

Service Overview

Board of Tests for Alcohol and Drug Influence
Ensuring public safety by ensuring the accuracy and scientific reliability
of blood and breath testing



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

BENCH CHECK DATE: 05-25-2018

SERIAL: 80-004423

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)

Certificate of Calibration

This is to certify the calibration of **Intoxilyzer**® serial number 80004423, 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 July 18, 2016 Signed [Signature]
Technician



316 East 9th Street
Owensboro, KY 42303
USA

Part No. 650517 Rev.A

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 - DEPARTMENT OF PUBLIC SAFETY
CMI INTOXILYZER BENCH CHECK PROCEDURE REPORT**

| | | |
|---------------------------------------|--------------------------------------|----------------------------------------------|
| BENCH CHECK DATE 05/25/2018 | TIME PROCEDURE BEGAN 14:02 | INSTRUMENT LOCATION 80-004423 |
| INSTRUMENT TYPE Intoxilyzer | INSTRUMENT MODEL I-8000 | INSTRUMENT SERIAL NUMBER 80-004423 |

TEST RESULTS

Diagnostics

PASS

Mouth Alcohol Test

PASS

RFI Test

PASS

Abort Test

PASS

Improper Sample Test

PASS

Interferent Detect Test

PASS

No Sample Given Test

PASS

Insufficient Sample Test

PASS

Air Blank Contamination Test

PASS

Range Exceeded Test

PASS

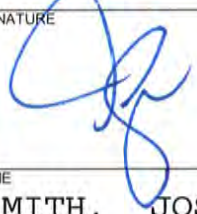
Duplicate Breath Sampling Results

| Value | Test 1 | Test 2 | Control Test |
|-------|--------|--------|--------------|
| .02 | 0.017 | 0.017 | 0.018 |
| .04 | 0.038 | 0.035 | 0.038 |
| .10 | 0.095 | 0.095 | 0.097 |
| .20 | 0.198 | 0.197 | 0.199 |

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 05/25/2018 |
| 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 / 25 / 18 Start Time: 1350 End Time: 1545

INSTRUMENT

Intoxilyzer Model Serial #
8000 80-604423

GAS CANISTER

LOT # EXP Date
10818080AS # 037 6-5-2020

REFERENCE


| Simulator Model | | | |
|--------------------------|----------------|----------------|----------------|
| Guth 2100 | Guth 2100 | Guth 2100 | Guth 2100 |
| Serial # | | | |
| DR3591 | DR3753 | DR3594 | DR3754 |
| Concentration | | | |
| .02 | .04 | .10 | .20 |
| LOT # | | | |
| 16400 | 16320 | 17130 | 17090 |
| Manufactured Date | | | |
| 12-12-2016 | 10-21-2016 | 04-03-2017 | 02-24-2017 |
| Expiration Date | | | |
| 12-12-2018 | 10-21-2018 | 04-03-2019 | 02-24-2019 |
| Solution Commission Date | | | |
| <u>5-15-18</u> | <u>5-15-18</u> | <u>5-15-18</u> | <u>5-15-18</u> |

REASON FOR BENCH CHECK

- POST REPAIR CYLINDER REPLACEMENT
 TROUBLESHOOTING ROUTINE MAINTENANCE

COMMENTS

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

 16837
 Technician Signature / Permit #

Josh Smith
 Printed Name

| Certificate of Analysis - Dry Gas | |
|-----------------------------------|--------------------------------|
| 05/25/18 | .080 |
| Date of Analysis | Labelled target value (g/210L) |
| A37 | .0790 |
| Cylinder # | Average test result |
| Josh Swite <i>[Signature]</i> | |
| BOT Technician Name and Signature | |



