

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 80-003809, in compliance with the agency's Maintenance Policy and Procedures.

Signed

Name of Position: Director/Records Custodian

Date of Attestation: 09/01/2022



Board of Tests for Alcohol and Drug Influence Enhancery public safety by ensuing the accuracy and scientific relativity (Mood and breath loading



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

### BENCH CHECK DATE: 09/01/2022

### SERIAL: 80-003809

### DOCUMENTATION WITHIN SERVICE PACKET:

- BOT Certificate of Maintenance, Calibration and Operation
- Bench Check
- CMI Certificate of Calibration
- <u>CMI Evaluation Form</u>
- <u>CMI Work Order</u>
- BOT Dry Gas Certificate of Analysis
- Ilmo Specialty Gases Certificate of Analysis
- Mock Subject Test
- BOT Certificate of Analysis Reference Solution (4)
- Guth Laboratories Certificate of Analysis (4)



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# CERTIFICATE of MAINTENANCE, CALIBRATION, and OPERATION

This certifies the **Intoxilyzer 8000** referenced below, manufactured by CMI, Inc., a subsidiary of MPD, Inc. of Owensboro, Kentucky, is maintained by the Board of Tests for Alcohol and Drug Influence in accordance with 40 O.A.C. 30-1-3. The instrument reported below is hereby deemed to be in compliance with Board rules via linearity accuracy examination and operational/functional procedure evaluation also referred to as a "Bench Check". The Intoxilyzer 8000 appears on the National Highway Traffic Safety Administration's Conforming Products List of Evidential Breath Alcohol Measurement Devices (82 FR 50940 *et seq*) as an approved device. In accordance with 40 O.A.C. 25-1-2, this instrument is approved and certified for use in the State of Oklahoma as an automated evidential breath-alcohol measurement device by the Board of Tests pursuant to 47 O.S. § 759.

All analyses conducted by this instrument are considered precise, valid, and in accordance with 40 O.A.C. 30-1-3(b) Operating Procedure(s). A printed breath test operator affidavit containing the seal of the Board by this instrument confirms a calibration check successfully verified the instrument's calibration at the time of test. The printed breath test affidavit also serves as proof that safeguards in place to protect the breath samples, including but not limited to Ambient Air Interference, Radio Frequency Interference, Residual Mouth Alcohol, Deficient Samples, etc. were not triggered and the test is a true and accurate scientific measurement of the person's alcohol concentration.

- Maintenance was performed on the Intoxilyzer 8000, Serial No. <u>80-003809</u> on <u>09/01/2022</u> in accordance with 40 O.A.C. 30-1-3 and internal BOT maintenance policy and procedures.
- A dry gas canister appearing on the National Highway Traffic Safety Administration's Conforming Products List of Calibrating Units for Breath Alcohol Testers (77 FR 64588 et seq) and approved in accordance with 40 O.A.C. 25-1-3 and BOT maintenance policy was installed.
  - Manufacturer: ILMO Unit: 208 ppm / 105 L
  - Cylinder Lot No. Canister No.: <u>15922080A3-006</u>
  - BOT analysis average test result: 0.080
  - Cylinder expiration date: <u>08/05/2024</u>

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

| Simulator Model          |  |            |            |
|--------------------------|--|------------|------------|
| Guth 2100                | Guth 2100  | Guth 2100  | Guth 2100  |
| Serial #                 | and the second sec |            |            |
| DR2834                   | DR3694   | DR2455     | DR3470     |
| Concentration            |  |            |            |
| .02                      | .04  | .10        | .20        |
| LOT #                    |  |            |            |
| 21120                    | 21070  | 22080      | 22050      |
| Manufactured Date        |  |            | A          |
| 4/7/2021                 | 3/1/2021   | 3/7/2022   | 2/7/2022   |
| Expiration Date          |  |            | 1          |
| 4/7/2023                 | 3/1/2023   | 3/7/2022   | 2/7/2024   |
| Solution Commission Date |  |            |            |
| 08/23/2022               | 08/23/2022   | 08/23/2022 | 08/17/2022 |

Completed by BOT Personnel:

З.

Christopher Pape Signature/Name Certified by Joshua Smith Signature Name

Breath-Alcohol Testing Program Administrator Title

State Director

Title

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

| ENCH CHECK DATE                 | 10:09:2              |                | $\frac{1}{80-00380}$ | 9             |                 |
|---------------------------------|----------------------|----------------|----------------------|---------------|-----------------|
| Intoxilyzer                     | INSTRUMENT           |                |                      | INSTRUMENT SE |                 |
|                                 |                      | TEST RES       | SULTS                |               |                 |
|                                 |                      |                |                      |               |                 |
| Diagnosti                       | cs                   |                |                      |               |                 |
| PASS                            |                      |                |                      |               |                 |
| Mouth Alcoho                    | ol Test              |                |                      |               |                 |
| PASS                            |                      |                |                      |               |                 |
| RFI Test                        | t                    |                |                      |               |                 |
| PASS                            |                      | Dup            | licate Breath        | Sampling Re   | sults           |
| Abort Te                        | st                   |                |                      |               | Control         |
| PASS                            |                      | Value          | Test 1               | Test 2        | Test            |
| Improper Samp                   | ole Test             | 0.2            | 0.022                | 0.001         | 0.022           |
| PASS                            | 120                  | . 02           |                      | 0.021         | 0.022           |
| Interferent Detect Test<br>PASS | ect Test             | .04            | 0.041                | 0.041         | 0.041           |
|                                 |                      | .10            | 0.103                | 0.102         | 0.105           |
| No Sample Give<br>PASS          | en Test              | .20            | 0.200                | 0.199         | 0.199           |
| Insufficient Sam                | ple Test             |                | PA                   | SS            |                 |
| PASS                            |                      |                |                      |               |                 |
| Air Blank Contami               | nation Test          |                |                      |               |                 |
| PASS                            |                      |                |                      |               |                 |
| Range Exceede                   | ed Test              |                |                      |               |                 |
| PASS                            |                      |                |                      |               |                 |
|                                 |                      |                |                      |               |                 |
|                                 |                      | CERTIFYING TI  | ECHNICIAN            |               |                 |
| I swear under penalty           | of perjury that in r | egards to the  | above listed i       | instrument, I | have complied w |
| the Intoxliyzer Bench           | h Checking Procedu   | ire approved b | by the State o       | f Oklahoma.   |                 |
| NATURE                          | 0                    |                |                      | DATE          |                 |
| 11. #                           | -1'                  |                |                      | a             | 1.100           |
| Milles                          | Vare                 |                |                      | 4/            | 1/202           |
| PAPE, CHRISTO                   | PHER                 |                |                      |               | 023020          |
|                                 |                      |                |                      | 7.7.7         | A DANGT ST      |

