



**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 (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 80-003398, in compliance with the agency's Maintenance Policy and Procedures.

This packet consists of 12 pages.

Signed 

Name of Position: Director/Records Custodian

Date of Attestation: 05/19/2022

Service Overview

Board of Tests for Alcohol and Drug Influence
Enhancing public safety by ensuring the accuracy and scientific reliability
of all breath alcohol testing



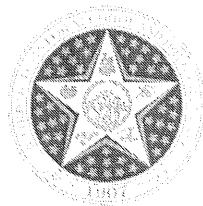
3600 N. Martin Luther King Bldg #9
Oklahoma City, OK 73111
405-425-2460

BENCH CHECK DATE: 12-19-2019

SERIAL: 80-003398

DOCUMENTATION WITHIN SERVICE PACKET:

- BOT Certificate of Calibration and Operation
- Bench Check
- Bench Check Technician's Report
- BOT Dry Gas Certificate of Analysis
- 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 80-003398, 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 | 08-27-08 |
| Board of Tests Bench Check | 09-30-08 |
| Board of Tests Bench Check | 03-31-10 |
| Board of Tests Bench Check | 01-24-12 |
| Manufacturer Calibration | 05-24-12 |
| Board of Tests Bench Check | 07-13-12 |
| Board of Tests Bench Check | 06-25-13 |
| Board of Tests Bench Check | 08-21-13 |
| Board of Tests Bench Check | 10-11-13 |
| Board of Tests Bench Check | 04-28-14 |
| Board of Tests Bench Check | 06-02-14 |
| Board of Tests Bench Check | 07-24-14 |
| Board of Tests Bench Check | 09-23-14 |
| Board of Tests Bench Check | 01-12-15 |
| Board of Tests Bench Check | 11-09-15 |
| Manufacturer Calibration | 11-14-17 |
| Board of Tests Bench Check | 11-29-17 |
| Board of Tests Bench Check | 12-19-19 |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |



Presentation of this form certifies that the Intoxilyzer, SN: 80-003398, 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

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

| | | |
|--------------------------------|---------------------------------|---------------------------------------|
| BENCH CHECK DATE 12/19/2019 | TIME PROCEDURE BEGAN 12:19:3 | INSTRUMENT LOCATION 80-003398 |
| INSTRUMENT TYPE Intoxilyzer | INSTRUMENT MODEL I-8000 | INSTRUMENT SERIAL NUMBER 80-003398 |

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

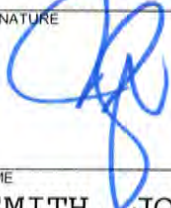
Duplicate Breath Sampling Results

| Value | Test 1 | Test 2 | Control Test |
|-------|--------|--------|--------------|
| .02 | 0.019 | 0.019 | 0.019 |
| .04 | 0.036 | 0.036 | 0.038 |
| .10 | 0.093 | 0.094 | 0.096 |
| .20 | 0.194 | 0.194 | 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 12/19/19 |
| NAME SMITH, JOSHUA | PERMIT # 0000016837 |



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

BENCH CHECK TECHNICIAN'S REPORT

Date: 12 / 19 / 19 Start Time: 1100 End Time: 1630

INSTRUMENT

| | |
|-------------------|-----------|
| Intoxilyzer Model | Serial # |
| 8000 | 80-003398 |

GAS CANISTER

| | |
|------------------|------------|
| LOT # | EXP Date |
| 28719080A1 # 006 | 12-05-2021 |

REFERENCE


| Simulator Model | | | |
|--------------------------|------------|------------|------------|
| 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 | | | |
| 12-09-19 | 12-09-19 | 12-09-19 | 12-09-19 |