ALPHA INSTRUMENT 2
 Intoxilyzer - Alcohol Analyzer
 Model 8000 SN 80-004923
 05/25/2018 14:05

| Test | g/210L | Time |
|-----------------|--------|-------|
| Air Blank | 0.000 | 14:06 |
| Cal Check | 0.079 | 14:06 |
| Air Blank | 0.000 | 14:07 |
| Cal Check | 0.079 | 14:07 |
| Air Blank | 0.000 | 14:07 |
| Cal Check | 0.078 | 14:08 |
| Air Blank | 0.000 | 14:08 |
| Cal Check | 0.080 | 14:09 |
| Air Blank | 0.000 | 14:09 |
| Cal Check | 0.079 | 14:09 |
| Air Blank | 0.000 | 14:10 |
| Cal Check | 0.079 | 14:10 |
| Air Blank | 0.000 | 14:11 |
| Cal Check | 0.079 | 14:11 |
| Air Blank | 0.000 | 14:12 |
| Cal Check | 0.079 | 14:12 |
| Air Blank | 0.000 | 14:12 |
| Cal Check | 0.079 | 14:13 |
| Air Blank | 0.000 | 14:13 |
| Cal Check | 0.079 | 14:14 |
| Air Blank | 0.000 | 14:14 |
| Cal Check Stats | | |
| Average | 0.0790 | |
| Std Dev | 0.0004 | |
| Rel Std Dev(%) | 0.5967 | |

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 with the Intoxilyzer 8000.
 7 Eastgate Dr • PO Box 790 • Jacksonville, IL 62651-0790
 217-245-2183 • Fax: 217-243-7634 • www.ilmoproducts.com

Certificate of Analysis

Certificate ID: 11093
Part #: BAC105L080T
Cylinder Size: 105L
Lot Number: 10818080A5 ✓
Expiration: 6/5/2020 ✓

Rec'd 05/21/2018
[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 423
 Phone 866-835-0690
www.alcoholtest.com

[Signature]
 Operator's Signature
 16837

*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

05-09-18
 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 05/25/2018 | | ARREST TIME 1500 | | COUNTY # 55 | CITY # 34 | CITATION # MOCK | | |
| ARREST LOCATION MOCK | | | | | CITY MOCK | COUNTY OKLAHOMA | | |
| SUBJECT NAME MOCK, SUBJECT TEST | | | | 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 MOCK | | MODEL MOCK | | | TAG # MOCK | STATE OK | CMV N | PLACARD N |

On the above date, time, and location, the above named person was arrested, and I had reasonable grounds to believe the person was driving or in actual physical control of a motor vehicle upon a public road, highway, street, turnpike, public parking lot, or other public place, or upon a private road, street, alley or lane which provides access to one or more single or multi-family dwelling within this state while under the influence of alcohol and/or other intoxicating substances as prohibited by law.

(Describe driving behavior or circumstances):

