

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

ATTESTATION

I, the undersigned <u>Joshua Smith</u> (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 80-004878, in compliance with the agency's Maintenance Policy and Procedures.

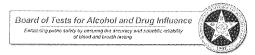
This packet consists of 17 pages.

Signed ____

Name of Position: Director/Records Custodian

Date of Attestation: 05/23/2022

Service Overview



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

BENCH CHECK DATE: 03-06-2019

SERIAL: <u>80-004878</u>

DOCUMENTATION WITHIN SERVICE PACKET:

- BOT Certificate of Calibration and Operation
- Bench Check
- Bench Check Technician's Report
- BOT Dry Gas Certificate of Analysis
- Mock Subject Test
- BOT Certificates of Analysis on Certified Solutions (4)



STATE OF OKLAHOMA BOARD OF TESTS FOR ALCOHOL AND DRUG INFLUENCE

Administrative Office at:
Board of Tests for Alcohol and Drug Influence
Post Office Box 36307
Oklahoma City, Oklahoma 73136-2307

Certificate of Calibration and Operation

This is to certify that the calibration of INTOXILYZER 8000, serial number 80-004878, manufactured by CMI Inc., a subsidiary of MPD, Inc. of Owensboro, Kentucky, was tested and found to be in compliance with National Highway Traffic Safety Administration Standard for Devices to Measure Breath Alcohol (F.R., No. 179 48705-48710 Sept. 17, 1993) and with International Recommendation OIML R 126 Edition 1998 (E). Calibration solutions are traceable to NIST standard material 1828.

In addition the operational procedures and functions of this Intoxilyzer have also been tested and found to be in compliance with the Oklahoma Board of Tests for Alcohol and Drug Influence - Rules and Regulations OAC Title 40: 25-1-2 and 30-1-3 and is hereby certified for use as an evidential breath testing device within this state.

| CERTIFICATION TYPE | DATE |
|----------------------------|----------|
| Manufacturer Calibration | 11-23-09 |
| Board of Tests Bench Check | 12-04-09 |
| Manufacturer Calibration | 08-20-10 |
| Board of Tests Bench Check | 09-02-10 |
| Board of Tests Bench Check | 09-27-11 |
| Board of Tests Bench Check | 08-07-13 |
| Board of Tests Bench Check | 05-27-15 |
| Board of Tests Bench Check | 04-07-17 |
| Board of Tests Bench Check | 03-06-19 |
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Presentation of this form certifies that the Intoxilyzer, SN: 80-004878, functioned properly at the time of the breath test and hereby certifies the breath test result as valid.

Date:

Re: Request for Log of Test on Intoxilyzer 8000

Name:

Dear Sir:

The Log of Test information from a breath test conducted on a Intoxilyzer 8000 is printed in Section 2 of the Affidavit and is no longer retained as a separate form as with the Intoxilyzer 5000. The 8000 uses a nitrogen/ethanol dry gas for the external control test. The dry gas cylinder has the capacity to perform approximately 325 tests and does not require maintenance until its expiration date or can no longer provide the required pressure to perform a control test. The cylinder has an expiration date of two years from date filled at the manufacturer and is programmed in the 8000 upon installation, both dates are printed in Section 2 of the Affidavit. The Intoxilyzer is programmed to disable itself when the date of expiration is reached or the pressure monitor indicates 25 lbs psi.

Due to the reliability and stability of dry gas, maintenance on the 8000 is not required every 30 days or 25 tests, therefore maintenance is no longer performed by officers in the field. The Board of Tests for Alcohol and Drug Influence certifies each Intoxilyzer 8000 for field use by performing a bench check. The bench check is designed to check the operation and procedures programmed in the 8000 to ensure it is functioning properly for use in Oklahoma. A bench check is performed every time a new dry gas cylinder is installed or the instrument has returned from the manufacturer for repair. Once the instrument passes the bench check, all that is required to set it up for field use is to plug it in and turn it on and does not require a permit to set up. The Board of Tests has the ability to monitor each instrument once it is set up in the field.

Each Intoxilyzer has a database of valid permit numbers that it checks prior to allowing a breath test to be performed. The database is updated on a regular basis, if a permit number is invalid that officer will not be able to conduct a breath test on the 8000. If the 8000 prints an affidavit the breath test operator listed in Section 2 had a valid permit at the time of the test and the breath test is valid.

