

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

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 80-005147, 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 10 01 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: 02/02/2022

SERIAL: 80-005147

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
- Mock Subject Test
- BOT Certificate of Analysis on Certified Solutions (4)



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

MEMORANDUM

DATE: February 11, 2022

TO: FILE

A scrivener's error was identified on BOT Form 4.0 Certificate of Maintenance, Calibration, and Operation as a result of multiple sessions of drafting. The form contained in this maintenance packet has been amended and updated to include the intended information. The agency apologizes for any inconvenience this may have caused.

Joshua Smith State Director

Cc: Intoxilyzer 8000 maintenance folder



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 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. 80-005147 on 02/02/2022 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.: 28021080A2-049

BOT analysis average test result: 0.080 Cylinder expiration date: 12/05/2023

Joshua Smith

Name

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

| Simulator Model | 1 0 0 0 0 0 0 | Guth 2100 | Guth 2100 |
|--------------------------|---------------|------------|------------|
| Guth 2100 | Guth 2100 | Guin 2100 | Odinzion |
| Serial # | | DD2504 | DR3754 |
| DR3685 | DR3694 | DR3594 | Ditoros |
| Concentration | 1.7- | | .20 |
| .02 | .04 | .10 | .20 |
| LOT# | | | 00460 |
| 21120 | 21070 | 21190 | 20160 |
| Manufactured Date | 77 - 77 - 77 | | 03/18/2020 |
| 04/07/2021 | 03/02/2021 | 06/09/2021 | 03/16/2020 |
| Expiration Date | | 00/00/0000 | 03/18/2022 |
| 04/07/2023 | 03/01/2023 | 06/08/2023 | 03/10/2022 |
| Solution Commission Date | | | |
| 01/31/2022 | 01/31/2022 | 01/31/2022 | 01/31/2022 |
| | | | |

State Director

Title

| | 0.1.0.1.2. | | |
|-------|--|----------------------|-------------------------------|
| | Solution Commission Date | | |
| | 01/31/2022 | 01/31/2022 | 01/31/2022 |
| Chap. | ted by BOT Personnel: Christoph re/Name | Breath-Alcohol Title | Testing Program Administrator |

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

| CH CHECK DATE 2/02/2022 | 10:27:2 | AN | STRUMENT LOCATION 80-005147 | | |
|----------------------------|-----------------|---------|-----------------------------|-------------|---------|
| RUMENT TYPE | INSTRUME I-8 | | 777 | 80-005 | |
| ntoxilyzer | 1-8 | TEST RE | SULTS | | |
| | | | | | |
| | | | | | |
| Diagnostic | cs | | | | |
| PASS | | | | | |
| Mouth Alcoho | l Test | | | | |
| PASS | | | | | |
| RFI Test | | | | | |
| PASS | | Dı | plicate Breath | Sampling Re | sults |
| Abort Tes | st | | Private Private | | Control |
| PASS | | Value | Test 1 | Test 2 | Test |
| Improper Samp | ole Test | | | | |
| PASS | | .02 | 0.019 | 0.019 | 0.021 |
| Interferent Dete | act Test | .04 | 0.040 | 0.039 | 0.042 |
| PASS | | | | 0 100 | 0.102 |
| | | .10 | 0.102 | 0.100 | |
| No Sample Giv PASS | | .20 | 0.203 | 0.199 | 0.202 |
| | | | PA | ASS | |
| Insufficient San | | | | | |
| | | | | | |
| Air Blank Contami | | | | | |
| PASS | | | | | |
| D. C. C. | led Test | | | | |
| PASS | | | | | |

CHRISTOPHER

PAPE,

0000023020

Certificate of Calibration

This is to certify the calibration of INIONINZET® serial number 80-005147, 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 Dec 28, 2021

Signed

Sujanne Russell

INC.