MOCK 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 80-004423 | SPECIALIST BOARD OF TESTS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|----------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------------|--------|------|-----------|------|-------|--------------|------|-------|---------------|--------------|--|-----------|------|-------|------|--|-------|-----------|------|-------|--------------|------|-------|---------------|--------------|--|-----------|------|-------|-----------|------|-------|-----------|------|-------|
| STANDARD Dry | | TARGET VALUE 0.080 | PERMIT NUMBER 16837 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MANUFACTURER ILMO | | LOT # 10818080A5 | DATE CYLINDER INSTALLED 05/25/2018 | DATE CYLINDER EXPIRES 06/05/2020 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| OBSERVATION START 1520 | TEST DATE 05/25/2018 | 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>15:46</td></tr> <tr><td>Subject Test</td><td>0.00</td><td>15:46</td></tr> <tr><td>Breath Volume</td><td>1.496 LITERS</td><td></td></tr> <tr><td>Air Blank</td><td>0.00</td><td>15:47</td></tr> <tr><td>Wait</td><td></td><td>15:48</td></tr> <tr><td>Air Blank</td><td>0.00</td><td>15:49</td></tr> <tr><td>Subject Test</td><td>0.00</td><td>15:49</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>15:50</td></tr> <tr><td>Cal Check</td><td>0.07</td><td>15:50</td></tr> <tr><td>Air Blank</td><td>0.00</td><td>15:51</td></tr> </tbody> </table> | | | | | Test | g/210L | Time | Air Blank | 0.00 | 15:46 | Subject Test | 0.00 | 15:46 | Breath Volume | 1.496 LITERS | | Air Blank | 0.00 | 15:47 | Wait | | 15:48 | Air Blank | 0.00 | 15:49 | Subject Test | 0.00 | 15:49 | Breath Volume | 1.910 LITERS | | Air Blank | 0.00 | 15:50 | Cal Check | 0.07 | 15:50 | Air Blank | 0.00 | 15:51 |
| Test | g/210L | Time | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Air Blank | 0.00 | 15:46 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Subject Test | 0.00 | 15:46 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Breath Volume | 1.496 LITERS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Air Blank | 0.00 | 15:47 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Wait | | 15:48 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Air Blank | 0.00 | 15:49 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Subject Test | 0.00 | 15:49 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Breath Volume | 1.910 LITERS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Air Blank | 0.00 | 15:50 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Cal Check | 0.07 | 15:50 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Air Blank | 0.00 | 15:51 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NAME SMITH, JOSHUA | | PERMIT # 0000016837 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| BADGE # 0000000435 | | AGENCY BOARD OF TESTS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;"> Test Result BrAC g/210L 0.00 </td> </tr> </table> | | | | | Test Result BrAC g/210L 0.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Test Result BrAC g/210L 0.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

EFFECTIVE THIRTY (30) DAYS FROM DATE SERVED. Notice of Revocation is given that your driver's license is revoked or denied for a

Section 3

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 **within fifteen (15) days from the date you received notice of revocation or disqualification**. Submit your **written** request in person at 3600 N. MLK Ave. or by mail to Legal Division, Department of Public Safety, P.O. Box 11415, OKC, OK, 73136

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: **05/25/2018** 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: **05/25/2018** 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" |

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 05/25/2018 | | ARREST TIME 1500 | | COUNTY # 55 | CITY # 34 | CITATION # MOCK | | |
| ARREST LOCATION MOCK | | | | | CITY MOCK | COUNTY OKLAHOMA | | |
| SUBJECT NAME MOCK, SUBJECT TEST | | | | 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 MOCK | | MODEL MOCK | | TAG # MOCK | | STATE OK | CMV N | PLACARD N |

On the above date, time, and location, the above named person was arrested, and I had reasonable grounds to believe the person was driving or in actual physical control of a motor vehicle upon a public road, highway, street, turnpike, public parking lot, or other public place, or upon a private road, street, alley or lane which provides access to one or more single or multi-family dwelling within this state while under the influence of alcohol and/or other intoxicating substances as prohibited by law.

(Describe driving behavior or circumstances):

MOCK 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 80-004423 | SPECIALIST BOARD OF TESTS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|------------------------------|-------------------------------|---------------------------------|------|--------------------------------------------------------------------------------------|-------|-------|-----------|------|-------|--------------|------|-------|---------------|--------------|--|-----------|------|-------|------|--|-------|-----------|------|-------|--------------|------|-------|---------------|--------------|--|-----------|------|-------|-----------|------|-------|
| STANDARD Dry | | TARGET VALUE 0.080 | PERMIT NUMBER 16837 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MANUFACTURER ILMO | | LOT # 10818080A5 | DATE CYLINDER INSTALLED 05/25/2018 | DATE CYLINDER EXPIRES 06/05/2020 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| OBSERVATION START 1520 | TEST DATE 05/25/2018 | 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> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Test | g/210L | Time | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ----- | ----- | ----- | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Air Blank | 0.00 | 15:46 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Subject Test | 0.00 | 15:46 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Breath Volume | 1.496 LITERS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Subject Test | 0.00 | 15:49 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Breath Volume | 1.910 LITERS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Air Blank | 0.00 | 15:50 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Cal Check | 0.07 | 15:50 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Air Blank | 0.00 | 15:51 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">NAME SMITH, JOSHUA</td> </tr> <tr> <td>BADGE # 0000000435</td> <td>PERMIT # 0000016837</td> </tr> <tr> <td colspan="2">AGENCY BOARD OF TESTS</td> </tr> </table> | | | NAME SMITH, JOSHUA | | BADGE # 0000000435 | PERMIT # 0000016837 | AGENCY BOARD OF TESTS | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NAME SMITH, JOSHUA | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| BADGE # 0000000435 | PERMIT # 0000016837 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| AGENCY BOARD OF TESTS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;"> Test Result BrAC g/210L 0.00 </td> </tr> </table> | | | Test Result BrAC g/210L 0.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Test Result BrAC g/210L 0.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

