



**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 _____, in compliance with the agency's Maintenance Policy and Procedures.

This packet consists of _____ pages.

Signed 

Name of Position: Director/Records Custodian

Date of Attestation:

Service Overview

Board of Tests for Alcohol and Drug Influence
Ensuring public safety by enforcing the state and local laws
of alcohol and breath testing



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

BENCH CHECK DATE: 05-14-2020

SERIAL: 80-003400

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)

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 05/14/2020	TIME PROCEDURE BEGAN 14:31:2	INSTRUMENT LOCATION 80-003400
INSTRUMENT TYPE Intoxilyzer	INSTRUMENT MODEL I-8000	INSTRUMENT SERIAL NUMBER 80-003400

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

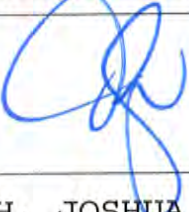
Duplicate Breath Sampling Results

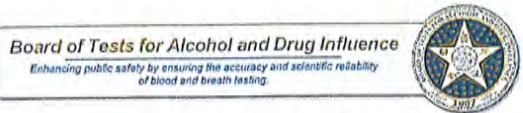
Value	Test 1	Test 2	Control Test
.02	0.015	0.015	0.016
.04	0.038	0.036	0.036
.10	0.100	0.099	0.099
.20	0.202	0.201	0.200

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 05/14/2020
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: 05/14/20 Start Time: 1400 End Time: 1630

INSTRUMENT

Intoxilyzer Model 8000 Serial # 80-003400

GAS CANISTER

LOT # 06419080-AZ # 039 EXP Date 05-05-2021

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			
<u>05-05-20</u>	<u>05-05-20</u>	<u>05-05-20</u>	<u>05-05-20</u>

REASON FOR BENCH CHECK

- POST REPAIR CYLINDER REPLACEMENT
 TROUBLESHOOTING ROUTINE MAINTENANCE

COMMENTS

REPLACED DEFECTIVE RAM.

[Signature] 16837
 Technician Signature / Permit #

Josh Smith
 Printed Name

7/13

ALPHA INSTRUMENT
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-002591
05/31/2019 14:28

Certificate of Analysis - Dry Gas	
05-31-19	.080
Date of Analysis	Labelled target value (g/210L)
039	.080
Cylinder #	Average test result
Jost Smith <i>[Signature]</i>	
BOT Technician Name and Signature	



In accordance with BOT Policy and Procedure Statement BRT-2.1.0, Maintenance, the above referenced dry gas cylinder is suitable for use as an external reference for the Intoxilyzer 8000.
 7 Eastgate Dr, Box 790 • Jacksonville, IL 62651-0790
 217-245-2183 • Fax: 217-243-7634 • www.ilmoproducts.com

Test	g/210L	Time
Air Blank	0.000	14:29
Cal Check	0.079	14:29
Air Blank	0.000	14:29
Cal Check	0.079	14:30
Air Blank	0.000	14:30
Cal Check	0.080	14:31
Air Blank	0.000	14:31
Cal Check	0.080	14:31
Air Blank	0.000	14:32
Cal Check	0.079	14:32
Air Blank	0.000	14:33
Cal Check	0.080	14:33
Air Blank	0.000	14:34
Cal Check	0.080	14:34
Air Blank	0.000	14:35
Cal Check	0.079	14:35
Air Blank	0.000	14:35
Cal Check	0.080	14:36
Air Blank	0.000	14:36
Cal Check	0.079	14:37
Air Blank	0.000	14:37
Cal Check Stats		
Average	0.0795	
Std Dev	0.0005	
Rel Std Dev(%)	0.6629	

Certificate of Analysis

Certificate ID: 11860
 Part #: BAC105L080T
 Cylinder Size: 105L
 Lot Number: 06419080A2 ✓
 Expiration: 5/5/2021 ✓

REC'D
05/22/19
[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 Str
 Owensboro, KY 4
 Phone 866-835-06
www.alcoholtest.com

[Signature]
 Operator's Signature
 11837

*NIST Traceable Reference Material
 Cylinder No. CC274523 / Job No. 09160306
 Certified 362.2 µmol/mol Ethanol in Nitrogen

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

03-19-19
 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

Section 1

ARREST DATE 05/15/2020		ARREST TIME 1400		COUNTY # 55	CITY # 39	CITATION # NON		
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 NONE			MODEL NONE	TAG # NONE		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. POST REPAIR MAINTENANCE.