# 5/20 **Certificate of Calibration** This is to certify the calibration of Intoxilyzer <sup>®</sup> serial number 80-003809 \_\_\_\_, 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 <u>Aug. 17, 2022</u> INC. Signed S Technician 316 East 9th Street Owensboro, KY 42303 USA Part No. 650517 Rev.A



This form MUST be completed and enclosed with item to be serviced. \*\*\* Hazardous Material Warning! – <u>DO NOT</u> return gas cylinder with instrument! \*\*\*

Note: Please ship items in their original shipping container.

|   |                     |  | P   | hone: (   | 5) 425-2460   |   |
|---|---------------------|--|---|---|---|---|
| Email: <u>christopher.pape@bot.ok.gov</u> Cust      |                     | ustomer #731362 (contact Cust                        |   | (contact Custo  | omer Service)   |   |
| Your Billing Address<br>Agency Name: Board of Tests |                     |  |   |   |   |   |
| ng, Bldg 9  |                     | 7.5  | Addres                                      | s: 3600 N MI  | L King, Bldg 9  | 100 Aug 1 100   |
| State: OK   | Zip:                | 73111  | City: O                                     | klahoma City  | State: OK   | Zip:73111   |
| Credit Card/PO #:                                   |                     |  | Contact Person: Chris Pape                  |   |   |   |
| Name on Card:                                       |                     |  | Contact Phone: (405) 425-2460               |   |   |   |
| Expiration Date: CVV                                |                     | Email: (   | christopher.p                               | ape@bot.ok.gov  |   |   |
|   | Tests<br>ng, Bldg 9 | Tests<br>ng, Bldg 9<br><b>State:</b> OK <b>Zip</b> : | Tests<br>ng, Bldg 9<br>State: OK Zip: 73111 | Debot.ok.gov   Customer #     Tests   Your S     ng, Bldg 9   Addres     State: OK   Zip: 73111     City: Ol   Contac     Contac   Contac | Obot.ok.govCustomer # 731362TestsYour Shipping Add<br>Agency Name: Board<br>Address: 3600 N MState: OKZip: 73111City: Oklahoma City<br>Contact Person: Chi<br>Contact Phone: (40) | TestsYour Shipping Addressng, Bldg 9Address: 3600 N ML King, Bldg 9State: OKZip: 73111City: Oklahoma CityState: OKContact Person: Chris PapeContact Phone: (405) 425-2460 |

## **Detailed Description of Problem:**

3µm and 9µm values are low. Unit also fails snap test. Source may need replaced. Unit's display is also dim and needs replaced.

Note: For instruments not under warranty, an evaluation fee of \$83.00 (infrared and I-200) or \$43.50 (fuel cell), plus return shipping cost, will apply to all service items.

| ✓ I authorize all repairs up to  | \$500 to be performed.          |  |
|----------------------------------|---------------------------------|--|
| After repair, add "Certificate o | f Calibration" for: 🗖 S-D2, S-I | D5, and I-800 (\$19)<br>40, I-300, I-400, and I-600 (\$39) |
| Authorized By:                   |                                 | , ,  |
| Chris Pape                       | Breath Testing Admin            | Ship item to:  |
| Name (Please Print)              | Title                           | CMI, Inc.  |
| Chletter len                     | 4/27/2022                       | Attn: Service Dept.<br>316 East Ninth Street               |
| Signature                        | Date                            | Owensboro, KY 42303  |



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

Ship To:

USA

Oklahoma Board Of Tests

Blvd Adcu Annex Bldg #9

Oklahoma City OK 73136-3000

3600 Martin Luther King

Phone: 405-425-2424

SERVICE WORK ORDER

406909

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

#### Serial Number: 80-003809

### BILL CODE: Out of Warranty

### MODEL #: 0024800K EXTRA PARTS RCVD:

BH,KB,BATTERY COVER,GAS SHELF W/REG

#### DESCRIPTION OF PROBLEM

3 AND 9 VALUES ARE LOW. UNIT ALSO FAILS SNAP TEST. SOURCE MAY NEED REPLACED. UNITS DISPLAY IS ALSO DIM AND NEEDS REPLACED.