EFFECTIVE THIRTY (30) DAYS FROM DATE SERVED. Notice of Revocation is given that your driver's license is revoked or denied for a period of one hundred eighty (180) days or more, if you refused or failed the state's test(s). In addition, your commercial driving privilege in this state will be disqualified if you refused or failed the state's test(s) (operating a CMV or CDL holder) OR a test result of .04 or more while operating a commercial motor vehicle. To appeal the driver's license revocation/disqualification, the Department of Public Safety must receive your written request for an Administrative Hearing **within fifteen (15) days from the date you received notice of revocation or disqualification**. Submit your **written** request in person at 3600 N. MLK Ave. or by mail to Legal Division, Department of Public Safety, P.O. Box 11415, OKC, OK, 73136

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: **05/25/2018** 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: **05/25/2018** 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 07/2008

| Certificate of Analysis – Wet Bath | |
|------------------------------------|-------------------------------|
| 05-05-17 | .020 |
| Date of Analysis | Labeled target value (g/210L) |
| 16400 | .0195 |
| Lot Number | Average test result (g/210L) |
| Jbst Smith | |
| BOT Technician Name and Signature | |



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 G, PA 17111-4511 • TELEPHONE: 717-564-5470

BRT Form 6.0

In accordance with BRT – 2.1.0, Maintenance, the above referenced simulator solution is suitable for use as an external reference in maintenance of the Intoxilyzer 8000.

CERTIFICATE OF ANALYSIS

INTOXILYZER 8000
 Instrument Initialization
 8133.12
 14:48 05/05/2017

Certified Alcohol Reference Solution for Simulator

Rec'd
 4/01/2017
 #16837

Random Samples of Lot Number 16400 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on December 13, 2016, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.0241% (w/vol) ethyl alcohol. The expiration date for this lot number is December 12, 2018 at 11:59 PM.

ALPHA INSTRUMENT 2
 Intoxilyzer - Alcohol Analyzer
 Model 8000 SN 80-004923
 05/05/2017 14:56

| Test | g/210L | Time |
|-----------------|--------|-------|
| Air Blank | 0.000 | 14:57 |
| Cal Check | 0.020 | 14:58 |
| Air Blank | 0.000 | 14:58 |
| Cal Check | 0.020 | 14:59 |
| Air Blank | 0.000 | 14:59 |
| Cal Check | 0.019 | 15:00 |
| Air Blank | 0.000 | 15:01 |
| Cal Check | 0.020 | 15:01 |
| Air Blank | 0.000 | 15:02 |
| Cal Check | 0.020 | 15:03 |
| Air Blank | 0.000 | 15:03 |
| Cal Check | 0.020 | 15:04 |
| Air Blank | 0.000 | 15:04 |
| Cal Check | 0.019 | 15:05 |
| Air Blank | 0.000 | 15:06 |
| Cal Check | 0.019 | 15:06 |
| Air Blank | 0.000 | 15:07 |
| Cal Check | 0.019 | 15:08 |
| Air Blank | 0.000 | 15:08 |
| Cal Check | 0.019 | 15:09 |
| Air Blank | 0.000 | 15:09 |
| Cal Check Stats | | |
| Average | 0.0195 | |
| Std Dev | 0.0005 | |
| Rel Std Dev(%) | 2.7026 | |

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

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

Ted L. Pauley
 Ted L. Pauley, President
 GUTH LABORATORIES, INC.

