

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 (11)(a) 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 80-002686 , in compliance with the agency's Maintenance Policy and Procedures.

This packet consists of 17 pages.

Signed _____

Name of Position: Director/Records Custodian

Date of Attestation: 03/02/2020

Service Overview



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

BENCH CHECK DATE: <u>03-02-2020</u>

SERIAL: <u>80-002686</u>

DOCUMENTATION WITHIN SERVICE PACKET:

- BOT Certificate of Calibration and Operation
- CMI Certificate of Calibration 10-28-2019
- Bench Check
- Bench Check Technician's Report
- BOT Dry Gas Certificate of Analysis
- CMI Service Evaluation Form
- CMI Estimate
- CMI Work Order
- Mock Subject Test
- BOT Certificates of Analysis on Certified Solutions (4)



STATE OF OKLAHOMA BOARD OF TESTS FOR ALCOHOL AND DRUG INFLUENCE

Administrative Office at: Board of Tests for Alcohol and Drug Influence Post Office Box 36307 Oklahoma City, Oklahoma 73136-2307

Certificate of Calibration and Operation

This is to certify that the calibration of INTOXILYZER 8000, serial number 80-002686, manufactured by CMI Inc., a subsidiary of MPD, Inc. of Owensboro, Kentucky, was tested and found to be in compliance with National Highway Traffic Safety Administration Standard for Devices to Measure Breath Alcohol (F.R., No. 179 48705-48710) Sept. 17, 1993) and with International Recommendation OIML R 126 Edition 1998 (E). Calibration solutions are traceable to NIST standard material 1828.

In addition the operational procedures and functions of this Intoxilyzer have also been tested and found to be in compliance with the Oklahoma Board of Tests for Alcohol and Drug Influence - Rules and Regulations OAC Title 40: 25-1-2 and 30-1-3 and is hereby certified for use as an evidential breath testing device within this state.

CERTIFICATION TYPE	DATE
Manufacturer Calibration	09-14-07
Board of Tests Bench Check	07-01-08
Board of Tests Bench Check	03-03-10
Manufacturer Calibration	01-27-12
Board of Tests Bench Check	02-23-12
Manufacturer Calibration	03-26-14
Board of Tests Bench Check	01-27-15
Board of Tests Bench Check	02-08-16
Board of Tests Bench Check	12-07-17
Board of Tests Bench Check	05-15-18
Manufacturer Calibration	10-28-19
Board of Tests Bench Check	03-02-20



Presentation of this form certifies that the Intoxilyzer, SN: 80-002686, functioned properly at the time of the breath test and hereby certifies the breath test result as valid.

Date:

Re: Request for Log of Test on Intoxilyzer 8000

Name:

Dear Sir:

The Log of Test information from a breath test conducted on a Intoxilyzer 8000 is printed in Section 2 of the Affidavit and is no longer retained as a separate form as with the Intoxilyzer 5000. The 8000 uses a nitrogen/ethanol dry gas for the external control test. The dry gas cylinder has the capacity to perform approximately 325 tests and does not require maintenance until its expiration date or can no longer provide the required pressure to perform a control test. The cylinder has an expiration date of two years from date filled at the manufacturer and is programmed in the 8000 upon installation, both dates are printed in Section 2 of the Affidavit. The Intoxilyzer is programmed to disable itself when the date of expiration is reached or the pressure monitor indicates 25 lbs psi.

Due to the reliability and stability of dry gas, maintenance on the 8000 is not required every 30 days or 25 tests, therefore maintenance is no longer performed by officers in the field. The Board of Tests for Alcohol and Drug Influence certifies each Intoxilyzer 8000 for field use by performing a bench check. The bench check is designed to check the operation and procedures programmed in the 8000 to ensure it is functioning properly for use in Oklahoma. A bench check is performed every time a new dry gas cylinder is installed or the instrument has returned from the manufacturer for repair. Once the instrument passes the bench check, all that is required to set it up for field use is to plug it in and turn it on and does not require a permit to set up. The Board of Tests has the ability to monitor each instrument once it is set up in the field.