#### WORK PERFORMED:

display/ dim; foam filter/ dirty; tygon tubing/ dirty; O-ring/ cracked; replaced parts listed; calibrated/ final tested; 8133.15.00 software; did not replace source/ ok;

#### PARTS USED

| Seq. No. | Part   | Description                      | Quantity |
|----------|--------|----------------------------------|----------|
| 43       | 320643 | HDR,14PIN,2ROW, 100CC,4-SIDED    | 1.00 EA  |
| 47       | 140112 | DISPLAY,2x20 VFD 9MM             | 1.00 EA  |
| 55       | 530030 | TUBING, TYGON, .375IDx.562OD     | 2.00 IN  |
| 70       | 402565 | O-RING, NEOPRENE, . 3011Dx.06THK | 1.00 EA  |
| 100      | 650517 | CERTIFICATE OF CALIBRATION       | 2.00 EA  |
| 110      | 441169 | COVER DUST,5/8in x 1/2in         | 1.00 EA  |
| 120      | 470145 | CAP, PLASTIC, 25IDx.50LG, RED    | 3.00 EA  |
| 130      | 470154 | CAP,PLSTC,.406IDx.438562,RED     | 1.00 EA  |
| 137      | 470202 | FILTER,FOAM,1.85x2.20            | 1.00 EA  |
| 140      | 470218 | SEAL, TAMPER EVIDENT, SERVICE    | 1.00 EA  |

| LABOR / TESTIN | G |      |
|----------------|---|------|
|                |   | <br> |

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

Technician Name: Hayden Schweikardt



DATE: 5/4/2022



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Joshua Smith Director

### Certificate of Analysis - Dry Gas

| ALPHA  | INSTRU | IMI | ENT     |          |           |
|--------|--------|-----|---------|----------|-----------|
| Intoxi | lyzer  | ¥,  | Alcohol | Analyzer |           |
| Model  | 8000   |     |         | SN       | 80-002591 |
| 08/11/ | 2022   |     |         |          | 13:34     |
|        |        |     |         |          |           |

| Test            | g/210L | Time  |
|-----------------|--------|-------|
| Air Blank       | 0.000  | 13:34 |
| Cal Check       | 0.080  | 13:34 |
| Air Blank       | 0.000  | 13:35 |
| Cal Check       | 0.080  | 13:35 |
| Air Blank       | 0.000  | 13:36 |
| Cal Check       | 0.079  | 13:36 |
| Air Blank       | 0.000  | 13:37 |
| Cal Check       | 0.080  | 13:37 |
| Air Blank       | 0.000  | 13:37 |
| Cal Check       | 0.080  | 13:38 |
| Air Blank       | 0.000  | 13:38 |
| Cal Check       | 0.080  | 13:39 |
| Air Blank       | 0.000  | 13:39 |
| Cal Check       | 0.080  | 13:39 |
| Air Blank       | 0.000  | 13:40 |
| Cal Check       | 0.080  | 13:40 |
| Air Blank       | 0.000  | 13:41 |
| Cal Check       | 0.080  | 13:41 |
| Air Blank       | 0.000  | 13:42 |
| Cal Check       | 0.080  | 13:42 |
| Air Blank       | 0.000  | 13:43 |
| Cal Check Stats |        |       |
| Average         | 0.0799 |       |
| Std Dev         | 0.0003 |       |
| Rel Std Dev(%)  | 0.3957 |       |

| Manufacturer: ILMO   | 0.08 g/210L = 208 PPM ÷ 2605*<br>Manufacturer Cert. No.: 14879   | Cylinder Size: 105L  |
|--|--|--|
| Lot No.: 15922080A3  | Cylinder No.: 006  | Expiration Date: 08/05/2024  |
|  | 750 10 04 0 05 1 0 1   | reference standard meets the requirements for use as a   |
| calibrating unit in accordance with 47 O.S.<br>testers published by the U.S. Department<br>Anal. Toxicol. (1996) 20(6): pp. 484-491. | . 759, 40 OAC 25-1-3, and appears on the current confo<br>of Transportation in the Federal Register [77 FR 64588 | orming products list of calibrating units for breath alcohol<br>et seq], * See Dubowski, K.M. and Essary N., <i>Journal of</i> |
| testers published by the U.S. Department   | . 759, 40 OAC 25-1-3, and appears on the current confo<br>of Transportation in the Federal Register [77 FR 64588 | prming products list of calibrating units for breath alcohol<br>et seq]. * See Dubowski, K.M. and Essary N., <i>Journal of</i> |



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: | 14879       |  |  |
|-----------------|-------------|--|--|
| Part #:         | BAC105L080T |  |  |
| Cylinder Size:  | 105L        |  |  |
| Lot Number:     | 15922080A3  |  |  |
| Expiration:     | 8/5/2024 🗸  |  |  |
|                 |             |  |  |

RLVV 7/29/2022 CP

0.080 BAC (For the calibration of instruments used to determine breath alcohol concentration)

Contents: 105 Liters @ 1000 psig 70°F (21°C)

|            | 1              |
|------------|----------------|
|            | Reported       |
| Component: | Concentration: |
| Ethanol    | 208 ppm        |
| Nitrogen   | Balance        |
|            |                |

Analytical Accuracy (U, k=2): +/-0.002 BAC(G/210L) [5.2 ppm] Analytical Method: NDIR

#### **Distributed by:**

area to exceed 52 °C (125 °F).

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

Store in dry area, away from sources of heat,

ignition and direct sunlight. Do not allow storage

\*Traceable to: NIST Research Gas Mixture - 212.6 µmol/mol Ethanol in Nitrogen - Serial No. SA15944

7-19-2022

Issuance Date



The calibration results within this certificate were obtained at the facility listed above 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. This certificate applies only to the items described and shall not be reproduced other than in full, without written approval from the issuing facility.

