | | | | OF | CLAHC | MA |
| BJECT NAME | DET 513 | | | | | E OF BIRTH | | EX Na | HEIGHT | WEIGHT |
| BREATHTEST, | DELTA | | ICITY | | 0 | 1/01/19 | STATE | M | ZIP COD | |
| 8600 MLK | | | | HOMA C | | IOTATE | OK | | 731 | |
| 3083463042 | | | | 10/31 | 2022 | | D | | 1.474 | |
| HICLE MAKE MOCK | | MOCK | | | | MOCK | | OK | N CMV | PLACARD N |
| the above date, time, and local tway, street, turnpike, public puence of alcohol and/or other in scribe driving behavior or circu MOCK SUBJECT | arking lot, or other pub ntoxicating substances imstances): | lic place, or upon a private | d I had reasonable groun e road, street, alley or lan | ids to believe the p ne which provides a | erson was o ccess to or | driving or in actual i ne or more single o | ohysical cont r multi-family | rol of a motor dwelling within | vehicle upon n this state w | a public road, hile under the |
| scribe person's condition (odor | actions ato V | | | | | | | | | |
| POST REPAIR M | | | D NEW CYLI | | ENT TEST | PEOUEST | | | | |
| EATH-ALCOHOL ANALYSIS | RECORD, REPORT C | | | At a Control of the Control | | | ORD. | | | Sectio |
| DUIPMENT | | SERIAL | NUMBER S | PECIALIST | | 75.30 KW | | | | |
| 1-8000 | | 80- | -005144 | | OF T | ESTS | | | | |
| ory | | | 0.080 | | 2302 | | | | | |
| NUFACTURER | | | LOT# | | DATE CYLI | NDER INSTALLED | | DATE CYLIN | | |
| LMO | | | 159220 | | 08/1 | 7/2022 | | 08/0 | 5/202 | 24 |
| SERVATION START TEST | DATE /17/2022 | | A 15-minute | (or greater) | | | ion | | | |
| Air Blank Subject Test Breath Volume Air Blank Wait Air Blank Subject Test | 0.00 0.00 2.257 LITER 0.00 0.00 0.00 2.140 LITER | 16:11 16:13 16:13 16:13 | 1 | | applica | able operat | 4.1.100 | NEW TREAT | 190 | |
| Breath Volume Air Blank Cal Check Air Blank | 0.00 0.08 0.00 | 16:14 16:15 | BADGE # 00000004 AGENCY BOARD OF | TESTS | OOO | 0023020 | | | • | 210L 00 |
| Air Blank Cal Check Air Blank FECTIVE THIRTY (30) DAY s or more, if you refused or retaing a CMV or CDL holde a result of this arrest by filling u may be eligible to partici cocation as a result of this usest IDAP within thirty (30 RVING OF NOTICE: | O.08 O.00 S FROM DATE SER failed the state's lest or; OR a test result of g a petition in the Distipate in the Impaired arrest from appearit) days of the date litersonally hand | 16:14 16:15 VED. Notice of Revoc (s). In addition, your co f.04 or more while oper- trict Court of the County d Driver Accountability ing on your driving rec isted below. Mail the r delivered a copy of ed in Section 1 abor | PAPE, CHR BADGE # 00000000 AGENCY BOARD OF ation is given that your mmercial driving privile ating a commercial mot in which you were arre y Program (IDAP) adm ord. Participation in request for IDAP to the the above containing. | TESTS r driver's license in this state whor vehicle. Your petition inistered by the IDAP may reduce be Department of | s revoked be disquency appear on must be Departme e the amo | or denied for a pe alified if you refus I any Department. Filled within thirty ent of Public Saf- cunt of fees you fety at P.O. Box | ed or failed al action aga (30) days of ety (DPS). will be requ 11415, Okla | hundred eigh the state's te ainst your driv f the date list Completion lired to pay to ahoma City, Departmen | BrAC g. O . (ty (180) st(s) ver license ed below. of IDAP mat to the State OK 73136. ht Impaire | Section Sectio |
| Air Blank Cal Check Air Blank FECTIVE THIRTY (30) DAY s or more, if you refused or erating a CMV or CDL holde a result of this arrest by filling u may be eligible to partici ocation as a result of this uest IDAP within thirty (30 RVING OF NOTICE: countability Program to | O.08 O.00 S FROM DATE SER failed the state's test or; OR a test result of g a petition in the Distipate in the Impaired arrest from appeario) days of the date lit personally hand the person name | VED. Notice of Revoc (s). In addition, your co f.04 or more while operatrict Court of the County d Driver Accountability ing on your driving recisted below. Mail the red delivered a copy of ed in Section 1 abor | PAPE, CHR BADGE # 00000000 AGENCY BOARD OF ation is given that your mmercial driving privile tating a commercial mot in which you were arre y Program (IDAP) adm