Each Intoxilyzer has a database of valid permit numbers that it checks prior to allowing a breath test to be performed. The database is updated on a regular basis, if a permit number is invalid that officer will not be able to conduct a breath test on the 8000. If the 8000 prints an affidavit the breath test operator listed in Section 2 had a valid permit at the time of the test and the breath test is valid.

If you have any further questions please feel free to call me.

Sincerely,

J. Robert Blakeburn (OBA11059) State Director of Tests for Alcohol and Drug Influence

O. pohr &Blakelun

03/02/2020	TIME PROCEDURE BEGA	INSTRUMENT LOCATION 80-002686			
NSTRUMENT TYPE	INSTRUMEN			INSTRUMENT SERIAL NUMBER 80-002686	
Intoxilyzer	I-80	TEST RES	SULTS	00 002	.000
ONCO III. Land					
Diagnos	tics				
PAS	S				
Mouth Alco	nol Test				
PAS	S				
RFI Te	est				
PAS	S	Dun	licate Breath	Sampling Re	sults
Abort 7	Test				
PAS	s	Value	Test 1	Test 2	Control Test
Improper Sar	mple Test			-13 - 5000 -	
PAS	S	.02	0.019	0.018	0.020
Interferent De	etect Test	.04	0.038	0.037	0.039

Insufficient Sample Test

PASS

No Sample Given Test

PASS

PASS

Air Blank Contamination Test

PASS

Range Exceeded Test

PASS

PASS

0.095

0.196

0.094

0.195

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.

.10

.20

DATE 03/02/2020

0.097

0.198

SIGNATURE

JOSHUA SMITH,

0000016837

Certificate of Calibration

This is to certify the calibration of INTOXILYZET ® serial number 80-000686, 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).

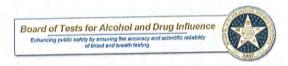
Date Charles Signed Mono?

Technician

316 East 9th Street Owensboro, KY 42303 USA

Part No. 650517 Rev.A





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

BENCH CHECK TECHNICIAN'S REPORT

Simulator Mode	GAS CANISTER OT # 3021908045 # 0 REFERENCE Guth 2100 DR3591	Simulato Guth 2100 Ser	EXP Date 01-05 - 20 or Model Guth 2100	22
Simulator Model	OT # 3	Simulato Guth 2100 Ser	or Model Guth 2100	
REFERENCE Simulator Model Guth 2100 Guth 2100 Guth 2100 Serial # DR3591 DR3753 DR3594 DR3754 Concentration .02 .04 .10 .20 LOT # 19050 19080 19301 19200 Manufactured Date 02-04-2019 03-04-2019 10-30-2019 08-06-2019 Expiration Date 02-04-2021 03-04-2021 10-30-2021 08-06-2021 Solution Commission Date 02-04-20 02-14-28 02-14-28 02-14-28 POST REPAIR ▶CYLINDER REPLACEMENT TROUBLESHOOTING □ROUTINE MAINTENANCE	3021908045 # 0 REFERENCE Guth 2100 DR3591	Simulato Guth 2100 Ser	or Model Guth 2100	
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Guth 2100 Guth 2100 Guth 2100 Guth 2100 Serial # DR3591 DR3753 DR3594 DR3754 Concentration .02 .04 .10 .20 LOT # 19050 19080 19301 19200 Manufactured Date 02-04-2019 03-04-2019 10-30-2019 08-06-2019 Expiration Date 02-04-2021 03-04-2021 10-30-2021 08-06-2021 Solution Commission Date 02-14-28 02-14-28 02-14-28 POST REPAIR CYLINDER REPLACEMENT TROUBLESHOOTING ROUTINE MAINTENANCE	DR3591	Guth 2100 Ser	Guth 2100	Guth 2100
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REASON FOR BENCH CHECK POST REPAIR CYLINDER REPLACEMENT TROUBLESHOOTING ROUTINE MAINTENANCE				02-14-21
POST REPAIR CYLINDER REPLACEMENT TROUBLESHOOTING ROUTINE MAINTENANCE	02-04-20	2-14-20	02-14-20	0017-0
	REASON FOR BENCH	I CHECK LINDER REPL	ACEMENT	02-14-2