ISO/IEC 17025:2017 Accredited Laboratory

# OFFICER'S AFFIDAVIT AND NOTICE OF REVOCATION/DISQUALIFICATION

| ARREST DATE<br>09/01/202<br>ARREST LOCATION<br>BOT  |  | LABORET THE  |   | looune   |   | 0754.0   | lawren  |   |  | Section  |
|---|--|--|---|--|---|--|---|---|--|--|
| ARREST LOCATION   | 22   | ARREST TIME  |   | 55   | C   | атү #  | CITATIO   | JI4 II  |  |  |
|   |  | 1  |   | 1.000  | CITY  |  |   |   | LAHC   | a The PA Content of the second s |
| SUBJECT NAME<br>BREATHTE:<br>ADDRESS  | ST, DELTA  |  | ICITY   |  |   | OF BIRTH   |   |   | HEIGHT<br>510  | 200  |
| 3600 MLK  |  |  |   | HOMA C   | ITY   |  | OK  |   | 731  |  |
| B0834630  | 10   |  |   | EXPIRATION D   |   |  | D   | RESTRI  | CTIONS   | ENDORSEMENT  |
| VEHICLE MAKE  | 42   | MODEL  |   | 110/21   | T   | AG #   | D   | STATE   | CMV  | PLACARD  |
| MOCK  |  | MOCK   | and the second se |  |   | MOCK   |   | OK  | N  | N  |
| highway, street, tumpike, p   | oublic parking fot, or other<br>other intoxicating substan<br>or circumstances):   | ned person was arrested, an<br>sublic place, or upon a privat<br>ces as prohibited by law.   |   |  |   |  |   |   |  |  |
| Describe person's conditio  | n (odor, actions, etc.);   | 7  |   |  |   |  |   |   |  |  |
| POST REPAI  | R MAINTENAN  | CE, INSTALLE   | D NEW CYLI  | NDER   |   |  |   |   |  |  |
|   |  |  |   |  |   |  |   |   |  |  |
|   |  | THE PERSON   | WAS INFORMED OF T   | HE IMPLIED CO  | SENT TEST I   | REQUEST  |   |   |  |  |
|   | LYSIS RECORD, REPOR  | T OF THE PERSON NAMED  |   |  | ST AND MAIN   | TENANCE RECO   | IRD.  |   |  | Section :  |
| I-8000  | C. M. L. M. A  |  | NUMBER - 003809   | BOARD  | OF TE   | STS  | 1   |   |  |  |
| STANDARD  |  | 00   | TARGET VALUE  | BOARD  | PERMIT NUM  | BER  |   |   |  |  |
| Dry   |  |  | 0.080   |  | 2302  |  | 1.  | DATE CYLINDE  |  |  |
| MANUFACTURER  |  |  | 159220  | 80A3   | 09/0  | DER INSTALLED  |   | 08/05   |  |  |
| OBSERVATION START   | TEST DATE  |  | A 15-minute   |  |   |  | ion   |   | / =  |  |
| 1130<br>RESULT TABLE  | 09/01/20:  | 22   |   |  |   | d continuing   |   |   | -  |  |
|   | 100.00   | and a second   |   | e time of te   |   |  |   | 1   | THE  | TATE   |
| Test  | g/210L   | Time   | I administe   |  | CT 2 7  |  | 10.00   | 1.14  | * */   | +++ 19   |
| Subject Test<br>Breath Volu<br>Air Blank<br>Wait<br>Air Blank<br>Subject Test<br>Breath Volu  | 0.00<br>0.00<br>0.00<br>ime 2.136 LIT  | 11:47<br>11:49<br>11:49<br>11:50<br>ERS  | complianc<br>procee   | dure of the  |   |  | ing<br>   | OREAT 8   | 190  |  |
| Air Blank<br>Cal Check  | 0.00   | 11:50<br>11:51   | NAME  |  | _   |  |   | 1   | Fest Re  | esult  |
| Air Blank   | 0.00   | 11:51  | PAPE, CHE   | RISTOPHE   | R<br>PERMIT #   |  |   |   | rAC g/   |  |
|   |  |  | 00000004  | 184  |   | 023020   |   |   | 2010   | 00   |
|   |  |  | AGENCY<br>BOARD OF  | TECTC  |   | 1.1.1.   |   |   | 0.0  | 50   |
| days or more, if you refu:<br>(operating a CMV or CDI<br>as a result of this arrest t<br>You may be eligible to<br>revocation as a result o<br>request IDAP within thi<br>SERVING OF NOTI | ed or failed the state's to<br>holder) OR a test result<br>by filing a petition in the C<br>participate in the impai<br>of this arrest from appe<br>rty (30) days of the dat<br>CE: 1 personally har | ERVED. Notice of Revoc<br>est(s). In addition, your co<br>of .04 or more while oper-<br>Starict Count of the County<br>red Driver Accountability<br>aring on your driving ree<br>a listed below. Mail the r<br>nd delivered a copy of<br>med in Section 1 abor<br>Signature of officei | mmercial driving privile<br>aling a commercial mol<br>in which you were arree<br>Program (IDAP) adm<br>ord. Participation in<br>equest for IDAP to th<br>The above contain<br>ve.   | ge in this state v<br>tor vehicle. You<br>ested. Your petit<br>ninistered by th<br>IDAP may redu<br>e Department o | vill be disqual<br>may appeal a<br>ion must be fi<br>e Departmen<br>ce the amoun<br>f Public Safe | fled if you refuse<br>iny Departmenta<br>led within thirty (<br>t of Public Safe<br>nt of fees you w<br>ty at P.O. Box 1 | ed or failed ti<br>I action agai<br>30) days of<br>ty (DPS). C<br>vill be requir<br>1415, Oklai | ne state's lest<br>nst your driver<br>the date listed<br>ompletion of<br>red to pay to<br>homa City, Ol | (s)<br>r license<br>below.<br>IDAP ma<br>the State<br>K 73136. | You must   |
|   |  | 426, "I state under pe   |   | inder the laws   | of Oklaho   | ma that the fe   | regoina ia  |   | orrect "   | Section 4  |
| in accordance with 1  | nie 12 0.5. Section  | 420, 1 state under pe  | many or perjury u   | nuer the laws  | or Okianoi  | na triat the fo  | regoing is  | rue and co  | unect."  | occurr.  |
| Date:   | Place (loca  | ition when signed):  |   | PURPORT  | Signatur  | e of arresting   | officer:  |   |  |  |
| NAME  | IRISTOPHER   | ,  |   | BOARD  | OF T  | ESTS   |   |   |  |  |
| PAPE. CH  | AGENCY ADDRES  | iS   |   | Dornes   |   | ZIP CODE   | PHONE   |   | nà a   |  |
| BADGE   | 34   INTER-  | AGENCY   |   |  |   | 00000  | ) 40  | 542524  | 160  |  |
|   |  |  |   |  |   |  |   |   |  |  |
| BADGE<br>000000048  | S:   |  |   |  |   |  |   |   |  | Section 5  |
| BADGE<br>000000048<br>OTHER WITNESSE<br>NAME  | S:   |  | TITLE   | ADDRESS  |   |  | PHO   | ONE   |  | Section :  |
| BADGE<br>0000000048<br>OTHER WITNESSE   | S:   |  | TITLE   | ADDRESS  |   |  |   |   |  | Section :  |

