



**STATE OF OKLAHOMA  
BOARD OF TESTS FOR ALCOHOL AND DRUG INFLUENCE**

Post Office Box 36307

Oklahoma City, Oklahoma 73136-2307  
Phone: (405) 425-2460 Fax: (405) 425-2490  
www.bot.ok.gov


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

Joshua Smith  
Director

**ATTESTATION**

I, the undersigned Joshua Smith (Director/Records Custodian), attest under oath pursuant to 12 O.S. §2902 (11)(a) this record was made, at or near the time of the occurrence of the matters set forth by or from information transmitted by a person having knowledge of those matters; was kept in the course of the regularly conducted business activity of the Board; and was made pursuant to the regularly conducted activity. The duplicate record provided is listed below:

- 1) The attached "Service Overview" is a true and accurate copy of maintenance performed on the Intoxilyzer 8000, serial number 80-004812, in compliance with the agency's Maintenance Policy and Procedures.

Signed 

Name of Position: Director/Records Custodian

Date of Attestation: 02/16/2023

# Service Overview

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



2/20

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

**BENCH CHECK DATE: 2/16/2023**

**SERIAL: 80-004812**

## **DOCUMENTATION WITHIN SERVICE PACKET:**

- BOT Certificate of Maintenance, Calibration and Operation
- Bench Check
- CMI Certificate of Calibration
- CMI Evaluation Form
- CMI Work Order
- 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. 80-004812 on 2/16/2023 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.: 33922080A2-042
  - BOT analysis average test result: 0.082
  - Cylinder expiration date: 1/5/2025
- In accordance with 40 O.A.C. 25-1-2.1, the approved reference standards and equipment were used:

<b>Simulator Model</b>			
Guth 2100	Guth 2100	Guth 2100	Guth 2100
<b>Serial #</b>			
DR2834	DR3694	DR2455	DR3470
<b>Concentration</b>			
.02	.04	.10	.20
<b>LOT #</b>			
21340	21410	22080	22050
<b>Manufactured Date</b>			
8/24/2021	9/30/2021	3/7/2022	2/7/2022
<b>Expiration Date</b>			
8/24/2023	9/30/2023	3/7/2024	2/7/2024
<b>Solution Commission Date</b>			
2/7/2023	2/7/2023	2/7/2023	2/7/2023

Completed by BOT Personnel:

  
Signature/Name Christopher Pape

Breath-Alcohol Testing Program Administrator  
Title

Certified by:

  
Signature Joshua Smith  
Name

State Director  
Title

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

BENCH CHECK DATE 02/16/2023	TIME PROCEDURE BEGAN 09:51:5	INSTRUMENT LOCATION 80-004812
INSTRUMENT TYPE Intoxilyzer	INSTRUMENT MODEL I-8000	INSTRUMENT SERIAL NUMBER 80-004812

**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	0.018	0.017	0.018
.04	0.037	0.036	0.038
.10	0.097	0.096	0.097
.20	0.191	0.193	0.195

PASS

**CERTIFYING TECHNICIAN**

I swear under penalty of perjury that in regards to the above listed instrument, I have complied with the Intoxliyzer Bench Checking Procedure approved by the State of Oklahoma.

SIGNATURE 	DATE 2/16/2023
NAME PAPE, CHRISTOPHER	PERMIT # 0000023020



**STATE OF OKLAHOMA  
BOARD OF TESTS FOR ALCOHOL AND DRUG INFLUENCE**

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

Post Office Box 36307  
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Phone: (405) 425-2460 Fax: (405) 425-2490  
www.bot.ok.gov