Printed Name

g/210L

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ALPHA INSTRUMENT 2

Model 8000

03/02/2020

Air Blank

Cal Check

Air Blank Cal Check Stats

Auerage

Std Deu

Rel Std Deu(%)

Test

Intoxilyzer - Alcohol Analyzer

	100	alysis – Dry Gas	rtificate of	Cer
		,080	2020	03/02
		ed target value (g/210L)		ate of Analysis
110		. 089	23	#0
		ge test result		ylinder#
			mith (Josh S
cialty gase	BRT Fo		me and Signature	OT Technician Nar

referenced dry gas cylinder is suitable for use as an external reference with the Intoxilyzer 8000.

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:

12515

Part #:

BAC105L080T

Cylinder Size:

105L

Lot Number:

30219080A5

Expiration:

1/5/2022

RECVA 2019

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

Accuracy

Analytical

Component:

Concentration:

Method:

(U, k=2):

208 ppm Ethanol [5.2 ppm]

Nitrogen

Balance

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

Distributed by:

CMI Inc.

316 East Ninth Street Owensboro, KY 4230 Phone 866-835-0690 www.alcoholtest.com

's Signature

*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).

Specially Gas Lab Tech

11-20-19



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 informati	ion: Customer Numb	al shipping container oer 731362	(contact Customer Service)
Name: Board	of Tests	Phone: (405)	425 2460
Fax: (405) 425 2		ail: joshua.smith@b	ot.ok.gov
2. Bill to Address:	Board of Tests	Ship to Address:	Board of Tests
Dill to / tagle coo.	3600 N ML King, Bldg 9	Application of the formation	3600 N ML King, Bldg 9
	OKC, OK 73111		OKC, OK 73111
3. Serial Number:	80-002686	Instrument Model	: Intoxilyzer 500 / 8000
	s Material Warning! - <u>DO</u>		
✓ I Authorize Rep		250 ⊠\$500 <u></u> \$750	ers with instrument!*** Other \$
☑ I Authorize Rep Purchase Orde	pairs Up To: All \$2	250 ⊠\$500 ⊡\$750 of P.O. if applicable).	Other \$
☑ I Authorize Rep Purchase Orde Authorized By:	pairs Up To:	250 ⊠\$500 ⊡\$750 of P.O. if applicable) Sh	Other \$
I Authorize Rep Purchase Orde Authorized By: Joshua Smith	pairs Up To: All \$2 er Number (attach a copy Breath A	250 🔲 \$500 🗍 \$750 of P.O. if applicable) . Sh	Other \$
☑ I Authorize Rep Purchase Orde Authorized By:	pairs Up To: All \$2 er Number (attach a copy Breath A Progran nt) Title	250 S\$500 \$750 of P.O. if applicable) Sh	Other \$
I Authorize Rep Purchase Orde Authorized By: Joshua Smith Name (Please Prin	pairs Up To: All \$2 er Number (attach a copy Breath A Progran nt) Title	250 S\$500 S750 of P.O. if applicable) Shalcohol Testing Admin CI 6/2019	ip to:
I Authorize Rep Purchase Orde Authorized By: Joshua Smith Name (Please Print Signature	pairs Up To: All \$2 Per Number (attach a copy Breath A Program Title 09/06	250 S\$500 S750 of P.O. if applicable) Shalcohol Testing Admin CI 6/2019	ip to: MI, Inc ttn: Service Dept.