# OFFICER'S AFFIDAVIT AND NOTICE OF REVOCATION/DISQUALIFICATION

| ARREST DATE  | ARRES  | TTIME  | CALL AND CALLS  | COUNTY #  | 0.044   | CITY #  | CITA  | TIÓN #  |  | Section        |
|--|--|--|---|---|---|---|---|---|--|----------------|
| 09/01/2022   | 11   |  |   | 55  | Incom   |   | 14  |   | freed a  |                |
| ARREST LOCATION<br>BOT   |  |  |   |   | CITY  |   | -   | trata da la Maria da  | <b>KLAHO</b>   |                |
| SUBJECT NAME<br>BREATHTESI   | , DELTA  |  |   |   |   | E OF BIRTH  |   | M<br>M  | HEIGHT   | WEIGHT         |
| ADDRESS<br>3600 MLK  |  |  | OKLA  | HOMA C  | TTY   |   | STA   |   | ZIP COD<br>731   |                |
| DRIVER LICENSE #   |  |  |   | EXPIRATION DA   | TE  |   | CLASS   |   |  | ENDORSEMENT    |
| B083463042<br>VEHICLE MAKE   |  | MODEL  |   | 10/31,  | 2022  | TAG #   | D   | STATE   | GMV  | PLACARD        |
| MOCK   | ocation, the above named person  | MOCK   | and the second se |   |   | MOCK  |   | OK  | N  | N              |
| ighway, street, tumpike, publi   | c parking lot, or other public place<br>ar intoxicating substances as proh<br>ircumstances):   | or upon a privat   | e road, street, alley or land   | e which provides a  | iccess to or  | e or more single or r   | nulti-fami  | y dwelling withir   | his slate wi   | hile under the |
| escribe person's condition (or   | for, actions, etc.):   |  |   |   |   |   |   |   | -  |                |
| POST REPAIR  |  | NSTALLE  | D NEW CYLII   | NDER  |   |   |   |   |  |                |
| derine. Subset   |  |  |   |   |   |   |   |   |  |                |
|  | and the second second  | THE PERSON   | WAS INFORMED OF TH  | E IMPLIED CON   | SENT TEST   | REQUEST   |   |   | _  |                |
|  | IS RECORD, REPORT OF THE F   |  |   |   | T AND MA  | NTENANCE RECOR  | RD.   |   |  | Section        |
| I-8000   |  |  |   | BOARD   | OF T  | ESTS  |   |   |  |                |
| Dana   |  |  | TARGET VALUE  |   | 2302  |   |   |   |  |                |
| Dry  |  |  | LOT #   |   |   | DER INSTALLED   |   | DATE CYLINE   | DER EXPIRE   | s              |
| ILMO   |  |  | 159220  | 80A3  | 09/0  | 1/2022  |   | 08/0  | 5/202  | 4              |
| 1130   | 9/01/2022  |  |   |   |   | tion/observation  | on  |   |  | 10.0           |
| RESULT TABLE   |  |  |   | e time of test  |   | nd continuing<br>stration   |   | 1   | THE S  | TATA           |
| Test   | g/210L   | Time   |   | o time of tes   | admini  | au au on.   |   | 19  | ·**  | 1. 1.          |
| Air Blank  | 0.00   | 11:46  | I administer  | ed said Br  | eath-A  | Icohol Test   | in  | 3/*   |  | + + + 10       |
| Subject Test   | 0.00   | 11:47  | compliance  | with the  | applica   | ble operation   | ng  | 0 *   | $\Theta \otimes \Theta$  | AV P           |
| Breath Volume<br>Air Blank   | 2.093 LITERS<br>0.00   | 11:47  |   | ure of the  |   |   |   | E ++  | 7  | ×++            |
| Wait   | 0.00   | 11:47  | A A A   |   | Zura  | 01 10515.   |   | 2   | 12   | al ** /2/      |
| Air Blank  | 0.00   | 11:49  | 11/3  | En / Y  | P   | -   |   | 61  | C****  | 1              |
| Subject Test   | 0.00   | 11:50  | SIGNATURE OF O  | PERATOR   | Re-   |   | -   |   | 1907   |                |
| Breath Volume  |  |  |   | 07  |   |   |   |   |  |                |
| Air Blank<br>Cal Check   | 0.00   | 11:50<br>11:51   | NAME  |   |   |   |   | -   | Test Re  | enlt           |
| Air Blank  | 0.00   | 11:51  | PAPE, CHR   | ISTOPHER  | ERMIT #   |   |   |   | BrAC g/  |                |
|  |  |  | 00000004  |   |   | 023020  |   |   | 0.0  |                |
|  |  |  | AGENCY<br>BOARD OF  | TESTS   |   |   |   |   | 0.0  |                |
| ays or more, if you refused (<br>perating a CMV or CDL hol<br>s a result of this arrest by fill<br>ou may be eligible to part<br>wocation as a result of thi<br>quest IDAP within thirty ( | VS FROM DATE SERVED. N<br>or failed the state's test(s). In a<br>der) OR a test result of .04 or m<br>ng a petition in the District Cou-<br>cipate in the Impaired Driver<br>is arrest from appearing on y<br>30) days of the date listed be<br>I personally hand delive | ddition, your co<br>hore while opera<br>rt of the County<br>Accountability<br>our driving rec<br>low. Mail the r | mmercial driving privileg<br>tling a commercial moto<br>in which you were arres<br>Program (IDAP) admi<br>ord. Participation in IC<br>equest for IDAP to the  | e in this state wi<br>or vehicle. You n<br>sted. Your petitic<br>nistered by the<br>DAP may reduce<br>Department of | I be disqua<br>ay appeal<br>n must be<br>Departme<br>the amou<br>Public Sat | alified if you refused<br>any Departmental<br>filed within thirty (3<br>nt of Public Safety<br>unt of fees you wil<br>fety at P.O. Box 11 | l or failed<br>action ag<br>0) days o<br>/ (DPS).<br>Il be reg<br>415, Ok | the state's tes<br>ainst your driviour driviour<br>of the date liste<br>Completion of<br>uired to pay to<br>ahoma City, C | st(s)<br>er license<br>od below.<br>of IDAP may<br>o the State.<br>OK 73136. | You must       |
| ccountability Program  | to the person named in S   | ection 1 abov  | /e.   | ig the Notice   |   |   | ouce of   |   | t inipared   | Driving        |
| ale served:  |  | ture of officer  |   |   | 10111   |   |   | Badge #:_   |  | e!             |
| accordance with Title  | 12 O.S. Section 426, "I st<br>Place (location whe  |  | nalty of perjury un   | der the laws  |   | oma that the for  |   | is true and c   | correct."  | Section -      |
| AME  |  |  | 1   | AGENCY  |   |   |   |   |  |                |
| PAPE, CHR  | ISTOPHER<br>AGENCY ADDRESS   |  |   | BOARD   | OF 1  | ZIP CODE  | PHON  | E   |  |                |
| 0000000484   | INTER-AGEN   | CY   |   |   |   | 00000   |   | 54252   | 460  |                |



