

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



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

BENCH CHECK DATE: 11-22-2017

SERIAL: 80-004881

DOCUMENTATION WITHIN SERVICE PACKET:

- BOT Certificate of Calibration and Operation
- CMI Certificate of Calibration 10-11-2017
- Bench Check
- Bench Check Technician's Report
- BOT Dry Gas Certificate of Analysis
- CMI Service Evaluation Form
- CMI Work Order
- Mock Subject Test
- BOT Certificates of Analysis on Certified Solutions (4)

Date:

Re: Request for Log of Test on Intoxilyzer 8000

Name:

Dear Sir:

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

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

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

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

Sincerely,



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

Certificate of Calibration

This is to certify the calibration of **Intoxilyzer**® serial number 80-004881, 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 Oct 11, 2017

Signed M Marshall

Technician



316 East 9th Street
Owensboro, KY 42303
USA

Part No. 650517 Rev.A

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

BENCH CHECK DATE 11/22/2017	TIME PROCEDURE BEGAN 14:27	INSTRUMENT LOCATION 80-004881
INSTRUMENT TYPE Intoxilyzer	INSTRUMENT MODEL I-8000	INSTRUMENT SERIAL NUMBER 80-004881

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

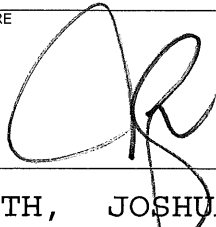
Duplicate Breath Sampling Results

Value	Test 1	Test 2	Control Test
.02	0.020	0.019	0.020
.04	0.039	0.039	0.041
.10	0.091	0.090	0.094
.20	0.193	0.193	0.198

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 11-22-2017
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: 11 / 22 / 17 Start Time: 1415 End Time: 1550

INSTRUMENT

Intoxilyzer Model Serial #
 8000 80-004881

GAS CANISTER

LOT # EXP Date
29017080A2 #805 12-5-2019

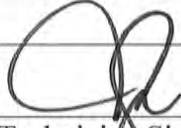
REFERENCE

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>11-17-17</u>	<u>11-17-17</u>	<u>11-17-17</u>	<u>11-17-17</u>

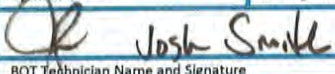
REASON FOR BENCH CHECK

- POST REPAIR
 CYLINDER REPLACEMENT
 TROUBLESHOOTING
 ROUTINE MAINTENANCE

COMMENTS

 16837
 Technician Signature / Permit #

Josh Smith
 Printed Name

Certificate of Analysis – Dry Gas.	
11-22-17	.000
Date of Analysis	Labeled target value (g/210L)
005	.0824
Cylinder #	Average test result
 BOT Technician Name and Signature	
In accordance with BOT Policy and Procedure Statement BRT-2.1.0, Maintenance, the above referenced dry gas cylinder is suitable for use as an external reference.	



ALPHA INSTRUMENT
 Intoxilyzer - Alcohol Analyzer
 Model 8000 SN 80-002591
 11/22/2017 14:05

Test	g/210L	Time
Air Blank	0.000	14:05
Cal Check	0.082	14:06
Air Blank	0.000	14:06
Cal Check	0.082	14:07
Air Blank	0.000	14:07
Cal Check	0.082	14:07
Air Blank	0.000	14:08
Cal Check	0.082	14:08
Air Blank	0.000	14:09
Cal Check	0.082	14:09
Air Blank	0.000	14:10
Cal Check	0.082	14:10
Air Blank	0.000	14:11
Cal Check	0.083	14:11
Air Blank	0.000	14:11
Cal Check	0.083	14:12
Air Blank	0.000	14:12
Cal Check	0.084	14:13
Air Blank	0.000	14:13
Cal Check	0.082	14:13
Air Blank	0.000	14:14
Cal Check Stats		
Average	0.0824	
Std Dev	0.0006	
Rel Std Dev(%)	0.8485	

Certificate of Analysis

Certificate ID: 10597
Part #: BAC105L080T
Cylinder Size: 105L
Lot Number: 29017080A2 ✓
Expiration: 12/5/2019 ✓

REC'D
11-16-17


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 42301
 Phone 866-835-0690
www.alcoholtest.com


 Operator's Signature 16837

*NIST Traceable Reference Material
 Cylinder No. CC274523 / Job No. 09160306
 Certified 362.7 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

11-01-17
 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.