#16837

NIST Traceability:
 Testing was conducted using Cerilliant Reference Standard lot number FN11241503 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 | |
|------------------------------------|--------------------------------|
| 3-8-2017 | .040 |
| Date of Analysis | Labelled target value (g/210L) |
| 16320 | .0409 |
| Lot Number | Average test result (g/210L) |
| Josh Smith <i>[Signature]</i> | |
| BOT Technician Name and Signature | |



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BRT Form 6.0

In accordance with BRT – 2.1.0, Maintenance, the above referenced simulator solution is suitable for use as an external reference in maintenance of the Intoxilyzer 8000.

CERTIFICATE OF ANALYSIS

REC'D
03/01/17
[Signature]
#16837

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 16320 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on October 25, 2016, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.0495% (w/vol) ethyl alcohol. The expiration date for this lot number is October 21, 2018 at 11:59 PM.

ALPHA INSTRUMENT 2
 Intoxilyzer - Alcohol Analyzer
 Model 8000
 03/08/2017

SN 80-004923
 11:16

| Test | g/210L | Time |
|-----------------|--------|-------|
| Air Blank | 0.000 | 11:16 |
| Cal Check | 0.041 | 11:17 |
| Air Blank | 0.000 | 11:17 |
| Cal Check | 0.041 | 11:18 |
| Air Blank | 0.000 | 11:19 |
| Cal Check | 0.040 | 11:19 |
| Air Blank | 0.000 | 11:20 |
| Cal Check | 0.041 | 11:21 |
| Air Blank | 0.000 | 11:21 |
| Cal Check | 0.041 | 11:22 |
| Air Blank | 0.000 | 11:22 |
| Cal Check | 0.041 | 11:23 |
| Air Blank | 0.000 | 11:24 |
| Cal Check | 0.041 | 11:24 |
| Air Blank | 0.000 | 11:25 |
| Cal Check | 0.040 | 11:26 |
| Air Blank | 0.000 | 11:26 |
| Cal Check | 0.042 | 11:27 |
| Air Blank | 0.000 | 11:27 |
| Cal Check | 0.041 | 11:28 |
| Air Blank | 0.000 | 11:29 |
| Cal Check Stats | | |
| Average | 0.0409 | |
| Std Dev | 0.0005 | |
| Rel Std Dev(%) | 1.3878 | |

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

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

Ted L. Pauley
 Ted L. Pauley, President
 GUTH LABORATORIES, INC.

[Signature]
#16837

NIST Traceability:
 Testing was conducted using Cerilliant Reference Standard lot number FNI218501 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 | |
|------------------------------------|--------------------------------|
| 06/15/2017 | .10 |
| Date of Analysis | Labelled target value (g/210L) |
| 17130 | .1015 |
| Lot Number | Average test result (g/210L) |
| JOSH SMITH | |
| BOT Technician Name and Signature | |



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BRT Form 6.0

In accordance with BRT – 2.1.0, *Maintenance*, the above referenced simulator solution is suitable for use as an external reference in maintenance of the Intoxilyzer 8000.