CMI Inc 316 E 9th Street Owensboro KY 42303 USA

Phone: 866-835-0690 Fax: 270-685-6268

Service Estimate: 404103

PO#:

Ship To: Oklahoma Board Of Tests Blvd Adcu Annex Bldg #9 3600 Martin Luther King Oklahoma City OK 73136-3		umber: 731362 T	echnician N Gary W				
BT, SHELF							
Call Line Part Number/Descr	iption	Revision		Quantity		Service C	
1 002480OK		ND		1.00 EA		Out of Wa	arranty
UNIT ASSY,I8000,IN Job: SRV4041030001 Our Part	002480OK		ND				
Serial Number(s): 80	0-002686						
Job Material						Est Huit Dring	Est. Ext. Price
Seq. No. Part	Description			Quantity		Est. Unit Price	0.00
80 650517		OF CALIBRATION		2.00	EA	0.00 0.00	0.00
90 441169	COVER DUS			1.00	EA	0.00	0.00
100 470145		C,.25IDx.50LG,RED		3.00	EA	0.00	0.00
110 470154		406IDx.438562,RED		1.00	EΑ	0.00	0.00
120 470218		R EVIDENT, SERVIC	E	1.00	EA EA	223.45	223.45
130 020982	SOURCE AS:	SY		1.00	EA	223.43	220.10
Labor, Freight, & Misc. Cha	arges						Est. Ext. Price
Misc Code	Description						222.50
LABR	Service Repa	air Labor					45.00
LCAL	Service - Ca	ibration Adjust					45.00 85.00
LFT	Service - Ca	/ Final Test					45,00
SVFT	Freight - Ser	vice					45.00 Total: 620.95

NOTE: THIS ESTIMATE IS BASED ON OUR INITIAL INSPECTION AND DOES NOT INCLUDE ADDITIONAL PARTS OR LABOR WHICH MAY BE REQUIRED AFTER REPAIR WORK HAS BEEN STARTED. IF ADDITIONAL ISSUES ARE FOUND, YOU WILL BE NOTIFIED AND AN UPDATED ESTIMATE WILL BE PROVIDED FOR APPROVAL.

AN EVALUATION FEE WILL APPLY TO ESTIMATES THAT ARE NOT REPAIRED.

PLEASE SIGN AND FAX TO: 270-685-6268

APPROVED BY: _

DATE: 10/22/1°

*TAX NOT INCLUDED



SERVICE WORK ORDER

404103

DATE: 9/11/2019

Bill To:

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

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

Fax: 270-685-6268

MODEL #: 002480OK

Serial Number: 80-002686

Phone: 866-835-0690

BILL CODE: Out of Warranty

EXTRA PARTS RCVD:

BT, SHELF

DESCRIPTION OF PROBLEM

DSP TEST FAIL DURING DIAGNOSTICS

WORK PERFORMED:

DSP fail on diagnostic, DVM's out of spec. Replaced source, reset preamp gains. Performed system checks.

PARTS USED

The second section of the second			Quantity
Seq. No.	Part	Description	•
•	050517	CERTIFICATE OF CALIBRATION	2.00 EA
80	650517	· · · · · · · · · · · · · · · · · · ·	1.00 EA
90	441169	COVER DUST,5/8in x 1/2in	
_	47014E	CAP,PLASTIC,.25IDx.50LG,RED	3.00 EA
100	470145		1.00 EA
110	470154	CAP,PLSTC,.406IDx.438562,RED	
	470010	SEAL, TAMPER EVIDENT, SERVICE	1.00 EA
120	470218	•	1.00 EA
130	020982	SOURCE ASSY	1.00 27

