



**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

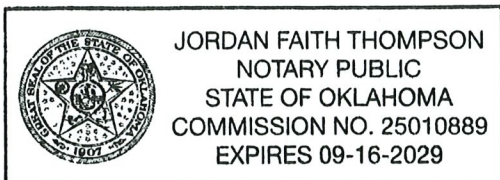
I, the undersigned Joshua Smith (Director/Records Custodian), attest under oath pursuant to 12 O.S. §2902 this record was made, at or near the time of the occurrence of the matters set forth by or from information transmitted by a person having knowledge of those matters; was kept in the course of the 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 80-006121, 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: 10/14/2022

SERIAL: 80-006121

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)



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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. 80-006121 on 10/14/2022 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.: 06022080A2-050
 - BOT analysis average test result: 0.081
 - Cylinder expiration date: 4/5/2024
- 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	21070	22080	22050
Manufactured Date			
8/24/2021	3/1/2021	3/7/2022	2/7/2022
Expiration Date			
8/24/2023	3/1/2023	3/7/2022	2/7/2024
Solution Commission Date			
9/23/2022	9/23/2022	9/23/2022	10/10/2022

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 10/14/2022	TIME PROCEDURE BEGAN 13:20:2	INSTRUMENT LOCATION 80-006121
INSTRUMENT TYPE Intoxilyzer	INSTRUMENT MODEL I-8000	INSTRUMENT SERIAL NUMBER 80-006121

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	0.017	0.016	0.017
.04	0.037	0.037	0.037
.10	0.099	0.097	0.099
.20	0.200	0.198	0.196

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 10/14/2022
NAME PAPE, CHRISTOPHER	PERMIT # 0000023020



5/17

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

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Chairman

Post Office Box 36307
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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

11:47

Test	g/210L	Time
Air Blank	0.000	11:48
Cal Check	0.080	11:48
Air Blank	0.000	11:49
Cal Check	0.080	11:49
Air Blank	0.000	11:50
Cal Check	0.081	11:50
Air Blank	0.000	11:50
Cal Check	0.080	11:51
Air Blank	0.000	11:51
Cal Check	0.081	11:52
Air Blank	0.000	11:52
Cal Check	0.080	11:52
Air Blank	0.000	11:53
Cal Check	0.080	11:53
Air Blank	0.000	11:54
Cal Check	0.081	11:54
Air Blank	0.000	11:55
Cal Check	0.081	11:55
Air Blank	0.000	11:55
Cal Check	0.081	11:56
Air Blank	0.000	11:56
Cal Check Stats		
Average	0.0805	
Std Dev	0.0005	
Rel Std Dev(%)	0.6547	

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.: 50	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:
Ethanol	208 ppm	+/-0.002 BAC(G/210L) [5.2 ppm]	NDIR
Nitrogen	Balance		

Distributed by:

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

*Traceable to:

Certified Reference Material - 251.8 µmol/mol

Ethanol in Nitrogen - Serial No. CCI98518 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.

ISO/IEC 17025:2017 Accredited Laboratory

OFFICER'S AFFIDAVIT AND NOTICE OF REVOCATION/DISQUALIFICATION

7/17

Section 1

ARREST DATE 10/14/2022	ARREST TIME 1400	COUNTY # 55	CITY #	CITATION #
ARREST LOCATION BOT		CITY	COUNTY OKLAHOMA	
SUBJECT NAME BREATHTEST, DELTA		DATE OF BIRTH 01/01/1985	SEX M	HEIGHT 510 WEIGHT 200
ADDRESS 3600 MLK		CITY OKLAHOMA CITY	STATE OK	ZIP CODE 73111
DRIVER LICENSE # B083463042		EXPIRATION DATE 10/31/2022	STATE OK	CLASS D RESTRICTIONS ENDORSEMENTS
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

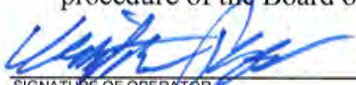
Describe person's condition (odor, actions, etc.):