Joshua Smith  
Director

**Certificate of Analysis – Dry Gas**

ALPHA INSTRUMENT

Intoxilyzer - Alcohol Analyzer

Model 8000

SN 80-002591

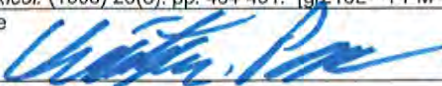
01/25/2023

10:43

Test	g/210L	Time
Air Blank	0.000	10:44
Cal Check	0.081	10:44
Air Blank	0.000	10:45
Cal Check	0.081	10:45
Air Blank	0.000	10:46
Cal Check	0.082	10:46
Air Blank	0.000	10:46
Cal Check	0.082	10:47
Air Blank	0.000	10:47
Cal Check	0.081	10:48
Air Blank	0.000	10:48
Cal Check	0.081	10:48
Air Blank	0.000	10:49
Cal Check	0.081	10:49
Air Blank	0.000	10:50
Cal Check	0.082	10:50
Air Blank	0.000	10:51
Cal Check	0.082	10:51
Air Blank	0.000	10:51
Cal Check	0.082	10:52
Air Blank	0.000	10:52
Cal Check Stats		
Average	0.0815	
Std Dev	0.0005	
Rel Std Dev(%)	0.6466	

**Known Breath-Alcohol Equivalent (g/210L) Ratio of Nitrogen and Ethanol Gas (208 ppm/105 L)**

0.08 g/210L = 208 PPM ÷ 2605\*

Manufacturer: <b>ILMO</b>	Manufacturer Cert. No.: <b>15332</b>	Cylinder Size: <b>105L</b>
Lot No.: <b>33922080A2</b>	Cylinder No.: <b>042</b>	Expiration Date: <b>01/05/2025</b>
<p>The above 105 L cylinder has been analyzed via Infrared Spectroscopy utilizing the Intoxilyzer 8000 and was performed in accordance with the procedures prescribed by the State Director of Tests pursuant to 40 OAC 30-1-3. The above NIST traceable reference standard meets the requirements for use as a calibrating unit in accordance with 47 O.S. 759, 40 OAC 25-1-3, and appears on the current conforming products list of calibrating units for breath alcohol testers published by the U.S. Department of Transportation in the Federal Register [77 FR 64588 et seq]. * See Dubowski, K.M. and Essary N., <i>Journal of Anal. Toxicol.</i> (1996) 20(6): pp. 484-491. [g/210L = PPM ÷ 2605].</p>		
Signature 	Date: <b>01/25/2023</b>	
Name <b>Christopher Pape</b>	Permit No.: <b>23020</b>	



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:** 15332  
**Part #:** BAC105L080T  
**Cylinder Size:** 105L  
**Lot Number:** 33922080A2  
**Expiration:** 1/5/2025

ACVD  
 1/10/2023  
 CP

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

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

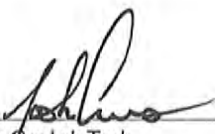
Component:	Reported Concentration:	Analytical Accuracy (U, k=2):	Analytical Method:
Ethanol	208 ppm	+/-0.002 BAC(G/210L)	NDIR
Nitrogen	Balance	[5.2 ppm]	

**Distributed by:**

CMI Inc.  
 316 East Ninth Street  
 Owensboro, KY 42303  
 Phone 866-835-0690  
[www.alcoholtest.com](http://www.alcoholtest.com)

\*Traceable to:  
 Certified Reference Material - 261.0 µmol/mol  
 Ethanol in Nitrogen - Serial No. ND7017 Lot No. 080722E2

Store in dry area, away from sources of heat, ignition and direct sunlight. Do not allow storage area to exceed 52 °C (125 °F).

  
 Specialty Gas Lab Tech

12-19-2022  
 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.

# OFFICER'S IMPAIRED DRIVING AFFIDAVIT

7/20

Section 1

ARREST DATE <b>02/16/2023</b>		ARREST TIME <b>1030</b>		COUNTY # <b>55</b>	CITY #	CITATION #	
ARREST LOCATION <b>BOT</b>				CITY		COUNTY <b>OKLAHOMA</b>	
SUBJECT NAME <b>BREATHTEST, DELTA</b>			DATE OF BIRTH <b>01/01/1985</b>		SEX <b>M</b>	HEIGHT <b>510</b>	WEIGHT <b>200</b>
ADDRESS <b>3600 MLK</b>			CITY <b>OKLAHOMA CITY</b>			STATE <b>OK</b>	ZIP CODE <b>73111</b>
DRIVER LICENSE # <b>B083463042</b>			EXPIRATION DATE <b>10/31/2022</b>		STATE <b>OK</b>	CLASS <b>D</b>	RESTRICTIONS
VEHICLE MAKE <b>MOCK</b>		MODEL <b>MOCK</b>		TAG # <b>MOCK</b>		STATE <b>OK</b>	CMV <b>N</b>
						PLACARD <b>N</b>	