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

OFFICER'S AFFIDAVIT AND NOTICE OF REVOCATION/DISQUALIFICATION

Section

	KE V OCA I				CITATIO	ON #	Section 1
ARREST DATE 03/02/2020	ARREST TIME		COUNTY#	12	NO:	NE	
ARREST LOCATION	1500		CIT	ONE		NOI	
NONE SUBJECT NAME				DATE OF BIRTH	961 I	X RACE	HEIGHT WEIGHT 510 165
NORTH, GAYLON LE	VERNE	CITY		08/09/1	STATE		ZIP CODE
address 3600 MARTIN LUTH	ER KING A	OKLAHO	OMA CIT	Y STATE	OK		73133 CTIONS ENDORSEMENTS
DRIVER LICENSE # T083454871		ا و ا	6/30/20)19 OK	A	lorate.	M CMV PLACARD
VEHICLE MAKE	MODEL NONE			NONE		OK	N N
NONE On the above date, time, and location, the above highway, street, turnpike, public parking lot, or or		had reasonable grounds t	o believe the person	was driving or in actu	al physical contr e or multi-family	ol of a motor ve dwelling within	ehicle upon a public road, this state while under the
highway, street, turnpike, public parking lot, or o influence of alcohol and/or other intoxicating sub (Describe driving behavior or circumstances): POST REPAIR MAINTEN	ostances as prohibited by law.	,					
Describe person's condition (odor, actions, etc.)	:						
NONE							
	THE PERSON W	AS INFORMED OF THE	MPLIED CONSENT	TEST REQUEST			
BREATH-ALCOHOL ANALYSIS RECORD, RE	PORT OF THE PERSON NAMED I	N SECTION 1 ABOVE, an	d LOG OF TEST AN		ECORD.		Section 2
EQUIPMENT	SERIAL N	JUMBER ISPE	OARD OF	TESTS			
I-8000 STANDARD		TARGET VALUE 0.080	PER	MIT NUMBER 6837			
Dry		LOT#	DATI	E CYLINDER INSTAL	LED	DATE CYLINE	DER EXPIRES 5/2022
ILMO		3021908		3/02/202		01/03	5/2022
OBSERVATION START TEST DATE 1519 03/02/2	MOUTHPIECE G	A 15-minute (or greater) dep	privation/obser r to and continu	vation		17 OF
RESULT TABLE		period was	time of test ac	lministration.		6	THE STATE
Test g/210I	Time					2/2	
Air Blank 0.00	15:45	I administere	ed said Brea	th-Alcohol	Test in		WALL STATE
Subject Test 0.00	15:46	compliance	with the ap	plicable ope	rating	5/2	JUNE 14:4 E
Breath Volume 2.351 Air Blank 0.00	LITERS 15:46	procedi	are of the B	oard of Test	s.	E	
Wait	15:48					10/	
Air Blank 0.00 Subject Test 0.00	15:48 15:49	SIGNATURE OF OF	DERATOR				1907
Breath Volume 2.222	LITERS	SIGNATURE OF OF	LICATOR				
Air Blank 0.00 Cal Check 0.07	15:49 15:49	NAME TO CL			ļ		Test Result
Air Blank 0.00	15:50	SMITH, JOSI BADGE#	PEF	RMIT#			BrAC g/210L
		00000004	35 0	0000168	3 7		0.00
		BOARD OF	TESTS				G
EFFECTIVE THIRTY (30) DAYS F period of one hundred eighty (180) this state will be disqualified if you commercial motor vehicle. To app an Administrative Hearing within I person at 3600 N. MLK Ave. or by SERVING OF NOTICE: I personal	days or more, if you refuse refused or failed the state's leal the driver's license revo- fifteen (15) days from the mail to Legal Division, Dep	test(s) (operating a beating a beation/disqualification date you received artment of Public Sa	CMV or CDL hon, the Departmentice of revo	older) OR a test nent of Public Sa cation or disqua 11415, OKC, OK	result of .04 fety must realification. \$	or more whoeive your vour your	nile operating a vritten request for written request in
SERVING OF NOTICE: I persona	illy hand-delivered a copy o	Title above containi					
Date served: 03/02/20 In accordance with Title 12 O.S. S	Signature of office	r:	ador the laws of	f Oklahoma that	the foregoing	is true and	d correct." Section
				Oklarionia triat	!: officer		
Date: 03/02/2020 Place	e (location when signed):		AGENCY	Signature of arre		•	
SMITH, JOSHUA				OF TESTS		NIE .	
BADGE AGENCY	address ER-AGENCY			ZIP CC	000 4	05425	2460
	EV-NGENCI						Section
OTHER WITNESSES:		TITLE	ADDRESS			PHONE	
1		TITLE	ADDRESS			PHONE	
NAME 2			, LOUILLOO				