REASON FOR BENCH CHECK

- POST REPAIR CYLINDER REPLACEMENT
 TROUBLESHOOTING ROUTINE MAINTENANCE

COMMENTS

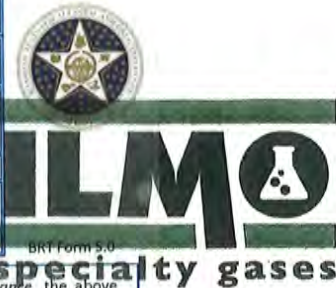
| |
|--|
| |
| |
| |
| |

 16837
 Technician Signature / Permit #

Josh Smith
 Printed Name

7/12

| Certificate of Analysis – Dry Gas | |
|--|--------------------------------|
| 12-19-19 | .080 |
| Date of Analysis | Labelled target value (g/210L) |
| 006 | .081 |
| Cylinder # | Average test result |
| BOT Technician Name and Signature <i>Josh Smith</i> | |



ALPHA INSTRUMENT 2
 Intoxilyzer - Alcohol Analyzer
 Model 8000 SN 80-004923
 12/19/2019 12:05

In accordance with BOT Policy and Procedure Statement BRT-2.2.0, Maintenance, the above 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

| Test | g/210L | Time |
|-----------------|--------|-------|
| Air Blank | 0.000 | 12:06 |
| Cal Check | 0.080 | 12:06 |
| Air Blank | 0.000 | 12:07 |
| Cal Check | 0.081 | 12:07 |
| Air Blank | 0.000 | 12:08 |
| Cal Check | 0.081 | 12:08 |
| Air Blank | 0.000 | 12:08 |
| Cal Check | 0.081 | 12:09 |
| Air Blank | 0.000 | 12:09 |
| Cal Check | 0.081 | 12:10 |
| Air Blank | 0.000 | 12:10 |
| Cal Check | 0.080 | 12:10 |
| Air Blank | 0.000 | 12:11 |
| Cal Check | 0.081 | 12:11 |
| Air Blank | 0.000 | 12:12 |
| Cal Check | 0.080 | 12:12 |
| Air Blank | 0.000 | 12:13 |
| Cal Check | 0.081 | 12:13 |
| Air Blank | 0.000 | 12:13 |
| Cal Check | 0.081 | 12:14 |
| Air Blank | 0.000 | 12:14 |
| Cal Check Stats | | |
| Average | 0.0807 | |
| Std Dev | 0.0004 | |
| Rel Std Dev(%) | 0.5985 | |

Certificate of Analysis

Certificate ID: 12484
 Part #: BAC105L080T
 Cylinder Size: 105L
 Lot Number: 28719080A1 ✓
 Expiration: 12/5/2021 ✓

*Rec'd
 11/01/19
 [Signature]*

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 4231
 Phone 866-835-0690
www.alcoholtest.com

[Signature] 16837
 Operator'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).

[Signature]
 Specialty Gas Lab Tech

10-23-19
 Issuance Date



The calibration results within this certificate were obtained using equipment and standards capable of producing analytical results traceable to NIST, and apply only to the items contained on this certificate. ILMO Products Company makes no warranty or representation as to the suitability of the use of any information provided for any particular purpose. The information use is at the sole discretion and risk of the user. Liability shall be limited to established replacement cost of this material or service.

OFFICER'S AFFIDAVIT AND NOTICE OF REVOCATION/DISQUALIFICATION

8/12

Section 1

| | | | | | | | | |
|--|-------------------|----------------------------|--------------------------------------|------------------------------------|---------------------|---------------------------|--------------------------|----------------------|
| ARREST DATE 12/19/2019 | | ARREST TIME 1430 | | COUNTY # 55 | CITY # 88 | CITATION # NONE | | |
| ARREST LOCATION NONE | | | | CITY NONE | | COUNTY NONE | | |
| SUBJECT NAME NORTH, GAYLON LEVERNE | | | | DATE OF BIRTH 08/09/1961 | SEX M | RACE W | HEIGHT 510 | WEIGHT 165 |
| ADDRESS 3600 MARTIN LUTHER KING A | | | CITY OKLAHOMA CITY | | STATE OK | ZIP CODE 73133 | | |
| DRIVER LICENSE # T083454871 | | | EXPIRATION DATE 06/30/2019 | STATE OK | CLASS A | RESTRICTIONS | ENDORSEMENTS M | |
| VEHICLE MAKE N | MODEL N | | TAG # N | | STATE MO | 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. ROUTINE MAINTENANCE, NEW GAS CANISTER INSTALL