If you have any further questions please feel free to call me.

Sincerely,

J. Robert Blakeburn (OBA11059) State Director of Tests for Alcohol and Drug Influence

poher Blokelung

STATE OF OKLAHOMA - DEPARTMENT OF PUBLIC SAFETY

| CH CHECK DATE 3/06/2019 | TIME PROCEDURE BEGAN 09:55 | | INSTRUMENT LOCATION 80-004878 | | | |
|--|----------------------------|---------|-------------------------------|-------------|-----------------|--|
| RUMENT TYPE ntoxilyzer | INSTRUMENT MODEL I - 8000 | | | RIAL NUMBER | | |
| Diagnostics PASS Mouth Alcohol T PASS RFI Test | ēst | TEST RE | SULTS | | | |
| PASS | | Dup | licate Breath | Sampling Re | sults | |
| Abort Test PASS | | Value | Test 1 | Test 2 | Control Test | |
| Improper Sample PASS | Test | .02 | 0.019 | 0.019 | 0.019 | |
| Interferent Detect Test | | .04 | 0.038 | 0.038 | 0.039 | |
| PASS No Sample Given Test PASS | | .10 | 0.096 | 0.095 | 0.097 | |
| | | .20 | 0.194 | 0.190 | 0.196 | |
| Insufficient Sample PASS | e Test | | PA | SS | | |
| Air Blank Contaminat | ion Test | | | | | |
| Range Exceeded ⁻ PASS | Test | | | | | |

I swear under penalty of perjury that in regards to the above listed instrument, I have complied with the Intexhyzer Bench Checking Procedure approved by the State of Oklahoma. SIGNATURE 03/06/2019 PERMIT# SMITH, **JOSHUA** 0000016837



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

BENCH CHECK TECHNICIAN'S REPORT

| STRUMENT oxilyzer Model | | Serial# | | |
|---|---------------------------------|---------------------|------------|--|
| 000 | | 80-0046 | 378 | |
| AS CANISTER | | | | |
| OT# | | EXP Date | | |
| 32518080A1 | #025 | 02-05-2021 | | |
| REFERENCE | Simulat | or Model | | |
| Guth 2100 | Guth 2100 | Guth 2100 | Guth 2100 | |
| | <u>Se</u> | rial # | | |
| DR3591 | DR3753 | DR3594 | DR3754 | |
| .02 | .04 | entration .10 | .20 | |
| .02 | | DT# | .20 | |
| 18020 | 17410 | 18070 | 17340 | |
| | Manufac | tured Date | | |
| 01-09-2018 | 12-06-2017 | 02-26-2018 | 10-09-2017 | |
| | | tion Date | t | |
| 01-09-2020 12-06-2019 | | 02-26-2020 | 10-09-2019 | |
| | | | | |
| | Solution Cor | nmission Date | | |
| 02-15-19 | 02-15-19 | 02-15-19 | 02-15-19 | |
| 02-15-19 REASON FOR BEN POST REPAIR TROUBLESHOOTII | 02-15-19 CH CHECK CYLINDER REPL | 02-15-19 ACEMENT | 02-15-19 | |

| Certificate | e of Analysis – Dry Gas |
|------------------|--------------------------------|
| 03-06-19 | .080 |
| Date of Analysis | Labelled target value (g/210L) |
| #025 | 180. |
| Cylinder# | Average test result |





BRT Form 5.0

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.

0 • Jacksonville, IL 62651-0790 3-7634 · www.ilmoproducts.com

Certificate of Analysis

Certificate ID:

11617

Part #:

BAC105L080T

Cylinder Size:

105L

Lot Number:

32518080A1 V

Expiration:

2/5/2021

RECVID - 8

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

Contents:

Nitrogen

105 Liters @ 1000 psig 70°F (21°C)

Analytical

Component:

Reported

Accuracy

Analytical

Concentration:

(U, k=2):

Method:

Ethanol 208 ppm

Balance

+/-0.002 BAC(G/210L) NDIR

[5.2 ppm]

Distributed by:

CMI Inc.