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**



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

**POST REPAIR MAINTENANCE, INSTALLED NEW CYLINDER**

**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 <b>I-8000</b>		SERIAL NUMBER <b>80-004812</b>	SPECIALIST <b>BOARD OF TESTS</b>	
STANDARD <b>Dry</b>		TARGET VALUE <b>0.080</b>	PERMIT NUMBER <b>23020</b>	
MANUFACTURER <b>ILMO</b>		LOT # <b>33922080A2</b>	DATE CYLINDER INSTALLED <b>02/16/2023</b>	DATE CYLINDER EXPIRES <b>01/05/2025</b>
OBSERVATION START <b>1045</b>	TEST DATE <b>02/16/2023</b>	A 15-minute (or greater) deprivation/observation period was observed prior to and continuing to the time of test administration.  I administered said Breath-Alcohol Test in compliance with the applicable operating procedure of the Board of Tests.   SIGNATURE OF OPERATOR		
RESULT TABLE				
Test	g/210L	Time		
Air Blank	0.00	11:05		
Subject Test	0.00	11:05		
Breath Volume	2.097 LITERS			
Air Blank	0.00	11:05		
Wait		11:07		
Air Blank	0.00	11:08		
Subject Test	0.00	11:08		
Breath Volume	2.097 LITERS			
Air Blank	0.00	11:09		
Cal Check	0.07	11:09		
Air Blank	0.00	11:10		
NAME <b>PAPE, CHRISTOPHER</b>			  Test Result BrAC g/210L  <b>0.00</b>	
BADGE # <b>000000484</b>				
PERMIT # <b>0000023020</b>				
AGENCY <b>BOARD OF TESTS</b>				

**What happens next?**

Section 3

1. The Arresting Officer is required to submit the Officer's Impaired Driving Affidavit to the State of Oklahoma.
2. Upon receipt and review of the Officer's Impaired Driving Affidavit and any associated test results, if applicable, the State of Oklahoma may revoke your Oklahoma driving privileges. If you hold a commercial driver license or were driving a commercial motor vehicle, the State of Oklahoma may disqualify your privilege to operate a commercial motor vehicle. You will continue to have driving privileges, if otherwise eligible, unless or until an Order of Revocation and/or Disqualification is issued by the State of Oklahoma.
3. The State of Oklahoma will send you the Order of Revocation and/or Disqualification to the address you have on file with Service Oklahoma. To confirm or change your address on file, contact Service Oklahoma.
4. The Revocation and/or Disqualification will be effective 55 days from the date of the Order, including 10 days allowed for mailing. 47 O.S. §§2-116, 753, 754.
5. The Order of Revocation and/or Disqualification will contain important information about your rights to appeal the revocation and/or disqualification of your driving privileges. To appeal the applicable Order of Revocation and/or Disqualification your petition must be filed with the District Court of the County in which you were arrested within 40 days of the date of the order, including 10 days allowed for mailing. 47 O.S. §§2-116, 6-211.