SERVICE WORK ORDER

DATE	7-17-17
RCVD VIA	UPS

316 E. 9th St., Owensboro KY 42303
 Phone 866-835-0690
 Fax: 270-685-6268

400510

BILL TO:

ATTN:

CITY STATE ZIP

CUSTOMER NO. 731362

PHONE

SHIP TO: UK Board of Tests

ATTN:

3600 N. Mc King
 Bldg 9

CITY STATE ZIP
 UK UK 73111

PHONE 405-425-2460

FAX 405-425-2490

MODEL # 8000	SERIAL # 80-0041881	0024800K	BILL CODE 1
EXTRA PARTS RCVD BT, gas shelf, no battery			
DESCRIPTION OF PROBLEM Flow sensor R: value low.			

Infrared / Fuel Cell
 PRELIMINARY TEST INFORMATION

Flow sensor R: value 79-81. Breath hose
 O-ring cracked. DVM's out of spec. VERIFIED PROBLEM? Yes

BATTERY, EXT NA V; INT 2.99V

PARTS USED		
QTY	PART NO.	DESCRIPTION
1	210120	Sensor, SMD
1	402565	O-ring

WORK PERFORMED:

Replaced flow sensor and cracked o-ring.
 Reset preamp gains to bring DVM's into spec.

Miscellaneous
 PRELIMINARY TEST INFORMATION

WORK PERFORMED:

Box

REPAIR	CAL. ADJ.	CALIBRATION	FINAL
GTW	MT	MMMM	MMMM
1/2 HOURS	HOURS	HOURS	HOURS
4	.5	.5	.5
DATE	DATE	DATE	DATE
Oct 10, 2017	Oct 11, 2017	Oct 11, 2017	Oct 11, 2017

SHIPPING STICKER HERE

SPECIAL SHIPPING INSTRUCTIONS

OFFICER'S AFFIDAVIT AND NOTICE OF REVOCATION/DISQUALIFICATION

Section 1

ARREST DATE 11/22/2017		ARREST TIME 1500		COUNTY # 55	CITY # 83	CITATION # MOCK	
ARREST LOCATION MOCK				CITY		COUNTY OKLAHOMA	
SUBJECT NAME MOCK, SUBJECT TEST				DATE OF BIRTH 08/09/1961	SEX M	RACE W	HEIGHT 510
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. POST REPAIR. 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 80-004881	SPECIALIST BOARD OF TESTS																																					
STANDARD Dry		TARGET VALUE 0.080	PERMIT NUMBER 16837																																					
MANUFACTURER ILMO		LOT # 29017080A2	DATE CYLINDER INSTALLED 11/22/2017	DATE CYLINDER EXPIRES 12/05/2019																																				
OBSERVATION START 1510	TEST DATE 11/22/2017	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>15:47</td></tr> <tr><td>Breath Volume</td><td>1.902 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>15:49</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>15:50</td></tr> <tr><td>Breath Volume</td><td>1.218 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>0.08</td><td>15:51</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	15:47	Breath Volume	1.902 LITERS		Air Blank	0.00	15:47	Wait		15:49	Air Blank	0.00	15:49	Subject Test	0.00	15:50	Breath Volume	1.218 LITERS		Air Blank	0.00	15:50	Cal Check	0.08	15:51	Air Blank	0.00	15:51
Test	g/210L	Time																																						
Air Blank	0.00	15:46																																						
Subject Test	0.00	15:47																																						
Breath Volume	1.902 LITERS																																							
Air Blank	0.00	15:47																																						
Wait		15:49																																						
Air Blank	0.00	15:49																																						
Subject Test	0.00	15:50																																						
Breath Volume	1.218 LITERS																																							
Air Blank	0.00	15:50																																						
Cal Check	0.08	15:51																																						
Air Blank	0.00	15:51																																						
RESULT TABLE			<div style="border: 1px solid black; padding: 5px; display: inline-block;"> Test Result BrAC g/210L 0.00 </div>																																					
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>NAME</td> <td colspan="2">SMITH, JOSHUA</td> </tr> <tr> <td>BADGE #</td> <td>0000000435</td> <td>PERMIT # 0000016837</td> </tr> <tr> <td>AGENCY</td> <td colspan="2">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																																							