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 instrument to be serviced. Failure to complete and return this form may cause delays in service.

| Contact information Name: Board of Fax: (405) 425 249 | Customer Number Tests | 731362 Phone: (405) christopher.pape | |
|--|---|--|---|
| 2. Bill to Address: Bo | oard of Tests 00 N ML King, Bldg 9 KC, OK 73111 | Ship to Address: | Board of Tests 3600 N ML King, Bldg 9 OKC, OK 73111 |
| 3. Serial Number: 80 | -005147 | Instrument Model | Intoxilyzer 8000 |
| | 일 규칙하다 하다 하다 그 모든 이 사람이 된 그래요 하다 모든 모든 모든 때문이다. | | |
| ☑ I Authorize Repair | /laterial Warning! - <u>DO NO</u> rs Up To: □All □\$250 | o <u>T</u> return gas cylind ⊠\$500 | Other \$ |
| ☑ I Authorize Repair Purchase Order N | /laterial Warning! - <u>DO NO</u> rs Up To: □All □\$250 | o <u>T</u> return gas cylind ⊠\$500 | ers with instrument!*** |
| I Authorize Repair Purchase Order N Authorized By: Chris Pape Name (Please Print) Signature | //aterial Warning! - <u>DO NO</u> rs Up To: □All □\$250 Number (attach a copy of F | T return gas cylind \$500 \$750 P.O. if applicable) Shesting Admin Cl | ers with instrument!*** Other \$ |



SERVICE WORK ORDER

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

Ship To:

406068

Bill To:

DATE: 6/8/2021

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

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

Oklahoma Board Of Tests DNU Po Box 36307 3600 N MI King Blvd Blg 9 Oklahoma City OK 73111 USA Phone: 405-425-2424

BILL CODE: Out of Warranty

Serial Number: 80-005147 MODEL #: 002480OK

EXTRA PARTS RCVD:

KB,BH,BATTERY B11-2818,GAS SHELF W/REG GR-6145 **ALSO CAME WITH 500-082193

DESCRIPTION OF PROBLEM

UNABLE TO BENCH CHECK. READING 0.20 SOLUTION AT .191 ON 1ST TEST AND .188 ON SECOND TEST.

WORK PERFORMED:

Unit unable to bench check; Foam filter was falling apart; Solenoid leaked; Tygone Tubing was dirty; Replaced parts listed; Calibrated and Final tested;

| No | Part | Description | Quantity |
|--------------------------------|--|---|---|
| 90 100 110 120 130 | 650517 441169 470145 470154 470218 530030 | CERTIFICATE OF CALIBRATION COVER DUST,5/8in x 1/2in CAP,PLASTIC,.25IDx.50LG,RED CAP,PLSTC,.406IDx.438562,RED SEAL,TAMPER EVIDENT,SERVICE TUBING,TYGON,.375IDx.562OD | 2.00 EA 1.00 EA 3.00 EA 1.00 EA 1.00 EA 2.00 IN 1.00 EA |
| 140 150 | 021357 470202 | SOLENOID ASSY,18000 FILTER,FOAM,1.85x2.20 | 1.00 EA 1.00 EA |

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

Technician Name: Zach Estes

SRV4060680001

SCTicket: SDH-PROD: Ver1.7 (2020-01-16)

Page: 1 of 3

| Certifica | ate of Analysis – Dry Gas | |
|------------------|--------------------------------|----------|
| 12/16/20 | 21 0.080 | |
| Date of Analysis | Labelled target value (g/210L) | |
| 049 | 0.080 | |
| Cylinder II | Average test result | |
| Christopher 1 | | specialt |



In accordance with BOT Maintenance Policy and Procedure Statement, the above referenced dry gas cylinder is suitable for use as an external reference 2/11/7:1245-23/18/300-Fax: 217-243-7634 • www.ilmoproducts.com ALPHA INSTRUMENT 2 Intoxilyzer - Alcohol Analyzer SN 80-004923 Model 8000 14:07 12/16/2021