316 East Ninth Stree Owensboro, KY 423 Phone 866-835-0690 www.alcoholtest.com

Time Test q/210L 0.000 07:33 Air Blank 07:34 Cal Check 0.081 0.000 07:34 Air Blank 07:35 Cal Check 0.082 0.000 07:35 Air Blank 07:35 0.081 Cal Check 07:36 Air Blank 0.000 07:36 0.081 Cal Check 07:37 0.000 Air Blank 07:37 0.081 Cal Check 0.000 07:38 Air Blank 07:38 Cal Check 0.082 07:39 Air Blank 0.000 07:39 Cal Check 0.081 07:39 Air Blank 0.000 Cal Check 0.081 07:40 0.000 07:40 Air Blank Cal Check 0.082 07:41 Air Blank 0.000 07:41 07:41 Cal Check 0.082 07:42 Air Blank 0.000

7/13

SN 80-002591

07:33

ALPHA INSTRUMENT

Model 8000

03/06/2019

Cal Check Stats

Average

Std Dev Rel Std Dev(%)

Intoxilyzer - Alcohol Analyzer

's Signature

0.0814

0.0005

0.6343

*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).

Specialty Gas Lab Tech

01-02-19



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.

| | RE | VUCA'. | TION/DIS | SQUAI | 711/1(| | N | | | Section |
|---|--|---|--|--|--|--|---|--|---------------------------------------|---------------------|
| 03/06/2019 | | RESTTIME 100 | | COUNTY# | | 1TY # 4 3 | CITATIO | | | 5.2.101 |
| ARREST LOCATION MOCK | | | | 133 | CITY | | 11100 | COUN | LAHO | MΣ |
| SUBJECT NAME MOCK, SUBJ | ECT TEST | | | | | OF BIRTH / 09/196 | 1 SEX | RACE | HEIGHT 510 | WEIGHT |
| ADDRESS | | TNC A | CITY | IOMA CI | | / 0 9 / 1 9 0 | STATE | . VV | ZIP COD | E |
| 3600 MARTI DRIVER LICENSE # | N LUTHER K | ING A | | HOMA C | TE | | OK | RESTR | 731 ICTIONS | ENDORSEMENT |
| T083454871 VEHICLE MAKE | | MODEL | | 06/30/ | | OK AG# | <u> </u> | STATE | CMV | M PLACARD |
| MCOK On the above date, time, and lo | reation, the above named ner | MOCK | ***** | Is to helieve the ne | | MOCK | ical control | OK | N ehicle upon | N a public road |
| highway, street, turnpike, public influence of alcohol and/or othe (Describe driving behavior or cimoCK_SUBJECT) Describe person's condition (od | e parking lot, or other public p r intoxicating substances as procumstances): TEST | lace, or upon a private | e road, street, alley or lane | which provides a | ccess to one | or more single or mu | lti-family dv | velling within | this state w | hile under the |
| ROUTINE MAIN | | GAS CANI | STER INSTA | L | | | | | | |
| | | | | | | | | | | |
| BREATH-ALCOHOL ANALYSI | S RECORD. REPORT OF TH | | WAS INFORMED OF THI | | | | | | | Section |
| EQUIPMENT I - 8000 | | SERIAL | NUMBER SF | PECIALIST | OF TE | | | | | |
| STANDARD | | 100- | TARGET VALUE | F | ERMIT NUM | BER | | | | |
| Dry MANUFACTURER | | | 0.080 LOT# | C | 16837 | ER INSTALLED | | ATE CYLIND | | |
| ILMO DBSERVATION START TES | T DATE | MOUTHPIECE | 325180 | 80A1 | 03/06 | 5/2019 | | 02/05 | /202 | 21 |
| 1130 0 | 3/06/2019 | G | | (or greater) observed pr | | on/observation | 1 | | | |
| RESULT TABLE Test | g/210L | Time | 1 | time of test | | - | | Į. | THES | TATE |
| Air Blank Subject Test Breath Volume Air Blank Wait Air Blank Subject Test Breath Volume Air Blank | 0.00 0.00 2.492 LITERS 0.00 0.00 0.00 1.316 LITERS 0.00 | 11:53 11:54 11:54 11:56 11:56 11:57 | SIGNATURE OF OF | with the aure of the | pplicab | le operating | | ONEAT SEAL | 1807 | |
| Cal Check Air Blank | 0.08 0.00 | 11:58 11:59 | NAME SMITH, JOS | SHUA | | | | | Test Re rAC g/: | |
| | | | BADGE # 0000004 AGENCY | | 00000 00000 | 16837 | | | 0.0 | |
| | | | BOARD OF | | | | L | | | |
| period of one hundred eithis state will be disqual commercial motor vehice an Administrative Hearingerson at 3600 N. MLK. | ghty (180) days or mo fied if you refused or f ie. To appeal the driving within fifteen (15) Ave. or by mail to Lega | ore, if you refused ailed the state's er's license revol days from the call Division, Depa | d or failed the state' test(s) (operating a cation/disqualificatio late you received i rtment of Public Sa | s test(s). In a CMV or CDL on, the Depart notice of revolety, P.O. Box | ddition, you holder) Ol ment of Pocation or 11415, O | ur commercial of a test result of a test result of ablic Safety must reliable to the disqualification (C., OK, 73136). | driving p f .04 or r st receive on. Subr | rivilege in nore while e your wri mit your w | e operatir tten requ vritten re | est for quest in |
| Date served: 03/0 | 6/2019 Sig | nature of officer | | | | , | E | Badge #:_ | | ·e. |
| accordance with Title | | | | der the laws o | of Oklahon | na that the foreg | oing is t | rue and c | orrect." | Section |
| oate: 03/06/201 | L9 Place (location v | /hen signed): | | ACENICY. | Signature | of arresting off | icer: | | | |
| SMITH, JOS | SHUA | | | GENCY BOARD | OF TI | ESTS | | | | |
| ADGE 0000000435 | AGENCY ADDRESS INTER - AGE | NCY | | | | ZIP CODE 00000 | PHONE 40 | 54252 | 2460' | ı |
| THER WITNESSES: | | | | | | | | | | Section |
| NAME | | | TITLE | ADDRESS | | | PHO | ΝE | | |
| 1 NAME | | | TITLE / | IDDDESS | | | DUO | · - | | |