tord. Participation in request for IDAP to the f the above containing. | TESTS r driver's license ege in this state we tor vehicle. You rested. Your petitininistered by the IDAP may reduce Department of ing the Notice | s revoked il be disquanan appea on must be Departme e the amo Public Sa of Revo | or denied for a pe alified if you refus I any Department. Filled within thirty ent of Public Saf- unt of fees you fety at P.O. Box cation and the | ed or failed al action age (30) days of ety (DPS). will be requ 11415, Okla Notice of | hundred eigh the state's te ainst your driv f the date list Completion Dired to pay to ahoma City, Departmen | BrAC g. O . (ty (180) st(s) ver license ed below to the State OK 73136, ont Impaire | Section Sectio |
| Air Blank Cal Check Air Blank FECTIVE THIRTY (30) DAY s or more, if you refused or erating a CMV or CDL holde or result of this arrest by filling umay be eligible to partici ocation as a result of this uest IDAP within thirty (30 RVING OF NOTICE: countability Program to the served: accordance with Title 1 | S FROM DATE SER falled the state's test or) OR a test result of g a petition in the Distipate in the Impaired arrest from appearing days of the date little personally hand the person named 2 O.S. Section 42 | VED. Notice of Revoc (s). In addition, your co f.04 or more while operatrict Court of the County d Driver Accountability ing on your driving red isted below. Mail the red delivered a copy of ed in Section 1 abor Signature of office | PAPE, CHR BADGE # 00000000 AGENCY BOARD OF ation is given that your mmercial driving privile tating a commercial mot in which you were arre y Program (IDAP) adm tord. Participation in request for IDAP to the f the above containing. | TESTS r driver's license ege in this state we tor vehicle. You rested. Your petitininistered by the IDAP may reduce Department of ing the Notice | s revoked ill be disquanay appea on must be Departme e the amo Public Sa of Revo | or denied for a pe alified if you refus I any Department. Filled within thirty ent of Public Saf- unt of fees you fety at P.O. Box cation and the | ed or failed al action ags (30) days oi ety (DPS). will be requ 11415, Okla Notice of | hundred eigh the state's te ainst your driv f the date list Completion Dired to pay to ahoma City, Departmen | BrAC g. O . (ty (180) st(s) ver license ed below to the State OK 73136, ont Impaire | Section Sectio |
| Air Blank Cal Check Air Blank ECTIVE THIRTY (30) DAY s or more, if you refused or erating a CMV or CDL holde result of this arrest by filing may be eligible to partici ocation as a result of this may be eligible to partici ocation as a result of this countability Program to the served: the served: the countability Program to the served: | S FROM DATE SER failed the state's test in OR a test result of g a petition in the Distipate in the Impaired arrest from appear i) days of the date lit personally hand the person name 2 O.S. Section 42 | VED. Notice of Revoc (s). In addition, your co f.04 or more while operatrict Court of the County d Driver Accountability ing on your driving recisted below. Mail the red delivered a copy of ed in Section 1 abor | PAPE, CHR BADGE # 00000000 AGENCY BOARD OF ation is given that your mmercial driving privile tating a commercial mot in which you were arre y Program (IDAP) adm tord. Participation in request for IDAP to the f the above containing. | TESTS r driver's license is gge in this state we tor vehicle. You rested. Your petitionistered by the IDAP may reduce Department of ing the Notice under the laws | s revoked ill be disqu nay appea on must be Departme e the amo Public Sa of Revoi | or denied for a pe alified if you refus I any Department. Ifiled within thirty ent of Public Saf- unt of fees you, ifety at P.O. Box cation and the | ed or failed al action ags (30) days oi ety (DPS). will be requ 11415, Okla Notice of | hundred eigh the state's te ainst your driv f the date list Completion Dired to pay to ahoma City, Departmen | BrAC g. O . (ty (180) st(s) ver license ed below to the State OK 73136, ont Impaire | Section Sectio |
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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 03/08/2022 11:33