Dr. Jarrad Wagner, Ph.D., F-ABFT Chairman Post Office Box 36307 Oklahoma City, Oklahoma 73136-2307 Phone: (405) 425-2460 Fax: (405) 425-2490 www.bot.ok.gov

Joshua Smith Director

### Certificate of Analysis – Reference Solution

| ALPHA INSTRU | MENT 2    |          |           |
|--------------|-----------|----------|-----------|
| Intoxilyzer  | - Alcohol | Analyzer |           |
| Model 8000   |           | SN       | 80-004923 |
| 03/08/2022   |           |          | 11:33     |

| Test            | g/210L | Time  |
|-----------------|--------|-------|
| Air Blank       | 0.000  | 11:34 |
| Cal Check       | 0.022  | 11:34 |
| Air Blank       | 0.000  | 11:35 |
| Cal Check       | 0.021  | 11:36 |
| Air Blank       | 0.000  | 11:36 |
| Cal Check       | 0.021  | 11:37 |
| Air Blank       | 0.000  | 11:37 |
| Cal Check       | 0.021  | 11:38 |
| Air Blank       | 0.000  | 11:38 |
| Cal Check       | 0.021  | 11:39 |
| Air Blank       | 0.000  | 11:40 |
| Cal Check       | 0.021  | 11:40 |
| Air Blank       | 0.000  | 11:41 |
| Cal Check       | 0.020  | 11:42 |
| Air Blank       | 0.000  | 11:42 |
| Cal Check       | 0.021  | 11:43 |
| Air Blank       | 0.000  | 11:43 |
| Cal Check       | 0.021  | 11:44 |
| Air Blank       | 0.000  | 11:45 |
| Cal Check       | 0.020  | 11:45 |
| Air Blank       | 0.000  | 11:46 |
| Cal Check Stats |        |       |
| Average         | 0.0209 |       |
| Std Dev         | 0.0005 |       |
| Rel Std Dev(%)  | 2.7158 |       |

|   | Icohol Equivalent (g/210L +/- 3%)  | Ratio of ethanol and w   | ater free of test interfering substances.  |
|---|--|--|--|
| Manufacturer: Guth  | Manufactured Date: 0   |  | Concentration: 0.02  |
| Lot No.: 21120  | Expiration Date: 04/0  | 07/2023  | Equipment Model: Guth 2100   |
| prescribed by the State Director of Tests<br>to 40 OAC 25-1-2.1. Approved breath-all<br>Conforming Products List of Calibrating | pursuant to 40 OAC 30-1-3. The at<br>cohol measurement equipment and r<br>Jnits for Breath Alcohol Testers (72 | pove NIST traceable reference solutions. Equi<br>FR 34747), published by | as performed in accordance with the procedures<br>orence solution meets the requirements for use pursuant<br>ipment used appears on the current or supplemented<br>the National Highway Traffic Safety Administration. |
| Chilles Ofe   |  | 03/08/20   | )22  |
| Name Christopher Pape   |  | Permit No.: 2302   | 0  |