No Temporary License Issued: Test Below Legal Limit

2

OFFICER'S AFFIDAVIT AND NOTICE OF REVOCATION/DISOHALIFICATION

| | | | | /1 B E E | $\mathbf{O}_{\mathbf{I}}$ | | | |
|--------------------|-------------|---------------|----------------------------|----------|---------------------------|--------|---------|--------------|
| | | • | | | | | | Section |
| | ARREST TIME | COUNTY # | CIT | Υ# | CITATION | 1# | | |
| 03/06/2019 | 1100 | 55 | 4 | 13 | MOC | !K | | |
| ARREST LOCATION | | | CITY | | | COUNT | Υ | |
| MOCK | | | | | | OK | LAHC | MA |
| SUBJECT NAME | | | | F BIRTH | SEX | RACE | HEIGHT | WEIGHT |
| MOCK, SUBJECT TEST | | | 08, | /09/1 | 961 M | W | 510 | 165 |
| ADDRESS | | CITY | | | STATE | | ZIP COD | E |
| 3600 MARTIN LUTHER | KING A | OKLAHOMA C | $\Gamma \Upsilon \Upsilon$ | | OK | | 731 | .33 |
| RIVER LICENSE # | | EXPIRATION DA | | STATE | CLASS | RESTRI | CTIONS | ENDORSEMENTS |
| T083454871 | | 06/30/ | 2019 | OK | A | | | M |
| 'EHICLE MAKE | MODEL | | TAC | G# | | STATE | CMV | PLACARD |
| MCOK | MOCK | | l IV | IOCK | | OK | N | 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, tumpike, 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.):