Time

14:07 14:08

14:08 14:09 14:09 14:09 14:10

14:10

14:11

14:11

14:12

14:12

14:13

14:13 14:13 14:14 14:14

14:15 14:15 14:15 14:16

| Test | g/210L |
|-----------------|--------|
| Air Blank | 0.000 |
| Cal Check | 0.080 |
| Air Blank | 0.000 |
| Cal Check | 0.080 |
| Air Blank | 0.000 |
| Cal Check | 0.080 |
| Air Blank | 0.000 |
| Cal Check | 0.081 |
| | 0.000 |
| | 0.080 |
| Air Blank | 0.000 |
| Cal Check | 0.080 |
| Oir Rlank | 0.000 |
| Cal Check | 0.080 |
| Air Blank | 0.000 |
| Cal Check | 0.080 |
| Air Blank | 0.000 |
| Cal Check | 0.081 |
| Air Blank | 0.000 |
| Cal Check | 0.080 |
| Air Blank | 0.000 |
| Cal Check Stats | |
| Average | 0.0802 |
| Std Dev | 0.0004 |
| Rel Std Deu(%) | 0,5257 |

Certificate of Analysis

Certificate ID:

14351

Part #:

BAC105L080T

Cylinder Size:

105L

Lot Number:

28021080A2

Expiration:

12/5/2023

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:

Ethanol

Nitrogen

Concentration:

(U, k=2):

Method:

+/-0.002 BAC(G/210L) NDIR [5.2 ppm]

Distributed by:

CMI Inc. 316 East Ninth St Owensboro, KY Phone 866-835-0

www.alcoholtest.

*Traceable to:

Certified Reference Material - 262.4 µmol/mol

Ethanol in Nitrogen - Serial No. GN0015026 Lot No. 050319E11

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

11-69-2021



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

Section 1

| POPOT DATE | ARREST T | ME | The state of the s | COUNTY# | C | TY# | CITA | TION# | | | |
|--|--|--|--|---|--|--|--|--|---|-------------------------|--|
| REST DATE 02/02/2022 | 1115 | 5 | | 55 | CITY | | | _ | COUNTY | AHC | MZ |
| REST LOCATION | | | | | To a con- | OF BIRTH | | SEX | OKI | HEIGHT | WEIGHT |
| BOT IBJECT NAME | 2000 AVA AV | | | | DATE | L/01/1 | | M | | 510 | 200 |
| BREATHTEST, | DELTA | | ICITY | 7.7 | 0.00 | -11 - | STA | | | 731 | 1 1 |
| DRESS | 11.0 | | OKLAHO | OMA C | ITY | Tana and | the second second second | K | RESTRI | | L T T ENDORSEMENT: |
| 3600 MLK | | | IEX | PIRATION DA | TE | OK | D | | RESTRU | 2,10,10 | 2012 47 (2 d) (1/2) |
| B083463042 | | 0.100 | | 10/31 | | TAG# | | | ATE | CMV | PLACARD |
| CUOLE SALVE | | MOCK | | | | MOCK | | (| OK | N | N |
| MOCK | tion, the above named person wa | racested and | had reasonable grounds t | o believe the | person was c | triving or in actua | I physical c | ontrol of | no within | hicle upor his state | yhile under the |
| hway, street, turnpike, public pa luence of alcohol and/or other in escribe driving behavior or circu MOCK SUBJECT | itoxicating substances as prohibit mstances): | ed by law. | ado, street, alicy of faile w | | 7777 | | | | | | |
| escribe person's condition (odor | actions, etc.); | DOTA | | Acres 1 | | | | | | | |
| POST REPAIR M | | STALLED | NEW CYLIN | DER | | | | | | | |
| FODI RELITATION | | | | | | | | | | | |
| | | THE PERSON W | AS INFORMED OF THE | IMPLIED CO | NSENT TEST | REQUEST | conc | | _ | _ | Section |
| PEATH-ALCOHOL ANALYSIS | RECORD, REPORT OF THE PE | RSON NAMED I | N SECTION 1 ABOVE, an | d LOG OF T | ST AND MA | INTENANCE RE | CORD. | _ | | | |
| QUIPMENT | | I SERIAL IV | Charle | CIALIST | OF T | ESTS | | | | | |
| I-8000 | | 80- | 005147 B | OMIC | PERMIT N | UMBER | | | | | |
| TANDARD | | | 0.080 | | 230 | 20 | dia. | Ines | E CYLINI | ER EXPI | RES |
| Dry | | | LOT# | 070 | DATE CYL | INDER INSTALL 02/202 | 2 | 1 | 2/0 | 5/20 | 23 |
| ILMO | | | 2802108 | 30A2 | | | | 1 | | | |
| DESERVATION START TEST | DATE (DODG) | | A 15-minute (| or greate | r) depriv | ation/observ | ation | | | _ | |
| 1130 03 | 2/02/2022 | | period was | observed | prior to | and continu | ing | | 1 | THE | STATE |
| RESULT TABLE | | 100.00 | to the | time of t | est admir | nistration. | | | 10 | + ** | 14 4 69 |
| Test | g/210L | Time | Tarin Carlot Street | 12 N A LOT | AUT AT | | 0 4 14 | 11 | 17/4 | *** | 1 × × × /0 |
| Air Blank Subject Test Breath Volume | 0.00 0.00 2.039 LITERS | 12:00 12:00 | I administere | with th | e applie | cable oper d of Test | rating | | EAT BE | | |
| Air Blank | 0.00 | 12:01 | proced | | //_ | 0 | | | 12 | *** | |
| Wait | 0.00 | 12:03 | 16/10 | 111 | 2/ | | | | 1 | 1 | 007 |