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Joshua Smith Director

### Certificate of Analysis - Reference Solution

| Model 8000<br>03/08/2022 |        | SN 80-004923<br>11:53 |
|--------------------------|--------|-----------------------|
|                          |        |                       |
| Test                     | g/210L | Time                  |
| Air Blank                | 0.000  | 11:53                 |
| Cal Check                | 0.041  | 11:54                 |
| Air Blank                | 0.000  | 11:54                 |
| Cal Check                | 0.041  | 11:55                 |
| Air Blank                | 0.000  | 11:56                 |
| Cal Check                | 0.042  | 11:56                 |
| Air Blank                | 0.000  | 11:57                 |
| Cal Check                | 0.042  | 11:58                 |
| Air Blank                | 0.000  | 11:58                 |
| Cal Check                | 0.042  | 11:59                 |
| Air Blank                | 0.000  | 11:59                 |
| Cal Check                | 0.041  | 12:00                 |
| Air Blank                | 0.000  | 12:01                 |
| Cal Check                | 0.041  | 12:01                 |
| Air Blank                | 0.000  | 12:02                 |
| Cal Check                | 0.041  | 12:02                 |
| Air Blank                | 0.000  | 12:03                 |
| Cal Check                | 0.041  | 12:04                 |
| Air Blank                | 0.000  | 12:04                 |
| Cal Check                | 0.042  | 12:05                 |
| Air Blank                | 0.000  | 12:05                 |
| Cal Check Stats          |        |                       |
| Average .                | 0.0414 |                       |
| Std Dev                  | 0.0005 |                       |
| Rel Std Dev(%)           | 1.2473 |                       |

| NIST Traceable Breath-Alco                | ohol Equivalent (g/210L +/- 3%) Ratio of ethanc  | ol and water free of test Interfering substances.   |
|---|--|---|
| Manufacturer: Guth                        | Manufactured Date: 03/01/2021  | 1 Concentration: 0.04   |
| Lot No.: 21070                            | Expiration Date: 03/01/2023  | Equipment Model: Guth 2100  |
| to 40 OAC 25-1-2.1. Approved breath-alcol | Insuant to 40 OAC 30-1-3. The above NIST traces<br>not measurement equipment and reference solutio<br>ts for Breath Alcohol Testers (72 FR 34747), public<br>Date: | D and was performed in accordance with the procedures<br>able reference solution meets the requirements for use pursuant<br>ons. Equipment used appears on the current or supplemented<br>ished by the National Highway Traffic Safety Administration.<br>D8/2022 |
| Name Christopher Pape                     | Permit No.:  |   |



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### Certificate of Analysis – Reference Solution

| ALPHA INSTRUMENT    |               |
|---------------------|---------------|
| Intoxilyzer - Alcoh | ol Analyzer . |
| Model 8000          | SN 80-002591  |
| 06/27/2022          | 11:40         |

| Test            | g/210L | Time   |
|-----------------|--------|--------|
| Air Blank       | 0.000  | 11:40  |
| Cal Check       | 0.100  | 11:41  |
| Air Blank       | 0.000  | 11:41  |
| Cal Check       | 0.100  | 11:42  |
| Air Blank       | 0.000  | 11:43. |
| Cal Check       | 0.100  | 11:43  |
| Air Blank       | 0.000  | 11:44  |
| Cal Check       | 0.100  | 11:45  |
| Air Blank       | 0.000  | 11:45  |
| Cal Check       | 0.100  | 11:46  |
| Air Blank       | 0.000  | 11:47  |
| Cal Check       | 0.101  | 11:47  |
| Air Blank       | 0.000  | 11:48  |
| Cal Check       | 0.101  | 11:49  |
| Air Blank       | 0.000  | 11:49  |
| Cal Check       | 0.101  | 11:50  |
| Air Blank       | 0.000  | 11:50  |
| Cal Check       | 0.100  | 11:51  |
| Air Blank       | 0.000  | 11:52  |
| Cal Check       | 0.100  | 11:52  |
| Air Blank       | 0.000  | 11:53  |
| Cal Check Stats |        |        |
| Average         | 0.1003 |        |
| Std Dev         | 0.0004 |        |
| Rel Std Dev(%)  | 0.4815 |        |

| Manufacturer: Guth   | Manufactured Date: 03/07/202   | 22 <sup>Concentration:</sup> 0.10   |
|--|--|---|
| Lot No.: 22080   | Expiration Date: 03/07/2024  | Equipment Model: Guth 2100  |
| to 40 OAC 25-1-2.1. Approved breath-a<br>Conforming Products List of Calibrating | Icohol measurement equipment and reference solution<br>Units for Breath Alcohol Testers (72 FR 34747) public<br>Units (72 FR 34747) publi | eable reference solution meets the requirements for use pursuanl<br>ions. Equipment used appears on the current or supplemented<br>blished by the National Highway Traffic Safety Administration. |
| Name Christopher Pape  | Date: 06/  | /27/2022  |
|  |  |   |



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

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Joshua Smith Director

## **Certificate of Analysis – Reference Solution**

| ALPHA 1 | INSTRU | IMI | INT     |          |           |
|---------|--------|-----|---------|----------|-----------|
| Intoxi  | Lyzer  | -   | Alcohol | Analyzer |           |
| Model 8 | 3000   |     |         | SN       | 80-002591 |
| 06/27/2 | 2022   |     |         |          | 11:11     |

| Test            | g/210L | Time . |
|-----------------|--------|--------|
| Air Blank       | 0.000  | 11:11  |
| Cal Check       | 0.199  | 11:12  |
| Air Blank       | 0.000  | 11:12  |
| Cal Check       | 0.200  | 11:13  |
| Air Blank       | 0.000  | 11:14  |
| Cal Check       | 0.200  | 11:14  |
| Air Blank       | 0.000  | 11:15  |
| Cal Check       | 0.200  | 11:16  |
| Air Blank       | 0.000  | 11:16  |
| Cal Check       | 0.201  | 11:17  |
| Air Blank       | 0.000  | 11:17  |
| Cal Check       | 0.200  | 11:18  |
| Air Blank       | 0.000  | 11:19  |
| Cal Check       | 0.201  | 11:19  |
| Air Blank       | 0.000  | 11:20  |
| Cal Check       | 0.200  | 11:21  |
| Air Blank       | 0.000  | 11:21  |
| Cal Check       | 0.200  | 11:22  |
| Air Blank       | 0.000  | 11:23  |
| Cal Check       | 0.201  | 11:23  |
| Air Blank       | 0.000  | 11:24  |
| Cal Check Stats |        |        |
| Average         | 0.2002 |        |
| Std Dev         | 0.0006 |        |
| Rel Std Dev(%)  | 0.3159 |        |