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 80-003400	SPECIALIST BOARD OF TESTS																																							
STANDARD Dry		TARGET VALUE 0.080	PERMIT NUMBER 16837																																							
MANUFACTURER ILMO		LOT # 06419080A2	DATE CYLINDER INSTALLED 05/14/2020																																							
			DATE CYLINDER EXPIRES 05/05/2021																																							
OBSERVATION START 1415	TEST DATE 05/15/2020	MOUTHPIECE G	A 15-minute (or greater) deprivation/observation period was observed prior to and continuing to the time of test administration.																																							
RESULT TABLE <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Test</th> <th style="text-align: left;">g/210L</th> <th style="text-align: left;">Time</th> </tr> </thead> <tbody> <tr><td colspan="3">-----</td></tr> <tr><td>Air Blank</td><td>0.00</td><td>14:50</td></tr> <tr><td>Subject Test</td><td>0.00</td><td>14:51</td></tr> <tr><td> Breath Volume</td><td>1.933 LITERS</td><td></td></tr> <tr><td>Air Blank</td><td>0.00</td><td>14:51</td></tr> <tr><td>Wait</td><td></td><td>14:53</td></tr> <tr><td>Air Blank</td><td>0.00</td><td>14:53</td></tr> <tr><td>Subject Test</td><td>0.00</td><td>14:54</td></tr> <tr><td> Breath Volume</td><td>1.910 LITERS</td><td></td></tr> <tr><td>Air Blank</td><td>0.00</td><td>14:54</td></tr> <tr><td>Cal Check</td><td>0.08</td><td>14:55</td></tr> <tr><td>Air Blank</td><td>0.00</td><td>14:55</td></tr> </tbody> </table>				Test	g/210L	Time	-----			Air Blank	0.00	14:50	Subject Test	0.00	14:51	Breath Volume	1.933 LITERS		Air Blank	0.00	14:51	Wait		14:53	Air Blank	0.00	14:53	Subject Test	0.00	14:54	Breath Volume	1.910 LITERS		Air Blank	0.00	14:54	Cal Check	0.08	14:55	Air Blank	0.00	14:55
Test	g/210L	Time																																								

Air Blank	0.00	14:50																																								
Subject Test	0.00	14:51																																								
Breath Volume	1.933 LITERS																																									
Air Blank	0.00	14:51																																								
Wait		14:53																																								
Air Blank	0.00	14:53																																								
Subject Test	0.00	14:54																																								
Breath Volume	1.910 LITERS																																									
Air Blank	0.00	14:54																																								
Cal Check	0.08	14:55																																								
Air Blank	0.00	14:55																																								
SIGNATURE OF OPERATOR																																										
NAME SMITH, JOSHUA			 <div style="border: 1px solid black; padding: 5px; text-align: center;"> Test Result BrAC g/210L 0.00 </div>																																							
BADGE # 000000435		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. 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.

Section 3

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: **05/15/2020** 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: **05/15/2020** 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

Section 1

ARREST DATE 05/15/2020	ARREST TIME 1400	COUNTY # 55	CITY # 39	CITATION # NON		
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 NONE	MODEL NONE	TAG # NONE	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. POST REPAIR MAINTENANCE.