| Air Blank Subject Test | 0.00 | 12:03 | SIGNATURE OF O | PERATOR | 7 | | _ | | | - | 901 |
| Breath Volume | 2.089 LITERS | 41.04 | SIGNATORE STO | , might design | | | | | | | TENTAL - |
| Air Blank | 0.00 | 12:04 | NAME | THE TANK | 20 | | | | | | Result |
| Cal Check | 0.08 | 12:04 | | ISTOPH | ER IPERMIT | | Dr. | - | | BrAC | g/210L |
| Air Blank | 0.00 | 12.05 | 00000004 | 94 | 000 | 00230 | 20 | | | 0. | 0.0 |
| Y THE STATE OF | | | AGENCY | | 1.00 | | | 7 | | U. | . 00 |
| | | | DOADD OF | TEST | 5 | | | | | | Secti |
| days or more, if you refused operating a CMV or CDL ho as a result of this arrest by fi You may be eligible to par revocation as a result of the request IDAP within thirty | AYS FROM DATE SERVED. or failed the state's test(s). In ider) OR a test result of .04 or iting a petition in the District Co ticipate in the Impaired Drive its arrest from appearing on (30) days of the date listed to the personally hand delive to the person named in | more while oper urt of the County or Accountability your driving re elow. Mail the ered a copy of | rating a commercial mot y in which you were arre ty Program (IDAP) adm cord. Participation in request for IDAP to th of the above contain | or vehicle. \\ ested. Your painistered by IDAP may re | ou may appoint of the Department of Bublic | beal any Depart be filed within tment of Public mount of fees | thirty (30) of Safety (Dyou will be Box 1141 | days of the PS). Control of the PS). Control of the PS o | ne date li ompletio ed to pay noma Cit | n of IDAI to the S | w. P may prevent a state. You must 136. |
| The section of the se | | | | | | | | | Badge | | |
| | | AND THE CONTRACT | enalty of perjury | under the l | aws of Ok | lahoma that | the foreg | joing is | true ar | d corre | ct." Sect |
| | a 12 O S. Section 426 "I | state under r | | | | | | | | | |
| | e 12 O.S. Section 426, "I | | | | Cia | nature of arre | sting off | icer: | | | |
| Date served: In accordance with Title | e 12 O.S. Section 426, "I | | W W 138 N/2 | | Sign | nature of arre | esting off | icer: | | _ | |
| Date served: In accordance with Titl Date: NAME | e 12 O.S. Section 426, "I Place (location wi | | 7K-3K 1387 hg/ 1 | TAGENCY | Sign | nature of arre | esting off | icer: | | | |
| Date served: | e 12 O.S. Section 426, "I Place (location wi | | W.X. 386.107 | | Sign | TESTS | esting off | IPHONE | | | 0 |
| Date served: | Place (location with the place) Place (location with the place | nen signed):_ | | TAGENCY | Sign | TESTS | sting off | IPHONE | | | |
| Date served: | Place (location with the state of the state | nen signed):_ | | TAGENCY | Sign | TESTS | esting off | PHONE 40 | 5425 | | O Sec |
| Date served: In accordance with Title Date: NAME PAPE, CHE BADGE 0000000484 | Place (location with the state of the state | nen signed):_ | TITLE | TAGENCY | RD OF | TESTS | esting off | PHONE 40 | | | |
| Date served: | Place (location with the state of the state | nen signed):_ | | BOA | Sign | TESTS | esting off | PHONE 40 | 5425 | | |