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

NONE

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 80-003398 | SPECIALIST BOARD OF TESTS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|--------------------------------|-----------------------------------|--|--|------------------------------|-----------------------------|------------------------------|---------------------------------|------|-------|--------------|------|-------|---------------|--------------|--|-----------|------|-------|------|--|-------|-----------|------|-------|--------------|------|-------|---------------|--------------|--|-----------|------|-------|-----------|------|-------|-----------|------|-------|
| STANDARD Dry | | TARGET VALUE 0.080 | PERMIT NUMBER 16837 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MANUFACTURER ILMO | | LOT # 28719080A1 | DATE CYLINDER INSTALLED 12/19/2019 | DATE CYLINDER EXPIRES 12/05/2021 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| OBSERVATION START 1445 | TEST DATE 12/19/2019 | MOUTHPIECE G | <p style="text-align: center;">A 15-minute (or greater) deprivation/observation period was observed prior to and continuing to the time of test administration.</p> <p style="text-align: center;">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> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <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>15:29</td></tr> <tr><td>Subject Test</td><td>0.00</td><td>15:30</td></tr> <tr><td>Breath Volume</td><td>1.578 LITERS</td><td></td></tr> <tr><td>Air Blank</td><td>0.00</td><td>15:30</td></tr> <tr><td>Wait</td><td></td><td>15:32</td></tr> <tr><td>Air Blank</td><td>0.00</td><td>15:32</td></tr> <tr><td>Subject Test</td><td>0.00</td><td>15:34</td></tr> <tr><td>Breath Volume</td><td>1.957 LITERS</td><td></td></tr> <tr><td>Air Blank</td><td>0.00</td><td>15:35</td></tr> <tr><td>Cal Check</td><td>0.08</td><td>15:35</td></tr> <tr><td>Air Blank</td><td>0.00</td><td>15:35</td></tr> </tbody> </table> | | | | | Test | g/210L | Time | Air Blank | 0.00 | 15:29 | Subject Test | 0.00 | 15:30 | Breath Volume | 1.578 LITERS | | Air Blank | 0.00 | 15:30 | Wait | | 15:32 | Air Blank | 0.00 | 15:32 | Subject Test | 0.00 | 15:34 | Breath Volume | 1.957 LITERS | | Air Blank | 0.00 | 15:35 | Cal Check | 0.08 | 15:35 | Air Blank | 0.00 | 15:35 |
| Test | g/210L | Time | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Air Blank | 0.00 | 15:29 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Subject Test | 0.00 | 15:30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Breath Volume | 1.578 LITERS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Air Blank | 0.00 | 15:30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Wait | | 15:32 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Air Blank | 0.00 | 15:32 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Subject Test | 0.00 | 15:34 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Breath Volume | 1.957 LITERS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Air Blank | 0.00 | 15:35 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Cal Check | 0.08 | 15:35 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Air Blank | 0.00 | 15:35 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| RESULT TABLE | | | <div style="border: 1px solid black; padding: 5px; display: inline-block;"> <p>Test Result BrAC g/210L 0.00</p> </div> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>NAME SMITH, JOSHUA</td> <td>BADGE # 000000435</td> <td>PERMIT # 000016837</td> </tr> <tr> <td colspan="3">AGENCY BOARD OF TESTS</td> </tr> </table> | | | | | NAME SMITH, JOSHUA | BADGE # 000000435 | PERMIT # 000016837 | AGENCY BOARD OF TESTS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NAME SMITH, JOSHUA | BADGE # 000000435 | PERMIT # 000016837 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| AGENCY BOARD OF TESTS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