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: \_\_\_\_\_ Place (location when signed): \_\_\_\_\_ Signature of arresting officer: \_\_\_\_\_

NAME <b>PAPE, CHRISTOPHER</b>		AGENCY <b>BOARD OF TESTS</b>	
BADGE <b>000000484</b>	AGENCY ADDRESS <b>INTER-AGENCY</b>	ZIP CODE <b>00000</b>	PHONE <b>4054252460</b>

OTHER WITNESSES:

Section 5

1	NAME	TITLE	ADDRESS	PHONE
2	NAME	TITLE	ADDRESS	PHONE

# OFFICER'S IMPAIRED DRIVING AFFIDAVIT

8/20

Section 1

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SUBJECT NAME <b>BREATHTEST, DELTA</b>				DATE OF BIRTH <b>01/01/1985</b>		SEX <b>M</b>	HEIGHT <b>510</b>
ADDRESS <b>3600 MLK</b>				CITY <b>OKLAHOMA CITY</b>		STATE <b>OK</b>	ZIP CODE <b>73111</b>
DRIVER LICENSE # <b>B083463042</b>		EXPIRATION DATE <b>10/31/2022</b>		STATE <b>OK</b>	CLASS <b>D</b>	RESTRICTIONS	ENDORSEMENTS
VEHICLE MAKE <b>MOCK</b>		MODEL <b>MOCK</b>		TAG # <b>MOCK</b>		STATE <b>OK</b>	CMV <b>N</b>
						PLACARD <b>N</b>	

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**

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

**POST REPAIR MAINTENANCE, INSTALLED NEW CYLINDER**

**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

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STANDARD <b>Dry</b>		TARGET VALUE <b>0.080</b>	PERMIT NUMBER <b>23020</b>	
MANUFACTURER <b>ILMO</b>		LOT # <b>33922080A2</b>	DATE CYLINDER INSTALLED <b>02/16/2023</b>	DATE CYLINDER EXPIRES <b>01/05/2025</b>
OBSERVATION START <b>1045</b>	TEST DATE <b>02/16/2023</b>	<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;"><i>[Signature]</i> SIGNATURE OF OPERATOR</p>		
RESULT TABLE				
Test	g/210L	Time		
Air Blank	0.00	11:05		
Subject Test	0.00	11:05		
Breath Volume	2.097 LITERS			
Air Blank	0.00	11:06		
Wait		11:07		
Air Blank	0.00	11:08		
Subject Test	0.00	11:08		
Breath Volume	2.097 LITERS			
Air Blank	0.00	11:09		
Cal Check	0.07	11:09		
Air Blank	0.00	11:10		
NAME <b>PAPE, CHRISTOPHER</b>		BADGE # <b>000000484</b>		
		PERMIT # <b>0000023020</b>		
AGENCY <b>BOARD OF TESTS</b>				



Test Result BrAC g/210L <h2 style="margin: 0;">0.00</h2>
----------------------------------------------------------------

**What happens next?**

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2. Upon receipt and review of the Officer's Impaired Driving Affidavit and any associated test results, if applicable, the State of Oklahoma may revoke your Oklahoma driving privileges. If you hold a commercial driver license or were driving a commercial motor vehicle, the State of Oklahoma may disqualify your privilege to operate a commercial motor vehicle. You will continue to have driving privileges, if otherwise eligible, unless or until an Order of Revocation and/or Disqualification is issued by the State of Oklahoma.
3. The State of Oklahoma will send you the Order of Revocation and/or Disqualification to the address you have on file with Service Oklahoma. To confirm or change your address on file, contact Service Oklahoma.
4. The Revocation and/or Disqualification will be effective 55 days from the date of the Order, including 10 days allowed for mailing. 47 O.S. §§2-116, 753, 754.
5. The Order of Revocation and/or Disqualification will contain important information about your rights to appeal the revocation and/or disqualification of your driving privileges. To appeal the applicable Order of Revocation and/or Disqualification your petition must be filed with the District Court of the County in which you were arrested within 40 days of the date of the order, including 10 days allowed for mailing. 47 O.S. §§2-116, 6-211.