ROUTINE MAINTENANCE. NEW GAS CANISTER INSTALL

THE PERSON WAS INFORMED OF THE IMPLIED CONSENT TEST DECLIES

| BREATH-ALCOHOL ANALYSIS | S RECORD, REPORT OF TH | E PERSON NAMED | IN SECTION 1 ABOV | E, and LOG OF T | EST AND MAINTENA | NCE RECORD. | Section 2 |
|-------------------------|------------------------|--------------------------|-------------------|-----------------|------------------|-------------|-------------------------|
| EQUIPMENT | | SERIAL NUMBER SPECIALIST | | | | | |
| I-8000 | | 80 | -004878 | BOARD | OF TEST | 'S | |
| STANDARD | | | TARGET VALUE | - | PERMIT NUMBER | | |
| Dry | | | 0.080 | | 16837 | | |
| MANUFACTURER | | | LOT# | | DATE CYLINDER IN | | DATE CYLINDER EXPIRES |
| ILMO | | | 32518 | 080A1 | 03/06/2 | 2019 | 02/05/2021 |
| | T DATE | MOUTHPIECE | A 15-minu | te (or greater |) deprivation/o | hearvation | |
| | 3/06/2019 | G | | | • | 1 | |
| RESULT TABLE | | | · - | | prior to and cor | _ | THE STAR |
| Test | g/210L | Time | to t | he time of te | st administratio | on. | 35 x * A * * * * |
| | | | | | | | |
| Air Blank | 0.00 | 11:53 | I administe | ered said E | Breath-Alcoh | nol Test in | |
| Subject Test | 0.00 | 11:54 | complian | e with the | applicable of | operating | 司 * 图 * 图 |
| Breath Volume | 2.492 LITERS | | _ | | * * | • • | EL ** TAKE BET AC ** IE |
| Air Blank | 0.00 | 11:54 | proce | dure of the | e Board of T | Cests. | E |
| Wait | | 11:56 | | | | | |
| Air Blank | 0.00 | 11:56 | | | | | *******/*/ |
| Subject Test | 0.00 | 11:57 | | | | | 1907 |
| Breath Volume | 1.316 LITERS | | SIGNATURE OF | OPERATOR | | | 1001 |
| Air Blank | 0.00 | 11:58 | NAME | | | | |
| Cal Check | 0.08 | 11:58 | NAME | | | | Test Result |
| Air Blank | 0.00 | 11:59 | | OSHUA | locatur : | | BrAC g/210L |
| | | | BADGE # | 42E | PERMIT# | 5027 | D1110 g/210L |
| | | | 000000 AGENCY | 433 | 0000016 | 003/ | 0.00 |
| | | | | , mrcmc | | | 0.00 |
| | | | BOARD OF | TESTS | | | |

EFFECTIVE THIRTY (30) DAYS FROM DATE SERVED. Notice of Revocation is given that your driver's license is revoked or denied for a period of one hundred eighty (180) days or more, if you refused or failed the state's test(s). In addition, your commercial driving privilege in this state will be disqualified if you refused or failed the state's test(s) (operating a CMV or CDL holder) OR a test result of .04 or more while operating a commercial motor vehicle. To appeal the driver's license revocation/disqualification, the Department of Public Safety must receive your written request for an Administrative Hearing 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: 03/06/2019 Signature of officer: | Badge #: |
|---|---|
| In accordance with Title 12 O.S. Section 426, "I state under penalty of perjury u | under the laws of Oklahoma that the foregoing is true and correct." Section 4 |
| Date: 03/06/2019 Place (location when signed): | Signature of arresting officer: |
| NAME SMITH, JOSHUA | BOARD OF TESTS |
| AGENCY ADDRESS O O O O O O O O O O O O O O O O O O | ZIP CODE |

Section 3



Certificate of Analysis - Wet Bath 09-26-2018 Date of Analysis Labelled target value (g/210L) 18020

0.0204

Average test result (g/210L)

BOT Technician Name and Signature

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

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number Alcohol Reference Solution for Simulator were analyzed by gas chromatography on January 11, 2018, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.0238% (w/vol) ethyl alcohol. The expiration date for this lot number is January 9, 2020 at 11:59 PM.

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

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

Signature

FLPHR INSTRUMENT

Model B000 09/26/2018

Test

Air Blank

Cal Check

Air Blank

Tal Check

air Blank

Cal Check

Air Blank

:al Check

IIr Blank

'al Check

fir Blank

al Check

ir Blank

average 5td Dev Rel Std Dev(%)

al Check Stats

Operato

Intoxilyzer - Alcohol Analyzer

g/210L

0.000

0.020

0.000

0.020

0.000 0.020

0.000

0.020

0.000

0.020

0.000

0.020

0.000

0.021

0.000

150.0

0.000

0.021

0.000

0.021

0.000

0.0204

2.5312

SN 80-002591

15:36

Time

15:36 15:37

15:37

15:38

15:39

15:39

15:40

15:41

15:41

15:42

15:42

15:43

15:44

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15:45

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15:49

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.