EFFECTIVE THIRTY (30) DAYS FROM DATE SERVED. Notice of Revocation is given that your driver's license is revoked or denied for a period of one hundred eighty (180) days or more, if you refused or failed the state's test(s). In addition, your commercial driving privilege in this state will be disqualified if you refused or failed the state's test(s) (operating a CMV or CDL holder) OR a test result of .04 or more while operating a commercial motor vehicle. To appeal the driver's license revocation/disqualification, the Department of Public Safety must receive your written request for an administrative hearing on the Department approved form, within fifteen (15) days from the date you received notice of revocation or disqualification. The approved hearing request form is available at <https://www.ok.gov/dps/documents/ReqHearing.pdf>. Submit your hearing request form in person at 3600 N. MLK Ave. or by mail to Legal Division, Department of Public Safety, P.O. Box 11415, OKC, OK 73136. It shall be a misdemeanor punishable by imprisonment for not less than seven (7) days nor more than six (6) months, or by a fine of not more than Five Hundred Dollars (\$500.00), or by both such fine and imprisonment, for any person to apply for a renewal or a replacement license to operate a motor vehicle while the person's license, permit, or other evidence of driving privilege is in the custody of a law enforcement officer or the Department.

SERVING OF NOTICE: I personally hand-delivered a copy of the above containing the Notice of Revocation to the person named in Section 1 above.

Date served: **12/19/2019** 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."

Date: **12/19/2019** Place (location when signed): _____ Signature of arresting officer: _____

| | | | |
|------------------------------|---------------------------------------|---------------------------------|----------------------------|
| NAME SMITH, JOSHUA | | AGENCY BOARD OF TESTS | |
| BADGE 000000435 | AGENCY ADDRESS INTER-AGENCY | ZIP CODE 00000 | PHONE 4054252460 |

OTHER WITNESSES:

Section 5

| | | | | |
|---|------|-------|---------|-------|
| 1 | NAME | TITLE | ADDRESS | PHONE |
| 2 | NAME | TITLE | ADDRESS | PHONE |

No Temporary License Issued:
Test Below Legal Limit

OFFICER'S AFFIDAVIT AND NOTICE OF REVOCATION/DISQUALIFICATION

9/12

Section 1

| | | | | | | | | |
|--|--|----------------------------|--------------------------------------|------------------------------------|---------------------|---------------------------|--------------------------|----------------------|
| ARREST DATE 12/19/2019 | | ARREST TIME 1430 | | COUNTY # 55 | CITY # 88 | CITATION # NONE | | |
| ARREST LOCATION NONE | | | | CITY NONE | | COUNTY NONE | | |
| SUBJECT NAME NORTH, GAYLON LEVERNE | | | | DATE OF BIRTH 08/09/1961 | SEX M | RACE W | HEIGHT 510 | WEIGHT 165 |
| ADDRESS 3600 MARTIN LUTHER KING A | | | CITY OKLAHOMA CITY | | STATE OK | ZIP CODE 73133 | | |
| DRIVER LICENSE # T083454871 | | | EXPIRATION DATE 06/30/2019 | STATE OK | CLASS A | RESTRICTIONS | ENDORSEMENTS M | |
| VEHICLE MAKE N | | MODEL N | | TAG # N | STATE MO | 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. ROUTINE MAINTENANCE, NEW GAS CANISTER INSTALL