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: \_\_\_\_\_ Place (location when signed): \_\_\_\_\_ Signature of arresting officer: \_\_\_\_\_

NAME <b>PAPE, CHRISTOPHER</b>		AGENCY <b>BOARD OF TESTS</b>	
BADGE <b>000000484</b>	AGENCY ADDRESS <b>INTER-AGENCY</b>	ZIP CODE <b>00000</b>	PHONE <b>4054252460</b>



# Certificate of Calibration

This is to certify the calibration of **Intoxilyzer**® serial number 8D-004812, 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 Feb. 02, 2003 Signed [Signature]

Technician



316 East 9<sup>th</sup> Street  
Owensboro, KY 42303  
USA

Part No. 650517 Rev.A



DATE: 9/14/2022

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

407230

**Bill To:**  
Oklahoma Board Of Tests  
Blvd Adcu Annex Bldg #9  
3600 Martin Luther King  
Oklahoma City, OK 73136-3000  
USA  
Customer #: 731362  
Phone: 405-425-2424  
Fax: 405-425-2490 fax

**Ship To:**  
Oklahoma Board Of Tests  
Blvd Adcu Annex Bldg #9  
3600 Martin Luther King  
Oklahoma City OK 73136-3000  
USA  
Phone: 405-425-2424

**MODEL #:** 0024800K

**Serial Number:** 80-004812

**BILL CODE:** Out of Warranty

**EXTRA PARTS RCVD:**

BH, KB, BATTERY COVER, GAS SHELF

**DESCRIPTION OF PROBLEM**

MAIN BOARD NEEDS REPLACED. MULTIPLE PADS REMOVED DURING DATA FLASH REPLACEMENT.

**WORK PERFORMED:**

Replaced parts listed, calibrated and final tested; 8133.16.00 software

**PARTS USED**

Seq. No.	Part	Description	Quantity
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.438-.562,RED	1.00 EA
140	470218	SEAL,TAMPER EVIDENT,SERVICE	1.00 EA
150	021270G111T	PWB ASSY,SYSTEM,I8000,TESTED	1.00 EA
160	530030	TUBING,TYGON,.375IDx.562OD	2.00 IN
165	230115	IC,SMD,DATAFLASH,4MB,TSOP-28	1.00 EA
170	021307	HOSE ASSY,BREATH,I8000	1.00 EA
180	320647	HDR,36PIN,3X12,BD2BD,.100,MALE	1.00 EA
190	320642	HDR,10PIN,2ROW,.1CC,4-SIDED	1.00 EA
200	470202	FILTER,FOAM,1.85x2.20	1.00 EA

**LABOR / TESTING**

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



# CMI INC.

## Service Evaluation Form

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

Note: Please ship items in their original shipping container.

**Contact information:**

**Name** Chris Pape **Phone:** ( 405 ) 425-2460  
**Email:** christopher.pape@bot.ok.gov **Customer #** 731362 (contact Customer Service)

**Your Billing Address**

**Agency Name:** Board of Tests  
**Address:** 3600 N ML King, Bldg 9  
**City:** Oklahoma City **State:** OK **Zip:** 73111  
**Credit Card/PO #:** \_\_\_\_\_  
**Name on Card:** \_\_\_\_\_  
**Expiration Date:** \_\_\_\_\_ **CVV** \_\_\_\_\_

**Your Shipping Address**

**Agency Name:** Board of Tests  
**Address:** 3600 N ML King, Bldg 9  
**City:** Oklahoma City **State:** OK **Zip:** 73111  
**Contact Person:** Chris Pape  
**Contact Phone:** (405) 425-2460  
**Email:** christopher.pape@bot.ok.gov

**Instrument Serial Number:** 80-004812

**Detailed Description of Problem:**

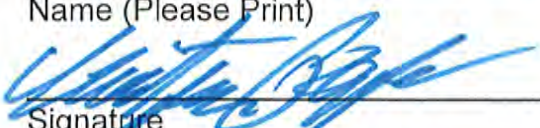
Main board needs replaced. Multiple pads removed during Data Flash replacement.