590 NORTH 67th STREET HARRISBURG, PA 17 1401 Number TELEPHONE: 717 501 6470

Certificate of Analysis - Wet Bath 09-26-18 Date of Analysis abelled target value (g/210L) 0.0396



CERTIFICATE OF

In accordance with BRT - 2.1.0, Maintenance, the above referenced simulator solution is ASNITABLE TO TUSS OF SIX external reference in maintenance of the Intoxilyzer 8000.

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 17410 Alcohol Reference Solution for Simulator were analyzed by chromatography on December 7, 2017, using a Perkin Elmer Gas gas Chromatograph Autosystem XL S/N: 610N9030209, and found to 0.0481% (w/vol) ethyl alcohol. The expiration date for this lot number is December 6, 2019 at 11:59 PM.

BOT Technician Name and Signature

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

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

Signature

ALPHR INSTRUMENT Intoxilyzer - Alcohol Analyze

SN 80-002591

15:54

Tine

15:54

15.55

15:56

15:56

15:57

15:58

15:58

15:59

15:59

16:00

16:01

16:03

16:03

16:04

16:04

16:05

16:06

16:06

16:07

Model 8000

09/26/2018

Test

Air Blank

Cal Check

Air Blank

Average Std Deu Rel Std Deu(%)

Cal Check Stats

Operator

0.000

0.040

0.000

0.039

0.000

0.039

0.000

0.040

0.000

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0.039

0.000

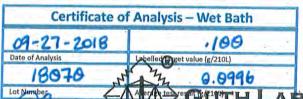
0.0396

L. Pauley, President GUTH LABORATORIES, INC.

NIST Traceability:

Testing was conducted using Cerilliant Reference Standard lot number FN12181501 whose values are traceable to NIST.

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



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

BOT Technician Name and Signature

SN 80-002591

08:28

Time

08:28

08:29

08:29

08:30

08:31

08:31

08:32

08:33

08:33

08:34

08:34

08:35

08:36

08;36 08;37

08:38

08:38

08:39

08:39

08:40

BRT Form 6.0

In actordance 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

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 18070 of

Alcohol Reference Solution for Simulator were analyzed by
gas chromatography on February 28, 2018, using a Perkin Elmer Gas
Chromatograph Autosystem XL S/N: 610N9030209, and found to contain
0.1219% (w/vol) ethyl alcohol. The expiration date for this lot
number is February 26, 2020 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.

Operatory Signature

ALPHA INSTRUMENT Intoxilyzer - Alcohol Analyzer

q/210L

0.000

0.100

0.000

0.100

0.000

0.099

0.000

0.100

0.000

0.100

0.000

0.100

0.000

0.099

0.000

0.099

0.000

0.099

0.000

0.100 0.000

0.0996

Model 8000

09/27/2018

Air Blank

Cal Check

Air Blank Cal Check Stats

Average

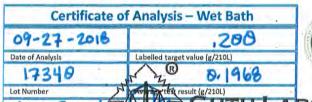
Rel Std Dev(%) 0,5184

Ted L. Pauley, President GUTH LABORATORIES, INC.

NIST Traceability:

Testing was conducted using Cerilliant Reference Standard lot number FN04271602 whose values are traceable to NIST.

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



BOT Technician Name and Signature

RLPHA INSTRUMENT

Model 8000

09/27/2018

Test

Air Blank

Cal Check

air Blank

al Check

ir Blank

'al Check

lir Blank

'al Check

tir Blank

Std Deu

al Check Stats Average

Rel Std Dev(%)

Intoxilyzer - Alcohol Analyzer

g/210L

0.000

0.196

0.000

0.196

0.000

0.197

0.000

0.197

0.197

0.000

0.197

0.000

0.197

0.000

0.197

0.000

0.197

0.000

0.197

0.000

0.1968

0.0004

0.2142

SN 80-002591

Time

15:27

15:28

15:29

15:29

15:30

15:31

15:31

15:32

15:33

15:33

15:34

15:35

15:35

15:36

15:36

15:37

15:38

15:38

15:39

15:40

Tion in the second

GUTH LABORATORIES, INC.

HARRISBURG, PA 17111- 4511 TELEPHONE: 717-564-5470

BRT Form 6.0

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

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 17340 of

Alcohol Reference Solution for Simulator were analyzed by
gas chromatography on October 10, 2017, using a Perkin Elmer Gas
Chromatograph Autosystem XL S/N: 610N9030209, and found to contain
0.2410% (w/vol) ethyl alcohol. The expiration date for this lot
number is October 9, 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.