OFFICER'S AFFIDAVIT AND NOTICE OF REVOCATION/DISQUALIFICATION

Section 1

| REST DATE | | ARREST TIME | 11 | | COUNTY # | | CITY# | C | ITATION# | | | |
|---|--|--|--|---|--|--|--|--|---|--|--|---|
| 2/02/2022 | | 1115 | | | 55 | CITY | | | | COUNT | Y ATTO | M/A |
| EST LOCATION OT | | | | | | 177 | | | lory | OK | LAHO! | WEIGHT |
| JECT NAME | ED-100-100-100-100-100-100-100-100-100-10 | | | | | DAT | 1/01/ | 11005 | SEX M | | 510 | 100000000000000000000000000000000000000 |
| REATHTEST | , DELTA | | | | | 10 | 1/01/ | | TATE | _ | ZIP CODE | |
| RESS | | | CIT | KT.AH | OMA C | TTY | | | OK | | 731 | 11 |
| 500 MLK | | | | E | XPIRATION DA | ATE | STATE | CLAS | S | RESTR | RICTIONS | ENDORSEMEN" |
| ER LICENSE # 083463042 | | | | 1 | 10/31 | /202 | | D | Te- | TATE | ICMV | PLACARD |
| ICLE MAKE | | MODEL | | | | | MOCE MOCE | | | OK | N | N |
| OCK | | MOC | | ble arounde | to believe the | nerson was | Acres de la constante de la co | | | | vehicle upon | a public road, |
| the above date, time, and le way, street, turnpike, public ence of alcohol and/or othe scribe driving behavior or cl IOCK SUBJECT cribe person's condition (or POST REPAIR | parking of other period of the | s as prohibited by law. | LED NEW | | | | | | | | | |
| | | THE PERS | ON WAS INFORM | IED OF THE | IMPLIED CO | NSENT TES | ST REQUEST | RECORD. | _ | _ | | Sectio |
| EATH-ALCOHOL ANALYS | SIS RECORD, REPORT | OF THE PERSON NA | MED IN SECTION RIAL NUMBER | 1 ABOVE, a | end LOG OF TE PECIALIST | | | - HEOOND | | | | |
| UIPMENT | | SEI | 0-0051 | | BOARD | | rests | | | | | |
| -8000 ANDARD | | | TARGE | TVALUE | | PERMIT | | | | | | |
| Dry | | | | 080 | | 230 | LINDERINS | ALLED | IDA | TE CYLIN | DER EXPIR | ES |
| NUFACTURER | | | LOT# | 0210 | 8042 | 02/ | 02/20 | 22 | 1 | 2/0 | 5/20 | 23 |
| LIMO | | | 28 | 0210 | OURZ | | | | | | | |
| | ST DATE 02/02/202 | 22 | A 15 | -minute | (or greater | neign to | and cont | inuing | | | _ | |
| L130 (| 12/02/202 | | pe | riod was | observed | prior to | and cont | mumg | | | THE | TATE |
| | -/0101 | Tin | ne | to the | e time of to | est admi | mstration | | _ | 19 | **** | 14 + 161 |
| Test | g/210L | 12011-04-1-1 | | 13.77.59 | | × | Alaska | 1 Toot i | ** | 13/ | ** | J* * * /0 |
| Air Blank | 0.00 | 12:0 | oo I adn | ninister | ed said l | Breath- | -Aicono | 1 Test 1 | 11 | 81 2 | ON | 10 x x |
| Subject Test | 0.00 | 12:0 | oo com | pliance | with the | e appli | cable of | perating | 3 | F * | *> 1 | 4 14 4 4 |
| Breath Volum | | | | proced | lure of th | e Boar | rd of Te | sts. | | 100 | * | ** |
| Air Blank | 0.00 | 12: | -C/9-III | 11/ | 1/1/ | 1 | | | | 18 | * 1 * * * | * 5 |
| Wait | 0.00 | 12: | | 4/1 | 11/2 | XM | | | | 1 | 1 | |
| Air Blank | 0.00 | 12: | 12 /7 | | DEDATOR | 70 | | | - | | 19 | 07 |
| Subject Test Breath Volum | | | SIGN | ATURE OF C | PERMIOR | | | | - 4 | | | TA'L |
| Air Blank | 0.00 | 12: | 04 NAME | | - | | | | - | | Test I | Result |
| Cal Check | 0.08 | 12: | DADE | CHE | RISTOPH | ER | | | | | BrAC | |
| Air Blank | 0.00 | 12: | BADGE # | and the | No. of Contract of | PERMIT | | 000 | | | | *2+1E1 |
| | | | 111177777777777777777 | 00004 | 184 | 000 | 00023 | 020 | | 1.01 | 0. | 00 |
| | | | AGENCY | D OF | mpomo | , | | | | | | |
| | | | | | TESTS | CONTRACTOR OF THE PARTY. | - d - a dealad | for a perior | of one hu | indred eig | htv (180) | Secti |
| FFECTIVE THIRTY (30) ays or more, if you refuse operating a CMV or CDL s a result of this arrest by ou may be eligible to p avocation as a result of equest IDAP within third SERVING OF NOTION Accountability Progra | and or talled the states tholder) OR a test result in the articipate in the Impithis arrest from apply (30) days of the determinents. | ult of .04 or more while District Court of the Calred Driver Account earing on your drivi ate listed below. Mai | operating a com- county in which y tability Program ing record. Parti il the request for opy of the abo | mercial mo ou were arro (IDAP) adm cipation in | ested. Your p ministered by IDAP may re | ou may app etition mus the Depar duce the a at of Public | peal any Dep t be filed with tment of Pu amount of fe Safety at P | eartmental a nin thirty (30 blic Safety es you will O, Box 114 | ction agair) days of t (DPS). Co be requir \$15, Oklah | nst your of he date li ompletion red to par noma Cit | sted below. on of IDAP y to the Sta y, OK 7313 ent Impai | ate. You must 6. |
| Date served: | | Signature of | officer: | | | 121 | Library A | at the fact | nales la | Badge | | " Sec |
| ale served: accordance with T | tle 12 O.S. Section | n 426, "I state und | der penalty of | perjury | under the la | iws of Ok | dahoma th | at the fore | going is | true ar | id correct | 207 |
| Date: | | cation when signe | | WAY | | Sign | nature of a | rresting o | fficer: | | | |
| Maria Company | | | | | AGENCY | D 07 | med | rc | | | | |
| IAME | And the last time the party of the party of | 'R | | | BOAR | D OF | | CODE | PHONE | | | |
| NAME | RISTOPHE | 11.0 | | | | | | LANGE CO. | 11.10.40 | TOTAL LINE | a table of the last | |
| IAME | RISTOPHE | | | | | | | 0000 | 40 | 5425 | 52460 |) |

| Certificat | e of Analysis – Wet Bath | |
|------------------|---------------------------------|---------|
| 1/31/2022 | 0.020 | |
| Date of Analysis | Labellad ta (19) value (g/210L) | |
| 21120 | , 50.022 | 1907 |
| Lot Number | (Adering textresult (g/2) (1) | ABORATO |

RIES. INC.