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 of Calibration" for:  S-D2, S-D5, and I-800 (\$19)  
 I-200, I-240, I-300, I-400, and I-600 (\$39)

**Authorized By:**

<u>Chris Pape</u>	<u>Breath Testing Admin</u>
Name (Please Print)	Title
	<u>9/7/2022</u>
Signature	Date

Ship item to:

**CMI, Inc.**  
**Attn: Service Dept.**  
**316 East Ninth Street**  
**Owensboro, KY 42303**



**STATE OF OKLAHOMA  
BOARD OF TESTS FOR ALCOHOL AND DRUG INFLUENCE**

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


Post Office Box 36307  
Oklahoma City, Oklahoma 73136-2307  
Phone: (405) 425-2460 Fax: (405) 425-2490  
www.bot.ok.gov

Joshua Smith  
Director

**Certificate of Analysis – Reference Solution**

ALPHA INSTRUMENT  
Intoxilyzer - Alcohol Analyzer  
Model 8000 SN 80-002591  
09/23/2022 09:37

Test	g/210L	Time
Air Blank	0.000	09:37
Cal Check	0.019	09:38
Air Blank	0.000	09:39
Cal Check	0.019	09:39
Air Blank	0.000	09:40
Cal Check	0.019	09:41
Air Blank	0.000	09:41
Cal Check	0.019	09:42
Air Blank	0.000	09:42
Cal Check	0.019	09:43
Air Blank	0.000	09:44
Cal Check	0.019	09:44
Air Blank	0.000	09:45
Cal Check	0.019	09:46
Air Blank	0.000	09:46
Cal Check	0.019	09:47
Air Blank	0.000	09:47
Cal Check	0.019	09:48
Air Blank	0.000	09:49
Cal Check	0.019	09:49
Air Blank	0.000	09:50
Cal Check Stats		
Average	0.0190	
Std Dev	0.0000	
Rel Std Dev (%)	0.0000	

NIST Traceable Breath-Alcohol Equivalent (g/210L +/- 3%) Ratio of ethanol and water free of test interfering substances.		
Manufacturer: <b>Guth</b>	Manufactured Date: <b>8/24/2021</b>	Concentration: <b>0.02</b>
Lot No.: <b>21340</b>	Expiration Date: <b>8/24/2023</b>	Equipment Model: <b>Guth 2100</b>
The above solution has been analyzed via Infrared Spectroscopy utilizing the Intoxilyzer 8000 and was performed in accordance with the procedures prescribed by the State Director of Tests pursuant to 40 OAC 30-1-3. The above NIST traceable reference solution meets the requirements for use pursuant to 40 OAC 25-1-2.1. Approved breath-alcohol measurement equipment and reference solutions. Equipment used appears on the current or supplemented Conforming Products List of Calibrating Units for Breath Alcohol Testers (72 FR 34747), published by the National Highway Traffic Safety Administration.		
Signature 	Date: <b>9/23/2022</b>	
Name <b>Christopher Pape</b>	Permit No.: <b>23020</b>	



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ALPHA INSTRUMENT

Intoxilyzer - Alcohol Analyzer


Model 8000

SN 80-002591

10/24/2022

15:45

Test	g/210L	Time
Air Blank	0.000	15:45
Cal Check	0.039	15:46
Air Blank	0.000	15:47
Cal Check	0.039	15:47
Air Blank	0.000	15:48
Cal Check	0.039	15:49
Air Blank	0.000	15:49
Cal Check	0.039	15:50
Air Blank	0.000	15:50
Cal Check	0.039	15:51
Air Blank	0.000	15:52
Cal Check	0.039	15:52
Air Blank	0.000	15:53
Cal Check	0.039	15:54
Air Blank	0.000	15:54
Cal Check	0.039	15:55
Air Blank	0.000	15:56
Cal Check	0.039	15:56
Air Blank	0.000	15:57
Cal Check	0.040	15:57
Air Blank	0.000	15:58
Cal Check Stats		
Average	0.0391	
Std Dev	0.0003	
Rel Std Dev(%)	0.8087	