OFFICER'S AFFIDAVIT AND NOTICE OF REVOCATION/DISQUALIFICATION

Section

				Tool Dievin	ICIT	V #	ICITA	TION#			Section 1
ARREST DATE	1	ARREST TIME 1500		COUNTY#	1			ONE			
03/02/2020 ARREST LOCATION	J	1300		(NONE				\mathbf{NON}		
NONE SUBJECT NAME		->			DATE O	09/1		SEX M		510	165
ADDRESS	YLON LEVE		CITY	ONE CIT		00/1	STA	TE	Z	1P CODE 731	3 3
3600 MART	IN LUTHER	KING A	(E)	OMA CI	-	STATE	CLASS		RESTRICT	IONS E	NDORSEMENTS M
T08345487	1	MODEL		06/30/:	TAG		A	STA	!	CMV F	PLACARD
VEHICLE MAKE NONE		NONE		to helique the per	- 4-1	IONE	al physical co	ontrol of a	motor vehic	cle upon a	N public road,
NONE On the above date, time, and highway, street, turnpike, put influence of alcohol and/or of (Describe driving behavior or POST REPAIR	blic parking lot, or other put ther intoxicating substances circumstances):	as prohibited by law.		·	cess to one o	r more single	or multi-fam	ily dwelling	g within this	s state wh	ile under the
Describe person's condition ((odor, actions, etc.):										
NONE											
			AS INFORMED OF THE	IMDI IED CONSI	ZNT TEST DI	OUEST					
BREATH-ALCOHOL ANALY	VOIC DECORD REPORT						CORD.				Section 2
EQUIPMENT	YSIS RECORD, REPORT	SERIAL	NUMBER SPE	ECIALIST	F TE						
I-8000		80-	002686 B	P	ERMIT NUME	BER					
STANDARD Dry			0.080		16837		ED	DATE	CYLINDER	REXPIRE	S
MANUFĀCTURER T LMO			3021908		03/02			01	/05,	/202	2
OBSERVATION START	TEST DATE	0 G	A 15-minute (or greater)	deprivation	on/observ	ation				_
1519 RESULT TABLE	03/02/202	U G	period was	observed pr time of test	ior to and	l continu	ing			HE S	TATA
Test	g/210L	Time	to the	time of test	administ	Tation.		-	[%:		18
		15:45	I administere	ed said Br	eath-Al	cohol T	est in			X	
Air Blank Subject Test	0.00 0.00	15:46	compliance	with the a	applicat	ole oper	ating		* * *		7
Breath Volu		ERS 15:46	procedi	are of the	Board o	of Tests	S.		A **		*** 5
Air Blank Wait	0.00	15:48	1						13/1		
Air Blank	0.00	15:48 15:49								190	
Subject Test Breath Volu	0.00 me 2.222 LITI		SIGNATURE OF OF	PERATOR							
Air Blank	0.00	15:49	NAME					╛	7	est Re	esult
Cal Check Air Blank	0.07 0.00	15:49 15:50	SMITH, JOSI	HUA	PERMIT#			4		AC g	
All blank			BADGE # 0000004	T I	0000	01683	7		() . C	00
			AGENCY BOARD OF	трстс				L			
EFFECTIVE THIRTY	V (20) DAVS EDOM	DATE SERVED NO	tice of Revocation	is given that	your drive	er's license	e is revok	ed or de	nied for	а	Section 3
period of one hundre this state will be disc commercial motor vo an Administrative He person at 3600 N. M	ed eighty (180) days qualified if you refuse ehicle. To appeal the	or more, if you refuse ed or failed the state's e driver's license reve e (45) days from the	ed or failed the state test(s) (operating a ocation/disqualification date you received	CMV or CDI on, the Depar notice of rev	holder) C rtment of F rocation o	OR a test r Public Safe or disqual	esult of .0 ety must r)4 or mo	ore while	operat	ing a uest for equest in
SERVING OF NOTI	CE: I personally har	nd-delivered a copy o	f the above containi	ng the Notice	of Revoc	ation to th	e person	named i	in Sectio	n 1 abo	ove.
Data served: 03	/02/2020	Signature of office	er:					Ва	adge #:_		
In accordance with	Fitle 12 O.S. Section	426, "I state under p	enalty of perjury u	nder the laws	of Oklaho	ma that th	ne foregoi	ng is tru	ue and c	orrect."	Section 4
Date: 03/02/2						re of arres					
SMITH, JO				AGENCY BOARD	OF T	ESTS			.,		
BADGE 00000043	AGENCY ADDRE	ss AGENCY				ZIP COL		HONE 4054	1252	460	
0000004	70 1 114 1 111										