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

NONE

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 80-003398 | SPECIALIST BOARD OF TESTS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|--------------------------------|-----------------------------------|--|--|------|--------|------|-----------|------|-------|--------------|------|-------|---------------|--------------|--|-----------|------|-------|------|--|-------|-----------|------|-------|--------------|------|-------|---------------|--------------|--|-----------|------|-------|-----------|------|-------|-----------|------|-------|
| STANDARD Dry | | TARGET VALUE 0.080 | PERMIT NUMBER 16837 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MANUFACTURER ILMO | | LOT # 28719080A1 | DATE CYLINDER INSTALLED 12/19/2019 | DATE CYLINDER EXPIRES 12/05/2021 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| OBSERVATION START 1445 | TEST DATE 12/19/2019 | MOUTHPIECE G | <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> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <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>15:29</td></tr> <tr><td>Subject Test</td><td>0.00</td><td>15:30</td></tr> <tr><td> Breath Volume</td><td>1.578 LITERS</td><td></td></tr> <tr><td>Air Blank</td><td>0.00</td><td>15:30</td></tr> <tr><td>Wait</td><td></td><td>15:32</td></tr> <tr><td>Air Blank</td><td>0.00</td><td>15:32</td></tr> <tr><td>Subject Test</td><td>0.00</td><td>15:34</td></tr> <tr><td> Breath Volume</td><td>1.957 LITERS</td><td></td></tr> <tr><td>Air Blank</td><td>0.00</td><td>15:35</td></tr> <tr><td>Cal Check</td><td>0.08</td><td>15:35</td></tr> <tr><td>Air Blank</td><td>0.00</td><td>15:35</td></tr> </tbody> </table> | | | | | Test | g/210L | Time | Air Blank | 0.00 | 15:29 | Subject Test | 0.00 | 15:30 | Breath Volume | 1.578 LITERS | | Air Blank | 0.00 | 15:30 | Wait | | 15:32 | Air Blank | 0.00 | 15:32 | Subject Test | 0.00 | 15:34 | Breath Volume | 1.957 LITERS | | Air Blank | 0.00 | 15:35 | Cal Check | 0.08 | 15:35 | Air Blank | 0.00 | 15:35 |
| Test | g/210L | Time | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Air Blank | 0.00 | 15:29 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Subject Test | 0.00 | 15:30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Breath Volume | 1.578 LITERS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Air Blank | 0.00 | 15:30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Wait | | 15:32 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Air Blank | 0.00 | 15:32 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Subject Test | 0.00 | 15:34 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Breath Volume | 1.957 LITERS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Air Blank | 0.00 | 15:35 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Cal Check | 0.08 | 15:35 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Air Blank | 0.00 | 15:35 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| RESULT TABLE | | | NAME SMITH, JOSHUA | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | BADGE # 0000000435 | PERMIT # 0000016837 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | AGENCY BOARD OF TESTS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

EFFECTIVE THIRTY (30) DAYS FROM DATE SERVED. Notice of Revocation is given that your driver's license is revoked or denied for a period of one hundred eighty (180) days or more, if you refused or failed the state's test(s). In addition, your commercial driving privilege in this state will be disqualified if you refused or failed the state's test(s) (operating a CMV or CDL holder) OR a test result of .04 or more while operating a commercial motor vehicle. To appeal the driver's license revocation/disqualification, the Department of Public Safety must receive your written request for an administrative hearing on the Department approved form, within fifteen (15) days from the date you received notice of revocation or disqualification. The approved hearing request form is available at <https://www.ok.gov/dps/documents/ReqHearing.pdf>. Submit your hearing request form in person at 3600 N. MLK Ave. or by mail to Legal Division, Department of Public Safety, P.O. Box 11415, OKC, OK 73136. It shall be a misdemeanor punishable by imprisonment for not less than seven (7) days nor more than six (6) months, or by a fine of not more than Five Hundred Dollars (\$500.00), or by both such fine and imprisonment, for any person to apply for a renewal or a replacement license to operate a motor vehicle while the person's license, permit, or other evidence of driving privilege is in the custody of a law enforcement officer or the Department.

Section 3

SERVING OF NOTICE: I personally hand-delivered a copy of the above containing the Notice of Revocation to the person named in Section 1 above.

Date served: **12/19/2019** 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: **12/19/2019** Place (location when signed): _____ Signature of arresting officer: _____

| | | | |
|------------------------------|---------------------------------------|---------------------------------|----------------------------|
| NAME SMITH, JOSHUA | | AGENCY BOARD OF TESTS | |
| BADGE 0000000435 | AGENCY ADDRESS INTER-AGENCY | ZIP CODE 00000 | PHONE 4054252460 |

No Temporary License Issued:
Test Below Legal Limit

ARRESTEE'S COPY
BOT Form AFF02 01/2019

Certificate of Analysis – Wet Bath



10/12

| | |
|--|-------------------------------|
| 12-10-19 | 0.020 |
| Date of Analysis | Labeled target value (g/210L) |
| 19050 | 0.020 |
| Lot Number | Perkin Elmer Analyst (g/210L) |
| JOSH SMITH BOT Technician Name and Signature | |

GUTH LABORATORIES, INC.
 590 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • 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
 Model 8000
 12/10/2019