NIST Traceable Breath-Alcohol Equivalent (g/210L +/- 3%) Ratio of ethanol and water free of test interfering substances.		
Manufacturer: <b>Guth</b>	Manufactured Date: <b>10/4/2021</b>	Concentration: <b>0.040</b>
Lot No.: <b>21410</b>	Expiration Date: <b>9/30/2023</b>	Equipment Model: <b>Guth 2100</b>
The above solution has been analyzed via Infrared Spectroscopy utilizing the Intoxilyzer 8000 and was performed in accordance with the procedures prescribed by the State Director of Tests pursuant to 40 OAC 30-1-3. The above NIST traceable reference solution meets the requirements for use pursuant to 40 OAC 25-1-2.1. Approved breath-alcohol measurement equipment and reference solutions. Equipment used appears on the current or supplemented Conforming Products List of Calibrating Units for Breath Alcohol Testers (72 FR 34747), published by the National Highway Traffic Safety Administration.		
Signature 	Date: <b>10/24/2022</b>	
Name <b>Christopher Pape</b>	Permit No.: <b>23020</b>	



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Director

**Certificate of Analysis – Reference Solution**

ALPHA INSTRUMENT

Intoxilyzer - Alcohol 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	

NIST Traceable Breath-Alcohol Equivalent (g/210L +/- 3%) Ratio of ethanol and water free of test interfering substances.

Manufacturer: <b>Guth</b>	Manufactured Date: <b>03/07/2022</b>	Concentration: <b>0.10</b>
Lot No.: <b>22080</b>	Expiration Date: <b>03/07/2024</b>	Equipment Model: <b>Guth 2100</b>
The above solution has been analyzed via Infrared Spectroscopy utilizing the Intoxilyzer 8000 and was performed in accordance with the procedures prescribed by the State Director of Tests pursuant to 40 OAC 30-1-3. The above NIST traceable reference solution meets the requirements for use pursuant to 40 OAC 25-1-2.1. Approved breath-alcohol measurement equipment and reference solutions. Equipment used appears on the current or supplemented Conforming Products List of Calibrating Units for Breath Alcohol Testers (72 FR 34747), published by the National Highway Traffic Safety Administration.		
Signature 	Date: <b>06/27/2022</b>	
Name <b>Christopher Pape</b>	Permit No.: <b>23020</b>	



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Joshua Smith  
Director

**Certificate of Analysis – Reference Solution**

**ALPHA INSTRUMENT**

Intoxilyzer - Alcohol Analyzer


Model 8000

SN 80-002591

06/27/2022

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	

NIST Traceable Breath-Alcohol Equivalent (g/210L +/- 3%) Ratio of ethanol and water free of test interfering substances.		
Manufacturer: <b>Guth</b>	Manufactured Date: <b>02/07/2022</b>	Concentration: <b>0.20</b>
Lot No.: <b>22050</b>	Expiration Date: <b>02/07/2024</b>	Equipment Model: <b>Guth 2100</b>
The above solution has been analyzed via Infrared Spectroscopy utilizing the Intoxilyzer 8000 and was performed in accordance with the procedures prescribed by the State Director of Tests pursuant to 40 OAC 30-1-3. The above NIST traceable reference solution meets the requirements for use pursuant to 40 OAC 25-1-2.1. Approved breath-alcohol measurement equipment and reference solutions. Equipment used appears on the current or supplemented Conforming Products List of Calibrating Units for Breath Alcohol Testers (72 FR 34747), published by the National Highway Traffic Safety Administration.		
Signature 	Date: <b>06/27/2022</b>	
Name <b>Christopher Pape</b>	Permit No.: <b>23020</b>	


**GUTH LABORATORIES, INC.**

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

**CERTIFICATE OF ANALYSIS**

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **21340** ✓ of  
 Alcohol Reference Solution for Simulator were analyzed by  
 gas chromatography on **August 25, 2021**, using a Perkin Elmer Gas  
 Chromatograph Autosystem XL S/N: 610N9030209, and found to contain  
**0.0242%** (w/vol) ethyl alcohol. The expiration date for this lot  
 number is **August 24, 2023** 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.

Ted L. Pauley, President  
 GUTH LABORATORIES, INC.