Certificate of	of Analysis – Wet Bath			
12-10-19	,929			
Date of Analysis	Labelled targer value (g/210L)			
19050	F12 , 020	1907		H
Lot Number	A rage fel result (210 L)	ABORA'	TORIES,	INC.
LOCAL SALTA	530 NORTH 67th STR	Bi .	URG, PA 17111- 4511	● TELEPHONE: 717-564-5470
BOT Technician Name and Signat		BRT Form 6.0		
In accordance with BRT – 2	.2.0, Maintenance, the above referenced simu	lator solution is		
suitable for use as an exterr	nal reference in maintenance of the Intoxilyzer	0000.	•	

OF ANALYSIS

ALPHR INSTRUMENT 2 Intoxilyzer - Alcohol Analyzer SN 80-004923 Model 8000 12/10/2019

Certified Alcohol Reference Solution for Simulator

Test g/210L Time Air Blank 0,000 14:53 14:53 Cal Check 0.019 14:54 Air Blank 0.000 Cal Check 0.020 14:55 Air Blank 0,000 14:55 14:56 0.019 Cal Check 14:56 0.000 Air Blank 14:57 Cal Check 0.020 Air Blank 0.000 14:58 0.019 14:58 Cal Check 14:59 Air Blank 0.000 15:00 Cal Check 0.020 15:00 Air Blank 0.000 15:01 Cal Check 0.019 0.000 15:01 Air Blank 15:02 Cal Check 0.020 15:02 0.000 -Air Blank 15:03 Cal Check 0.020 Air Blank 0.000 Cal Check 0.020 Air Blank 0.000 Cal Check Stats 0.0196 Average Std Dev 0.0005

Random Samples of Lot Number 19050 Alcohol Reference Solution for Simulator were analyzed by chromatography on February 5, 2019, using a Perkin Elmer Gas gas Chromatograph Autosystem XL S/N: 610N9030209, and found 0.0236% (w/vol) ethyl alcohol. The expiration date for this lot number is February 4, 2021 at 11:59 PM.

When used in a calibrated Simulator, operating at 15:14 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.

Operator's Signature

2,6345

Rel Std Deu(%)

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	15 16 16 16 16 16 16 16 16 16 16 16 16 16
12,10,19	,940	
Date of Analysis	Labellet tar (t) alue (g/210L)	
19080	1,040	1907
Lot Number	Albrase distrespit (/2104	ABOI

ATORIES, INC.

590 NORTH 67th STREET 9 HARRISBURG, PA 17111-4511 9 TELEPHONE: 717-564-5470

BOT Technician Name and Signature

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

ALPHA INSTRUMENT 2 Intoxilyzer - Alcohol Analyzer SN 80-004923 Model 8000 12/10/2019 15:16 Time g/210L Test 15:17 0.000 Air Blank Cal Check 0.040 15:17 15:18 0.000 Air Blank 15:19 Cal Check 0.040 Air Blank 0.00015:19 Cal Check 0.040 15:20 0.000 15:20 Air Blank 15:21 0.040 Cal Check Air Blank 0.000 15:22

0.040

0.000

0.040

0.000

0.040

0.000

0.039

0.000

0.039

0,000

0.039

0.000

0.0397

0.0004

1,2167

15:22

15:23

15:24

15:24

15:25

15:25

15:26

15:27

15;27.