| Test | g/210L | Time |
|-----------------|--------|-------|
| Air Blank | 0.000 | 11:34 |
| Cal Check | 0.022 | 11:34 |
| Air Blank | 0.000 | 11:35 |
| Cal Check | 0.021 | 11:36 |
| Air Blank | 0.000 | 11:36 |
| Cal Check | 0.021 | 11:37 |
| Air Blank | 0.000 | 11:37 |
| Cal Check | 0.021 | 11:38 |
| Air Blank | 0.000 | 11:38 |
| Cal Check | 0.021 | 11:39 |
| Air Blank | 0.000 | 11:40 |
| Cal Check | 0.021 | 11:40 |
| Air Blank | 0.000 | 11:41 |
| Cal Check | 0.020 | 11:42 |
| Air Blank | 0.000 | 11:42 |
| Cal Check | 0.021 | 11:43 |
| Air Blank | 0.000 | 11:43 |
| Cal Check | 0.021 | 11:44 |
| Air Blank | 0.000 | 11:45 |
| Cal Check | 0.020 | 11:45 |
| Air Blank | 0.000 | 11:46 |
| Cal Check Stats | | |
| Average | 0.0209 | |
| Std Dev | 0.0005 | |
| Rel Std Dev(%) | 2.7158 | |

| NIST Traceable Breath-Alcohol Ed | quivalent (g/210L +/- 3%) Ratio of ethanol and v | vater free of test interfering substances. | |
|---|--|---|--|
| Manufacturer: Guth | Manufactured Date: 04/07/2021 | Concentration: 0.02 | |
| Lot No.: 21120 | Expiration Date: 04/07/2023 | Equipment Model: Guth 2100 | |
| to 40 OAC 25-1-2.1. Approved breath-alcohol mea | to 40 OAC 30-1-3. The above NIST traceable refusivement equipment and reference solutions. Equ | as performed in accordance with the procedures erence solution meets the requirements for use pursuant ipment used appears on the current or supplemented y the National Highway Traffic Safety Administration. | |
| Signature | Date: | Date: 03/08/2022 | |
| Name Christopher Pape | Permit No.: 2302 | Permit No.: 23020 | |



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Joshua Smith Director

Certificate of Analysis - Reference Solution

ALPHA INSTRUMENT 2 Intoxilyzer - Alcohol Analyzer Model 8000 SN 80-004923 03/08/2022 11:53

| Test | g/210L | Time |
|-----------------|--------|-------|
| Air Blank | 0.000 | 11:53 |
| Cal Check | 0.041 | 11:54 |
| Air Blank | 0.000 | 11:54 |
| Cal Check | 0.041 | 11:55 |
| Air Blank | 0.000 | 11:56 |
| Cal Check | 0.042 | 11:56 |
| Air Blank | 0.000 | 11:57 |
| Cal Check | 0.042 | 11:58 |
| Air Blank | 0.000 | 11:58 |
| Cal Check | 0.042 | 11:59 |
| Air Blank | 0.000 | 11:59 |
| Cal Check | 0.041 | 12:00 |
| Air Blank | 0.000 | 12:01 |
| Cal Check | 0.041 | 12:01 |
| Air Blank | 0.000 | 12:02 |
| Cal Check | 0.041 | 12:02 |
| Air Blank | 0.000 | 12:03 |
| Cal Check | 0.041 | 12:04 |
| Air Blank | 0.000 | 12:04 |
| Cal Check | 0.042 | 12:05 |
| Air Blank | 0.000 | 12:05 |
| Cal Check Stats | | |
| Average . | 0.0414 | |
| Std Dev | 0.0005 | |
| Rel Std Dev(%) | 1.2473 | |