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 80-003400	SPECIALIST BOARD OF TESTS																																				
STANDARD Dry	TARGET VALUE 0.080	PERMIT NUMBER 16837																																				
MANUFACTURER ILMO	LOT # 06419080A2	DATE CYLINDER INSTALLED 05/14/2020																																				
		DATE CYLINDER EXPIRES 05/05/2021																																				
OBSERVATION START 1415	TEST DATE 05/15/2020	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"> <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>14:50</td></tr> <tr><td>Subject Test</td><td>0.00</td><td>14:51</td></tr> <tr><td>Breath Volume</td><td>1.933 LITERS</td><td></td></tr> <tr><td>Air Blank</td><td>0.00</td><td>14:51</td></tr> <tr><td>Wait</td><td></td><td>14:53</td></tr> <tr><td>Air Blank</td><td>0.00</td><td>14:53</td></tr> <tr><td>Subject Test</td><td>0.00</td><td>14:54</td></tr> <tr><td>Breath Volume</td><td>1.910 LITERS</td><td></td></tr> <tr><td>Air Blank</td><td>0.00</td><td>14:54</td></tr> <tr><td>Cal Check</td><td>0.08</td><td>14:55</td></tr> <tr><td>Air Blank</td><td>0.00</td><td>14:55</td></tr> </tbody> </table>			Test	g/210L	Time	Air Blank	0.00	14:50	Subject Test	0.00	14:51	Breath Volume	1.933 LITERS		Air Blank	0.00	14:51	Wait		14:53	Air Blank	0.00	14:53	Subject Test	0.00	14:54	Breath Volume	1.910 LITERS		Air Blank	0.00	14:54	Cal Check	0.08	14:55	Air Blank	0.00	14:55
Test	g/210L	Time																																				
Air Blank	0.00	14:50																																				
Subject Test	0.00	14:51																																				
Breath Volume	1.933 LITERS																																					
Air Blank	0.00	14:51																																				
Wait		14:53																																				
Air Blank	0.00	14:53																																				
Subject Test	0.00	14:54																																				
Breath Volume	1.910 LITERS																																					
Air Blank	0.00	14:54																																				
Cal Check	0.08	14:55																																				
Air Blank	0.00	14:55																																				
<p>NAME SMITH, JOSHUA</p> <p>BADGE # 0000000435</p> <p>PERMIT # 0000016837</p> <p>AGENCY BOARD OF TESTS</p>																																						
 <div style="border: 1px solid black; padding: 5px; text-align: center;"> <p>Test Result BrAC g/210L 0.00</p> </div>																																						

Section 3

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: **05/15/2020** 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: **05/15/2020** 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

Certificate of Analysis – Wet Bath



12-10-19

.020

Date of Analysis

Labeled target value (g/210L)

19050

.020

Lot Number

JOSH SMITH

BOT Technician Name and Signature

GUTH LABORATORIES, INC.

690 NORTH 67th STREET • HARRISBURG, PA 17111-4611 • TELEPHONE: 717-664-5470

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

SH 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.



Operator's Signature



Ted L. Pauley, President
GUTH LABORATORIES, INC.

NIST Traceability:

Testing was conducted using Cerilliant Reference Standard lot number FN08031603 whose values are traceable to NIST.

All balances are calibrated annually by an outside agency using NIST traceable weights. Calibration verification is done prior to each use utilizing NIST traceable weights.

Certificate of Analysis - Wet Bath	
12-10-19	.040
Date of Analysis	Labelled tartrate value (g/210L)
19080	.040
Lot Number	Analysis result (g/210L)
JOSEPH 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 SN 80-004923
 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.

[Signature]
 16837
 Operator's Signature

[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)
JOSEPH SMITH	
BOT Technician Name and Signature	

GUTH LABORATORIES, INC.

690 NORTH 67th STREET • HARRISBURG, PA 17111-4611 • 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.


Operator's Signature 16837



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 Analysis - Wet Bath	
Date of Analysis	12-11-19
Lot Number	19200
BOT Technician Name and Signature	
Josh Smith	



GUTH LABORATORIES, INC.
 530 NORTH 67th STREET • HARRISBURG, PA 17111-4811 • 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
 12/11/2019 08:03

Certified Alcohol Reference Solution for Simulator

Test	g/210L	Time
Air Blank	0.000	08:04
Cal Check	0.198	08:04
Air Blank	0.000	08:05
Cal Check	0.198	08:06
Air Blank	0.000	08:06
Cal Check	0.197	08:07
Air Blank	0.000	08:08
Cal Check	0.197	08:08
Air Blank	0.000	08:09
Cal Check	0.197	08:10
Air Blank	0.000	08:10
Cal Check	0.197	08:11
Air Blank	0.000	08:11
Cal Check	0.197	08:12
Air Blank	0.000	08:13
Cal Check	0.197	08:13
Air Blank	0.000	08:14
Cal Check	0.196	08:15
Air Blank	0.000	08:15
Cal Check	0.198	08:16
Air Blank	0.000	08:17
Cal Check Stats		
Average	0.1972	
Std Dev	0.0006	
Rel Std Dev(%)	0.3207	

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.

[Signature]
 Operator's Signature

[Signature]

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.