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 80-006121	SPECIALIST BOARD OF TESTS
STANDARD Dry	TARGET VALUE 0.080	PERMIT NUMBER 23020
MANUFACTURER ILMO	LOT # 06022080A2	DATE CYLINDER INSTALLED 10/14/2022 DATE CYLINDER EXPIRES 04/05/2024
OBSERVATION START 1405	TEST DATE 10/14/2022	<p>A 15-minute (or greater) deprivation/observation period was observed prior to and continuing to the time of test administration.</p> <p>I administered said Breath-Alcohol Test in compliance with the applicable operating procedure of the Board of Tests.</p> <p> SIGNATURE OF OPERATOR</p> <p>NAME PAPE, CHRISTOPHER</p> <p>BADGE # 0000000484</p> <p>PERMIT # 0000023020</p> <p>AGENCY BOARD OF TESTS</p>
RESULT TABLE		
Test	g/210L	Time
Air Blank	0.00	14:27
Subject Test	0.00	14:28
Breath Volume	2.035 LITERS	
Air Blank	0.00	14:28
Wait		14:30
Air Blank	0.00	14:31
Subject Test	0.00	14:32
Breath Volume	2.039 LITERS	
Air Blank	0.00	14:32
Cal Check	0.08	14:33
Air Blank	0.00	14:33



Test Result
BrAC g/210L
0.00

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 10/14/2022		ARREST TIME 1400		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	ZIP CODE 73111
DRIVER LICENSE # B083463042				EXPIRATION DATE 10/31/2022		STATE OK	CLASS D
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 80-006121	SPECIALIST BOARD OF TESTS																																					
STANDARD Dry		TARGET VALUE 0.080	PERMIT NUMBER 23020																																					
MANUFACTURER ILMO		LOT # 06022080A2	DATE CYLINDER INSTALLED 10/14/2022	DATE CYLINDER EXPIRES 04/05/2024																																				
OBSERVATION START 1405	TEST DATE 10/14/2022	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>14:27</td></tr> <tr><td>Subject Test</td><td>0.00</td><td>14:28</td></tr> <tr><td>Breath Volume</td><td>2.035 LITERS</td><td></td></tr> <tr><td>Air Blank</td><td>0.00</td><td>14:28</td></tr> <tr><td>Wait</td><td></td><td>14:30</td></tr> <tr><td>Air Blank</td><td>0.00</td><td>14:31</td></tr> <tr><td>Subject Test</td><td>0.00</td><td>14:32</td></tr> <tr><td>Breath Volume</td><td>2.039 LITERS</td><td></td></tr> <tr><td>Air Blank</td><td>0.00</td><td>14:32</td></tr> <tr><td>Cal Check</td><td>0.08</td><td>14:33</td></tr> <tr><td>Air Blank</td><td>0.00</td><td>14:33</td></tr> </tbody> </table>		Test	g/210L	Time	Air Blank	0.00	14:27	Subject Test	0.00	14:28	Breath Volume	2.035 LITERS		Air Blank	0.00	14:28	Wait		14:30	Air Blank	0.00	14:31	Subject Test	0.00	14:32	Breath Volume	2.039 LITERS		Air Blank	0.00	14:32	Cal Check	0.08	14:33	Air Blank	0.00	14:33	<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																																				
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AGENCY BOARD OF TESTS																																								



Test Result
BrAC g/210L
0.00

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**

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Chairman

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Joshua Smith
Director

Certificate of Analysis – Reference Solution

ALPHA INSTRUMENT

Intoxilyzer - Alcohol Analyzer

Model 8000

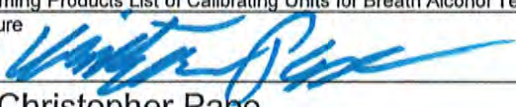
SN 80-002591

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	



10/17

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

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

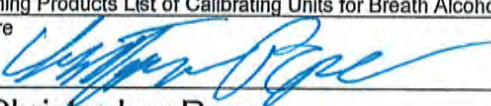
Post Office Box 36307
Oklahoma City, Oklahoma 73136-2307
Phone: (405) 425-2460 Fax: (405) 425-2490
www.bot.ok.gov

Joshua Smith
Director

Certificate of Analysis – 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	

NIST Traceable Breath-Alcohol Equivalent (g/210L +/- 3%) Ratio of ethanol and water free of test interfering substances.		
Manufacturer: Guth	Manufactured Date: 03/01/2021	Concentration: 0.04
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 supplemented Conforming Products List of Calibrating Units for Breath Alcohol Testers (72 FR 34747), published by the National Highway Traffic Safety Administration.		
Signature: 	Date: 03/08/2022	
Name: Christopher Pape	Permit No.: 23020	



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

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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

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	



**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

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 ANALYSISRCV'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%**.