| Manufacturer: Guth   | Manufactured Date: 02/07/2022  | Concentration: 0.20                                     |
|--|--|---|
| Lot No.: 22050   | Expiration Date: 02/07/2024  | Equipment Model: Guth 2100                              |
| prescribed by the State Director of Tests pursu-<br>to 40 OAC 25-1-2.1. Approved breath-alcohol n<br>Conforming Products List of Calibrating Units for | red Spectroscopy utilizing the Intoxilyzer 8000 and w<br>ant to 40 OAC 30-1-3. The above NIST traceable ref<br>neasurement equipment and reference solutions. Equ<br>r Breath Alcohol Testers (72 FR 34747), published b | erence solution meets the requirements for use pursuant |
| Signature  | Date: 06/27/2  | 022   |
| Name Christopher Pape  | Permit No.: 2302   | 20  |



Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 21120 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on April 16, 2021, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.0237% (w/vol) ethyl alcohol. The expiration date for this lot number is April 7, 2023 at 11:59 PM.

When used in a calibrated Simulator, operating at  $34^{\circ}C$  +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.020 g/210L +/- 3%.

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

Ted L. Pauley, President GUTH LABORATORIES, INC.

NIST Traceability: Testing was conducted using Cerilliant Reference Standard lot number 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.

8/26/2



Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 21070 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on March 2, 2021, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.0488% (w/vol) ethyl alcohol. The expiration date for this lot number is March 1, 2023 at 11:59 PM.

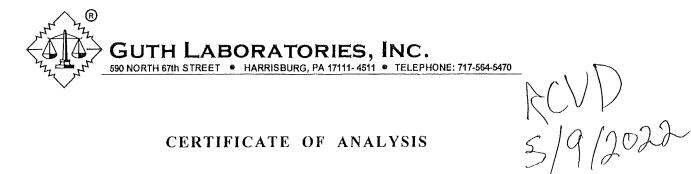
When used in a calibrated Simulator, operating at  $34^{\circ}C$  +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.040 g/210L +/- 3%.

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

Ted L. Pauley, President GUTH LABORATORIES, INC.

NIST Traceability: Testing was conducted using Cerilliant Reference Standard lot number FN08211802 whose values are traceable to NIST. All balances are calibrated annually by an outside agency using NIST traceable weights. Calibration verification is done prior to each use utilizing NIST traceable weights.

8/26/2



Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 22080 of Alcohol Reference Solution for Simulator were analyzed by chromatography on March 9, 2022, using a Perkin Elmer Gas gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1214% (w/vol) ethyl alcohol. The expiration date for this lot number is March 7, 2024 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.100 g/210L +/- 3%.

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

Ted L. Pauley, President GUTH LABORATORIES, INC.

NIST Traceability:

Testing was conducted using Cerilliant Reference Standard lot number FN03052002 whose values are traceable to NIST. All balances are calibrated annually by an outside agency using NIST traceable weights.

Calibration verification is done prior to each use utilizing NIST traceable weights.



Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 22050 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on February 9, 2022, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.2437% (w/vol) ethyl alcohol. The expiration date for this lot number is February 7, 2024 at 11:59 PM.

When used in a calibrated Simulator, operating at  $34^{\circ}C$  +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.200 g/210L +/- 3%.

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

Ted L. Pauley, President GUTH LABORATORIES, INC.

NIST Traceability:

Testing was conducted using Cerilliant Reference Standard lot number FN06231703 whose values are traceable to NIST.

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

) 1/2022

| Location Returned From<br>Guymon PD  | <u>Unit Serial #</u><br>80-003809   | Date: 20/20<br>4/27/22  |
|--|---|---|
| Inventory Process  | Old Cylinder #:<br>Old Cylinder #:<br>Canister from Unit  | 0A2-008<br>inventory  |
| Check in Procedure<br>✓ Connect unit to ethernet connection 172.0<br>✓ Download any stored records <u>4</u><br>✓ Change unit location to Serial number<br>✓ Update Unit Date and time<br>Previous time: <u>4/27/22 14</u><br>New Time: <u>4/27/22 14</u><br>✓ Execute a new Forms load on the unit |   | Issues in the Field   |
| 9μm <u>11924</u> Breath Hose<br><u>Peripheral Tests</u><br>Speaker (F5) Power LED G<br>Gas Regulator (F11) Pur<br><u>Atmospheric Sensor</u>  | Test Chamber Hold Vacuum?:<br>mp $47.00$ Snap Test ok?<br>Temp $45$ RFI Detected?<br>Green (F6) Red (F7) Fan (F9)<br>mp (F10) Receipt paper $5$<br>Receipt paper $5$<br>Receipt paper $5$<br>Resistance $200$ | Is regulator close to<br>Tank Sensor<br>Value 973 Wes / No  |
|  | unit Fails snap tes)<br>Display is Dim  |   |
| Repairs needed:  | Repairs Made:<br>See CMJ<br>Wosh  | t order   |
| Linked Cylinder to Unit Mock St<br>Changed Unit Status   | Check Technician Report To complete   ubject Test Completed I CMI Workor   ate of Calibration and Operation CMI Certification   | e if unit sent to CMI<br>der<br>ate of Calibration<br>Evaluation Form<br>Intoxilyzer Check-in sheet Version 2.0 |