15:28

15:29

Cal Check

Air Blank

Cal Check

Air Blank Cal Check Stats

Auerage

Std Dev Rel Std Dev(%)

JOSH SMITH

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 19080 Alcohol Reference Solution for Simulator were analyzed by chromatography on March 5, 2019, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.0481% (w/vol) ethyl alcohol. The expiration date for this lot number is March 4, 2021 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.

Doerator's Signature

Ted L. Pauley, President GUTH LABORATORIES, INC.

NIST Traceability:

Testing was conducted using Cerilliant Reference Standard lot number FN12181501 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				
17-10-19	,100			
Date of Analysis	Labelled target value (g/210L)			
19301	100 L			
Lot Number	Ay rage to result (g/210L)			

690 NORTH 67th STREET 9 HARRISBURG, PA 17111-4511 9 TELEPHONE: 717-564-5470

BRT Form 6.0

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

ALPHA INSTRUMENT 2 Intoxilyzer - Alcohol Analyzer SN 80-004923 Model 8000 12/10/2019 15:36

BOT Technician Name and Signature

Certified Alcohol Reference Solution for Simulator

q/210L Time Test 0.000 15:37 Air Blank 15:37 0.100 Cal Check 0.000 15:38 Air Blank 15:39 Cal Check 0.101 0.000 15:39 Air Blank 15:40 Cal Check 0.100 0.000 15:40 Air Blank 15:41 0.100 Cal Check 15:42 Air Blank 0.000 15:42 cal check 0.100 15:43 Air Blank 0.000 15:44 Cal Check 0.099 Air Blank 0.000 15:44 Cal Check 0.100 15:45 Rir Blank 0.000 15:45 0.099 15:46 Cal Check 15:47 Air Blank 0.000 15:47 0.100 Cal Check 15:48 0.00 Air Blank 15:49 Cal Check 0.100 0.000 15:49 Air Blank Cal Check Stats 0.0999 Average 0.0005 Std Dev Rel Std Dev(%) 0.5682

Random Samples of Lot Number 19301 Alcohol Reference Solution for Simulator were analyzed by chromatography on November 1, 2019, using a Perkin Elmer Gas gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1210% (w/vol) ethyl alcohol. The expiration date for this lot number is October 30, 2021 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.

operator's Signature

Ted L. Pauley, President GUTH LABORATORIES, INC.

NIST Traceability: Testing was conducted using Cerilliant Reference Standard lot number FN04271602 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	f Analysis – Wet Bath	A SAN	
12-11-19	,209		•
Date of Analysis	Labyfied target value (g/210L)		
19209	FAZ 1290	1987	
Lot Number	-Aleren Marco It (/2/p)	BORATORIES,	INC.
Josh Smith	590 NORTH 67th STRE	ET 9 HARRISBURG, PA 17111-4511	• TELEPHONE: 717-564-5470
BOT Technician Name and Signature	X	BRT Form 6.0	

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

SN 80-004923 Model 8000 12/11/2019 g/210L . Time Test (0.000 08:04 Air Blank NR- N4 Cal Check 0,198 0.000 08:05 Air Blank 08:06 0.198 Cal Check 0.000 08:06 Air Blank 08;07 0,197 Cal Check Air Blank 0.000 08:08 0.197 08:08 Cal Check 0,000 08:09 Air Blank 08:10 0.197 Cal Check 0.000 08:10 Air Blank Cal Check 0.197 D8: 11 Air Blank 0.000 08:11 08:12 0.197 Cal Check 0.000 08:13 Air Blank 08:13 0.197 Cal Check Air Blank 0.000 08:14 0.196 08:15 Cal Check 08: 15 0.000 Air Blank

0.198

0,000

0.1972

0.0006

0,3207

nerator's Signature

ALPHA INSTRUMENT Z Intoxiluzer - Alcohol Analyzer

Cal Check

Air Blank

Average Std Deu

Cal Check Stats

Rel Std Deu(%)

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 19200 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on August 7, 2019, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.2418% (w/vol) ethyl alcohol. The expiration date for this lot number is August 6, 2021 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.

7

08:16

Ted L. Pauley, President GUTH LABORATORIES, INC.

NIST Traceability:

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.