ChrisTopher Pa

500 NORTH 67th STREET . HARRISBURG, PA 17111-4511 . TELEPHONE: 717-564-5470

BOT Technician Name and Signature

In accordance with BOT Maintenance Policy and Procedure Statement, the above referenced simulator solution is suitable for use as an external reference in maintenance

Time

08:32

D8-33

08:34

08:34

08:35

08:35

08:36

08:37

08:37

08:38

08:38

08:39

08-40

08:40

08:41

08:42

08:42

08:43

08:43

08-44

08:45

of the Intoxilyzer 8000.

CERTIFICATE OF ANALYSIS

RCV D/21

ILPHA INSTRUMENT 2 ntoxilyzer - Alcohol Analyzer SN 80-004923 lode1 8000 - -08:32 1/31/2022

g/210L

0.000

0.022

0.000

0.022

0.000

0.022

0.000

0.021

0.000 0.021

0.000

0.022

0.000

0.021

0.000

0.022

0,000

0.021 0.000

0.021 0.000

0.0215

0.0005

2.4512

ir Blank

31 Check

ir Blank

al Check

ir Blank

il Check

r Blank

il Check

r Blank

:1 Check

r Blank

1 Check

r Blank

1 Check

r Blank

1 Check

Blank

1 Check

Blank

1 Check

Blank

ierage d Dev

Check Stats

1 Std Dev(%)

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 21120 Alcohol Reference Solution for Simulator were analyzed by chromatography on April 16, 2021, using a Perkin Elmer Gas 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.

ator's Signature

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.

| Certificate of Analysis – Wet Bath | 13/15 |
|---|--------|
| 12/13/2021 0.040 Date of Analysis Labelled Target value (g/210L) | |
| 21070 CHITH LABORATORIES, INC. | |
| Christophar Papa Chiam Age | Chil |
| In accordance with BOT Maintenance Policy and Procedure Statement, the above referenced simulator solution is suitable for use as an external reference in maintenance of the Intoxilyzer 8000. | 126/21 |

INTOXILYZER 8000 Instrument Initialization 8133,12 09:27 12/01/2021

Certified Alcohol Reference Solution for Simulator

ALPHA INSTRUMENT 2 Intoxilyzer - Alcohol Analyzer SN 80-004923 Model 8000 12:09 12/13/2021 g/210L Time Test 0.000 12:09 Air Blank 0.042 12:10 Cal Check Air Blank 0,000 12:10 12:11 Cal Check 0.042 12:12 0.000 Air Blank 12:12 Cal Check 0.042 0.000 12:13 Air Blank 0.042 12:14 Cal Check 12:14 Air Blank 0.000 Cal Check 0.042 12:15 12:15 Air Blank 0.000 Cal Check 0.042 12:16 12:17 Air Blank 0.000 Cal Check 0.042 12:17 12:18 Air Blank 0.000 12:18 Cal Check 0.042 Air Blank 0.000 12:19 12:20 Cal Check 0.042 0.000 12:20 Air Blank 12:21 Cal Check 0.042 Air Blank 0.000 12:21 Cal Check Stats 0.0420

0.0000

0.0000

Average

Std Dev Rel Std Deu(%)

Random Samples of Lot Number 21070 Alcohol Reference Solution for Simulator were analyzed by chromatography on March 2, 2021, using a Perkin Elmer Gas 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.