| Lot No.: 21070 Expiration Date: 03/01/2023 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 supplements Conforming Products List of Calibrating Units for Breath Alcohol Testers (72 FR 34747), published by the National Highway Traffic Safety Administration | Manufacturer: Guth | Manufactured Date: 03/01/2021 | Concentration: 0.04 |
|---|---|---|---|
| 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 purs to 40 OAC 25-1-2.1. Approved breath-alcohol measurement equipment and reference solutions. Equipment used appears on the current or supplemente Conforming Products List of Calibrating Units for Breath Alcohol Testers (72 FR 34747), published by the National Highway Traffic Safety Administration | Lot No.: 21070 Expiration Date: 03/01/2023 | | Equipment Model: Guth 2100 |
| Name Christopher Pape Permit No.: 23020 | prescribed by the State Director of Tests puto 40 OAC 25-1-2.1. Approved breath-alcohonforming Products List of Calibrating Uni | ursuant to 40 OAC 30-1-3. The above NIST traceable refined measurement equipment and reference solutions. Equits for Breath Alcohol Testers (72 FR 34747), published by | erence solution meets the requirements for use pursuant uipment used appears on the current or supplemented y the National Highway Traffic Safety Administration. |



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Joshua Smith Director

Certificate of Analysis - Reference Solution

ALPHA INSTRUMENT

Rel Std Dev(%)

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 | |

| Manufacturer: Guth | Manufactured Date: 03/07/2022 | Concentration: 0.10 |
|---|--|--|
| Lot No.: 22080 | Expiration Date: 03/07/2024 | Equipment Model: Guth 2100 |
| to 40 OAC 25-1-2.1. Approved breath-alc | pursuant to 40 OAC 30-1-3. The above NIST traceable reformed in the properties of th | uipment used appears on the current or supplemented y the National Highway Traffic Safety Administration. |
| Name Christopher Pape Permit No.: 2302 | | 20 |

0.4815



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

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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 | |

| Manufacturer: Guth | Manufactured Date: 02/07/2022 | Concentration: 0.20 |
|---|--|---|
| Lot No.: 22050 | Expiration Date: 02/07/2024 | Equipment Model: Guth 2100 |
| prescribed by the State Director of Tests purs to 40 OAC 25-1-2.1. Approved breath-alcoho Conforming Products List of Calibrating Units | frared Spectroscopy utilizing the Intoxilyzer 8000 and w suant to 40 OAC 30-1-3. The above NIST traceable ref I measurement equipment and reference solutions. Eq for Breath Alcohol Testers (72 FR 34747), published b | erence solution meets the requirements for use pursuan ulpment used appears on the current or supplemented |
| Signature A | Date: 06/27/2 | |
| Name Christopher Pape Permit No.: 2302 | | 20 |



RCVD 8/26/21

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 21120 of
Alcohol Reference Solution for Simulator were analyzed by
gas chromatography on April 16, 2021, using a Perkin Elmer Gas
Chromatograph Autosystem XL S/N: 610N9030209, and found to contain
0.0237% (w/vol) ethyl alcohol. The expiration date for this lot
number is April 7, 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 FN08031603 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.



RCV'D 8/26/21 CP

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 21070 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on March 2, 2021, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.0488% (w/vol) ethyl alcohol. The expiration date for this lot number is March 1, 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.

5/9/2022

Certified Alcohol Reference Solution for Simulator

Q

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.

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 XI. 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.

| <u>Location Returned From</u> | Unit Serial # | Date:20/20 |
|---|--|---|
| Stillwater PD 1 | 80-005144 | 11/19/21 |
| | Old Cylinder #: 287190 ister from Unit | n inventory |
| Check in Procedure ✓ Connect unit to ethernet connection 172.019. ✓ Download any stored records 1 ✓ Change unit location to Serial number ✓ Update Unit Date and time Previous time: 11/19/2021 08:51 New Time: 11/19/2021 08:51 ✓ Execute a new Forms load on the unit Lab Evaluation Breath Hose Hold Vacuum?: | Notes from the Field Routine Swap Test Chamber Hold Vacuum?: | Issues in the Field |
| $\frac{\text{DVM}}{3\mu\text{m}} \frac{12917}{13048}$ Chamber Temp | 47.00 Snap Test ok? | |
| | Fan (F6) Red (F7) Fan (F9) Fan (F9) Fan (F9) Fan (F9) Fan (F9) Flow Sensor Flow Sensor Resistance 88 | Tank Sensor Value 560 Value 18 regulator close to Tank Sensor Value? |
| Invoice Sent | Sent and 9μm are close. 3μm = 12917 and 9 ced, value is at 88. Atmo sensor may ne | |
| Repairs needed: Breath Hose Leaking Atmo Sensor needs calibrated flow sensor needs replaced 3&9μm DVM are close | Repairs Made: | |
| | Ready for Bench Check? | |