SN 80-004923
 14:52

Certified Alcohol Reference Solution for Simulator

| Test | g/210L | Time |
|-----------------|--------|-------|
| Air Blank | 0.009 | 14:53 |
| Cal Check | 0.019 | 14:53 |
| Air Blank | 0.000 | 14:54 |
| Cal Check | 0.020 | 14:55 |
| Air Blank | 0.000 | 14:55 |
| Cal Check | 0.019 | 14:56 |
| Air Blank | 0.000 | 14:56 |
| Cal Check | 0.020 | 14:57 |
| Air Blank | 0.000 | 14:58 |
| Cal Check | 0.019 | 14:58 |
| Air Blank | 0.000 | 14:59 |
| Cal Check | 0.020 | 15:00 |
| Air Blank | 0.000 | 15:00 |
| Cal Check | 0.019 | 15:01 |
| Air Blank | 0.000 | 15:01 |
| Cal Check | 0.020 | 15:02 |
| Air Blank | 0.000 | 15:02 |
| Cal Check | 0.020 | 15:03 |
| Air Blank | 0.000 | 15:04 |
| Cal Check | 0.020 | 15:04 |
| Air Blank | 0.000 | 15:05 |
| Cal Check Stats | | |
| Average | 0.0196 | |
| Std Dev | 0.0005 | |
| Rel Std Dev(%) | 2.6345 | |

Random Samples of Lot Number 19050 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on February 5, 2019, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 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 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.

[Signature]
 Operator's Signature

[Signature: Ted L. Pauley]
 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

| | |
|-----------------------------------|-------------------------------------|
| 12.10.19 | .040 |
| Date of Analysis | Labelled tar(R) value (g/210L) |
| 19080 | .040 |
| Lot Number | Alcohol Reference Solution (g/210L) |
| JOSH SMITH | |
| BOT Technician Name and Signature | |



11/12

GUTH LABORATORIES, INC.
 590 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • 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
 Model 8000 SN 88-004923
 12/10/2019 15:16

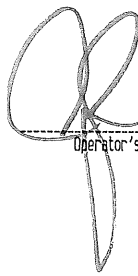
Certified Alcohol Reference Solution for Simulator


| Test | g/210L | Time |
|-----------------|--------|-------|
| Air Blank | 0.000 | 15:17 |
| Cal Check | 0.040 | 15:17 |
| Air Blank | 0.000 | 15:18 |
| Cal Check | 0.040 | 15:19 |
| Air Blank | 0.000 | 15:19 |
| Cal Check | 0.040 | 15:20 |
| Air Blank | 0.000 | 15:20 |
| Cal Check | 0.040 | 15:21 |
| Air Blank | 0.000 | 15:22 |
| Cal Check | 0.040 | 15:22 |
| Air Blank | 0.000 | 15:23 |
| Cal Check | 0.040 | 15:24 |
| Air Blank | 0.000 | 15:24 |
| Cal Check | 0.040 | 15:25 |
| Air Blank | 0.000 | 15:25 |
| Cal Check | 0.039 | 15:26 |
| Air Blank | 0.000 | 15:27 |
| Cal Check | 0.039 | 15:27 |
| Air Blank | 0.000 | 15:28 |
| Cal Check | 0.039 | 15:29 |
| Air Blank | 0.000 | 15:29 |
| Cal Check Stats | | |
| Average | 0.0397 | |
| Std Dev | 0.0004 | |
| Rel Std Dev(%) | 1.2167 | |

Random Samples of Lot Number 19080 of Alcohol Reference Solution for Simulator were analyzed by gas 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.


 16837
 Operator'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

| | |
|---|--------------------------------|
| 12-10-19 | .100 |
| Date of Analysis | Labelled target value (g/210L) |
| 19301 | .100 |
| Lot Number | Average test result (g/210L) |
| JOSH SMITH BOT Technician Name and Signature | |



12/12

GUTH LABORATORIES, INC.
 580 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • 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
 Model 8000 SN 80-004923
 12/10/2019 15:36

Certified Alcohol Reference Solution for Simulator

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

Random Samples of Lot Number 19301 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on November 1, 2019, using a Perkin Elmer 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.

[Signature]
 16937
 Operator's Signature

[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.