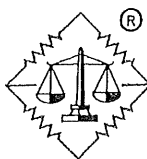
The alcohol and water used in this solution were free of test interfering substances.

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.

**GUTH LABORATORIES, INC.**

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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.

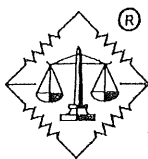
Ted L. Pauley, President
GUTH LABORATORIES, INC.

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 ANALYSISRCVD
5/9/2022
CP

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.

Location Returned From Tonkawa PD	Unit Serial # 80-006121	Date: 10/10/22
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Inventory Process

<input checked="" type="checkbox"/> Unit checked in to BOT	<input checked="" type="checkbox"/> Unlink Gas Canister from Unit	Old Cylinder #: 20520080A1-022
<input checked="" type="checkbox"/> New Unit Checked out	<input type="checkbox"/> Remove old cylinder from unit (After Lab Evaluation)	<input checked="" type="checkbox"/> Old cylinder disposed in inventory
		<input checked="" type="checkbox"/> Old cylinder archived

Check in Procedure

<input checked="" type="checkbox"/> Connect unit to ethernet connection 172.019.004. 131
<input checked="" type="checkbox"/> Download any stored records <u>5</u>
<input checked="" type="checkbox"/> Change unit location to Serial number
<input checked="" type="checkbox"/> Update Unit Date and time
Previous time: <u>10/14/22 1301</u>
New Time: <u>10/14/22 1306</u>
<input checked="" type="checkbox"/> Execute a new Forms load on the unit

Notes from the Field

<input checked="" type="checkbox"/> Routine Swap	<input type="checkbox"/> Issues in the Field
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Lab Evaluation

Breath Hose Hold Vacuum?: <input checked="" type="checkbox"/>	Test Chamber Hold Vacuum?: <input checked="" type="checkbox"/>
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DVM

3µm <u>12970</u>	Chamber Temp <u>47.00</u>	Snap Test ok? <input checked="" type="checkbox"/>
9µm <u>13238</u>	Breath Hose Temp <u>45</u>	RFI Detected? <input checked="" type="checkbox"/>

Peripheral Tests

Speaker (F5) <input checked="" type="checkbox"/>	Power LED Green (F6) <input checked="" type="checkbox"/>	Red (F7) <input checked="" type="checkbox"/>	Fan (F9) <input checked="" type="checkbox"/>
Gas Regulator (F11) <input checked="" type="checkbox"/>	Pump (F10) <input checked="" type="checkbox"/>	Receipt paper <input checked="" type="checkbox"/>	

Atmospheric Sensor

Pressure <u>980</u>	Correction Factor <u>1.03</u>	Flow Sensor Resistance <u>250</u>	Tank Sensor Value <u>938</u>	Is regulator close to Tank Sensor Value? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No
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Sent to CMI (If needed)

Reason Sent

Date Sent _____
Invoice Sent _____
Date Returned _____

Repairs needed:

Repairs Made:

Ready for Bench Check? ☒

Inventory Process

<input type="checkbox"/> Linked Cylinder to Unit	<input type="checkbox"/> Bench Check Technician Report
<input type="checkbox"/> Changed Unit Status	<input type="checkbox"/> Mock Subject Test Completed
<input type="checkbox"/> Bench Check Report Completed	<input type="checkbox"/> Certificate of Calibration and Operation
	<input type="checkbox"/> Service Overview Completed

To complete if unit sent to CMI

<input type="checkbox"/> CMI Workorder
<input type="checkbox"/> CMI Certificate of Calibration _____
<input type="checkbox"/> CMI Service Evaluation Form