CERTIFICATE OF ANALYSIS

REC'D
 06/09/2017
 JG

ALPHA INSTRUMENT 2
 Intoxilyzer - Alcohol Analyzer
 Model 8000
 06/15/2017

Certified Alcohol Reference Solution for Simulator
 SN 80-004923 16:25

Random Samples of Lot Number 17130 ✓ of

| Test | g/210L | Time |
|-----------------|--------|-------|
| Air Blank | 0.000 | 16:26 |
| Cal Check | 0.102 | 16:26 |
| Air Blank | 0.000 | 16:27 |
| Cal Check | 0.102 | 16:28 |
| Air Blank | 0.000 | 16:28 |
| Cal Check | 0.101 | 16:29 |
| Air Blank | 0.000 | 16:29 |
| Cal Check | 0.102 | 16:30 |
| Air Blank | 0.000 | 16:31 |
| Cal Check | 0.101 | 16:31 |
| Air Blank | 0.000 | 16:32 |
| Cal Check | 0.101 | 16:33 |
| Air Blank | 0.000 | 16:33 |
| Cal Check | 0.102 | 16:34 |
| Air Blank | 0.000 | 16:34 |
| Cal Check | 0.101 | 16:35 |
| Air Blank | 0.000 | 16:36 |
| Cal Check | 0.102 | 16:36 |
| Air Blank | 0.000 | 16:37 |
| Cal Check | 0.101 | 16:38 |
| Air Blank | 0.000 | 16:38 |
| Cal Check Stats | | |
| Average | 0.1015 | |
| Std Dev | 0.0005 | |
| Rel Std Dev(%) | 0.5192 | |

Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **April 6, 2017**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.1212%** (w/vol) ethyl alcohol. The expiration date for this lot number is **April 3, 2019** 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.

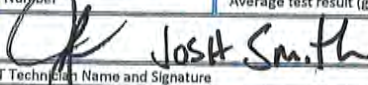
Ted L. Pauley

Ted L. Pauley, President
 GUTH LABORATORIES, INC.

JG
 16837
 Operator's Signature

NIST Traceability:

Testing was conducted using Cerilliant Reference Standard lot number FN08051301 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.

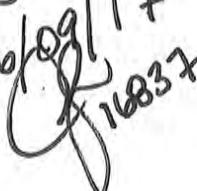
| Certificate of Analysis - Wet Bath | |
|-----------------------------------------------------------------------------------------------------------------------|--------------------------------|
| 06-16-17 | .20 |
| Date of Analysis | Labelled target value (g/210L) |
| 17090 | .2045 |
| Lot Number | Average test result (g/210L) |
|  BOT Technician Name and Signature | |



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BRT Form 6.0

In accordance with BRT - 2.1.0, Maintenance, the above referenced simulator solution is suitable for use as an external reference in maintenance of the Intoxilyzer 8000.

REC'D
 06/09/17

 16837

CERTIFICATE OF ANALYSIS

ALPHA INSTRUMENT 2
 Intoxilyzer - Alcohol Analyzer
 Model 8000 SN 80-004923
 06/16/2017 10:52


Certified Alcohol Reference Solution for Simulator

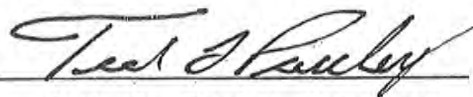
| Test | g/210L | Time |
|-----------------|--------|-------|
| Air Blank | 0.000 | 10:53 |
| Cal Check | 0.204 | 10:53 |
| Air Blank | 0.000 | 10:54 |
| Cal Check | 0.205 | 10:55 |
| Air Blank | 0.000 | 10:55 |
| Cal Check | 0.205 | 10:56 |
| Air Blank | 0.000 | 10:57 |
| Cal Check | 0.205 | 10:57 |
| Air Blank | 0.000 | 10:58 |
| Cal Check | 0.205 | 10:59 |
| Air Blank | 0.000 | 10:59 |
| Cal Check | 0.205 | 11:00 |
| Air Blank | 0.000 | 11:00 |
| Cal Check | 0.204 | 11:01 |
| Air Blank | 0.000 | 11:02 |
| Cal Check | 0.204 | 11:02 |
| Air Blank | 0.000 | 11:03 |
| Cal Check | 0.204 | 11:04 |
| Air Blank | 0.000 | 11:04 |
| Cal Check | 0.204 | 11:05 |
| Air Blank | 0.000 | 11:05 |
| Cal Check Stats | | |
| Average | 0.2045 | |
| Std Dev | 0.0005 | |
| Rel Std Dev(%) | 0.2577 | |

Random Samples of Lot Number 17090 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on February 27, 2017, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.2416% (w/vol) ethyl alcohol. The expiration date for this lot number is February 24, 2019 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.


 Operator's Signature 16837


 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.