***NIST Traceability:***

*Testing was conducted using Cerilliant Reference Standard lot number FN05122004 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.*

RCVD  
 5/9/2022  
 CP




**GUTH LABORATORIES, INC.**

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**CERTIFICATE OF ANALYSIS**

 RCVD  
 5/9/2022  
 CP

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **21410** ✓ of  
 Alcohol Reference Solution for Simulator were analyzed by  
 gas chromatography on **October 4, 2021**, using a Perkin Elmer Gas  
 Chromatograph Autosystem XL S/N: 610N9030209, and found to contain  
**0.0485%** (w/vol) ethyl alcohol. The expiration date for this lot  
 number is **September 30, 2023** 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.

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.

**GUTH LABORATORIES, INC.**

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

**CERTIFICATE OF ANALYSIS**

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **22080** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **March 9, 2022**, using a Perkin Elmer 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.

RCVD  
5/9/2022  
CP

**GUTH LABORATORIES, INC.**

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**CERTIFICATE OF ANALYSIS**RCVD  
5/9/2022  
CP

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°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.*

<u>Location Returned From</u> Lawton PD 1	<u>Unit Serial #</u> 80-004812	<u>Date:</u> 20/20 8/9/22
----------------------------------------------	-----------------------------------	------------------------------

Inventory Process

Old Cylinder #: 31420080A2-056

Unit checked in to BOT    
  Unlink Gas Canister from Unit    
  Old cylinder disposed in inventory  
 New Unit Checked out    
  Remove old cylinder from unit (After Lab Evaluation)    
  Old cylinder archived

<p><u>Check in Procedure</u></p> <p><input type="checkbox"/> Connect unit to ethernet connection 172.019.004. <u>142</u></p> <p><input type="checkbox"/> Download any stored records _____</p> <p><input type="checkbox"/> Change unit location to Serial number</p> <p><input type="checkbox"/> Update Unit Date and time</p> <p>    Previous time: _____</p> <p>    New Time: _____</p> <p><input type="checkbox"/> Execute a new Forms load on the unit</p>	<p><u>Notes from the Field</u></p> <p><input type="checkbox"/> Routine Swap     <input checked="" type="checkbox"/> Issues in the Field</p> <p>Unit will not POST.</p>
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Lab Evaluation

Breath Hose Hold Vacuum?:      Test Chamber Hold Vacuum?:

DVM

3µm \_\_\_\_\_     Chamber Temp \_\_\_\_\_     Snap Test ok?

9µm \_\_\_\_\_     Breath Hose Temp \_\_\_\_\_     RFI Detected?

Peripheral Tests

Speaker (F5)      Power LED Green (F6)      Red (F7)      Fan (F9)   
 Gas Regulator (F11)      Pump (F10)      Receipt paper

Atmospheric Sensor

Pressure \_\_\_\_\_     Correction Factor \_\_\_\_\_     Resistance \_\_\_\_\_     Value \_\_\_\_\_  
 Flow Sensor \_\_\_\_\_     Tank Sensor \_\_\_\_\_     Is regulator close to Tank Sensor Value?  Yes /  No

Sent to CMI (If needed) \_\_\_\_\_     Reason Sent Pads removed w/ Data Flash removal

Date Sent 9/17/2022

Invoice Sent 12/23/2022

Date Returned 2/15/2023

<p><u>Repairs needed:</u></p>	<p><u>Repairs Made:</u></p> <p>Ready for Bench Check? <input checked="" type="checkbox"/></p>
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<p><u>Inventory Process</u></p> <p> <input type="checkbox"/> Linked Cylinder to Unit     <input type="checkbox"/> Bench Check Technician Report  <input type="checkbox"/> Changed Unit Status     <input type="checkbox"/> Mock Subject Test Completed  <input type="checkbox"/> Bench Check Report Completed     <input type="checkbox"/> Certificate of Calibration and Operation  <input type="checkbox"/> Service Overview Completed         </p>	<p><u>To complete if unit sent to CMI</u></p> <p> <input type="checkbox"/> CMI Workorder  <input type="checkbox"/> CMI Certificate of Calibration _____  <input type="checkbox"/> CMI Service Evaluation Form         </p>
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