> L. Pauley, President Ted GUTH LABORATORIES, INC.

peratory 8ignature

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.

| Certificate of Analysis – Wet Bath | 14/15 |
|--|-------|
| 12/13/2021 0.100 | |
| Date of Analysis Sabelled (R) set value (g/210L) 21190 St. 0.103 | |
| Lot Number Adean restre Chief 19 TH LABORA TORIES, INC. | 470 |
| BOT Technician Name and Signature BOT Technician Name and Signature BRT Form 6.0 | PCV |
| In accordance with BOT Maintenance Policy and Procedure Statement, the above referenced simulator solution is suitable for use as an external reference in maintenance | 7 |
| of the Intoxilyzer 8000. CERTIFICATE OF ANALYSIS | 8/26/ |
| | 145 |

ALPHA INSTRUMENT 2 Intoxilyzer - Alcohol Analyzer Model 8000

SN 80-004923

Certified Alcohol Reference Solution for Simulator

12:45 12/13/2021 Time g/210L Test 12:46 0.000 Air Blank Cal Check 0.107 12:46 12:47 0.000 Air Blank 12:48 0.103 Cal Check 12:48 0.000 Air Blank 12:49 Cal Check 0.102 0.000 12:49 Air Blank 12:50 0.102 Cal Check 12:51 0.000 Air Blank 12:51 Cal Check 0.102 0.000 12:52 Air Blank 12:53 0.102 Cal Cneck 12:53 0.000 RIC Blank 0.102 12:54 Cal Check 12:54 Air Blank 0.000 Cal Check 0.102 12:55 12:56 0.000 Air Blank 12:56 Cal Check 0.102 12:57 0.000 Air Blank 0.101 12:58 Cal Check 12:58 0.000 Rir Blank Cal Check Stats 0.1025 Average 0.0016 Std Deu Rel Std Deu(な) 1.6096

Random Samples of Lot Number 21190 Alcohol Reference Solution for Simulator were analyzed by gas chromatography on June 9, 2021, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1206% (w/vol) ethyl alcohol. The expiration date for this lot number is June 8, 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 0.100 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.

| Certificate of | Analysis – vvet Batn | | |
|--------------------|-----------------------------|--------------------------------|---------------------------|
| 01/07/2020 | 0.200 | | |
| Date of Analysis | Labelled to traine (g/210L) | | |
| 20160 | 0.197 | | W |
| Lot Number | Av applest professor | BORATORIES, | INC. |
| Christopher Pare 4 | 590 NORTH STIN STRE | ET 9 HARRISBURG, PA 17111-4511 | • TELEPHONE: 717-584-5470 |

In accordance with BRT – 2.2.0, Maintenance, the above referenced simulator solution is suitable for use as an external reference in maintenance of the Intoxilyzer 8000.

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

ntoxilyzer - Alcohol Analyzer odel 8000 SN 80-003400 7/07/2020 est 9/210L TIME ir Blank 0.000 15:26 15:26 al Check 0.196 ir Blank 0,000 15:27 al Check 0.196 15.2R 15:28 ir Blank 0.000 0.197 15:29 al Check 15:29 ir Blank 0.000 al Check 0.196 15:30 ir Blank 0.000 15:31 15:31 0.198 al Check 0.000 ir Blank 15:33 al Check 0.198 0.000 15:33 ir Blank 15:34 al Check 0.197 15:35 ir Blank 0.000 0.198 al Check 15:36 dr Blank 0.000 'al Check 15:37 iir Blank 0.000 15:37

0.197 0.000

0.1971

0.000A

0.4442

LPHR UNIT SUB

:al Check

IIr Blank al Check Stats

Average

Rel Std Deu(な)

BOT Technician Name and Signature

Random Samples of Lot Number 20160 Alcohol Reference Solution for Simulator were analyzed by chromatography on March 20, 2020, using a Perkin Elmer Gas gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.2427% (w/vol) ethyl alcohol/ The expiration date for this lot number is March 18, 2022 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:

15:38

Testing was conducted using Cerilliant Reference Standard lot number FN08101505 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.