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

Section 3

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: **11/22/2017** 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: **11/22/2017** 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/DPS COPY
BOT Form AFF01 07/2008

OFFICER'S AFFIDAVIT AND NOTICE OF REVOCAATION/DISQUALIFICATION

Section 1

ARREST DATE 11/22/2017		ARREST TIME 1500		COUNTY # 55		CITY # 83		CITATION # MOCK	
ARREST LOCATION MOCK				CITY			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. POST REPAIR. 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 80-004881		SPECIALIST BOARD OF TESTS																																			
STANDARD Dry		TARGET VALUE 0.080		PERMIT NUMBER 16837																																			
MANUFACTURER ILMO		LOT # 29017080A2		DATE CYLINDER INSTALLED 11/22/2017	DATE CYLINDER EXPIRES 12/05/2019																																		
OBSERVATION START 1510	TEST DATE 11/22/2017	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>15:47</td> </tr> <tr> <td style="padding-left: 20px;">Breath Volume</td> <td>1.902 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>15:49</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>15:50</td> </tr> <tr> <td style="padding-left: 20px;">Breath Volume</td> <td>1.218 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>0.08</td> <td>15:51</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	15:47	Breath Volume	1.902 LITERS		Air Blank	0.00	15:47	Wait		15:49	Air Blank	0.00	15:49	Subject Test	0.00	15:50	Breath Volume	1.218 LITERS		Air Blank	0.00	15:50	Cal Check	0.08	15:51	Air Blank
Test	g/210L	Time																																					
Air Blank	0.00	15:46																																					
Subject Test	0.00	15:47																																					
Breath Volume	1.902 LITERS																																						
Air Blank	0.00	15:47																																					
Wait		15:49																																					
Air Blank	0.00	15:49																																					
Subject Test	0.00	15:50																																					
Breath Volume	1.218 LITERS																																						
Air Blank	0.00	15:50																																					
Cal Check	0.08	15:51																																					
Air Blank	0.00	15:51																																					
NAME SMITH, JOSHUA			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="text-align: center;">Test Result BrAC g/210L</td> </tr> <tr> <td colspan="2" style="text-align: center; font-size: 24pt;">0.00</td> </tr> </table>	Test Result BrAC g/210L		0.00																																	
Test Result BrAC g/210L																																							
0.00																																							
BADGE # 0000000435	PERMIT # 0000016837																																						
AGENCY BOARD OF TESTS																																							

EFFECTIVE THIRTY (30) DAYS FROM DATE SERVED. Notice of Revocation is given that your driver's license is revoked or denied for a period of one hundred eighty (180) days or more, if you refused or failed the state's test(s). In addition, your commercial driving privilege in this state will be disqualified if you refused or failed the state's test(s) (operating a CMV or CDL holder) OR a test result of .04 or more while operating a commercial motor vehicle. 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

Section 3

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: **11/22/2017** 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: **11/22/2017** Place (location when signed): _____ Signature of arresting officer: _____

NAME SMITH, JOSHUA		AGENCY BOARD OF TESTS	
BADGE 0000000435	AGENCY ADDRESS INTER-AGENCY		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	Labelled target value (g/210L)
16400	.0195
Lot Number	Average test result (g/210L)
Jbst Smith	
BOT Technician Name and Signature	



GUTH LABORATORIES, INC.
 1600 N. 10th St., P.O. Box 100, Allentown, 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.

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.

#16837

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	



GUTH LABORATORIES, INC.
 BURG, 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

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 SN 80-004923
 03/08/2017 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.


[Signature]
 Ted L. Pauley, President
 GUTH LABORATORIES, INC.

[Signature]
#16837

NIST Traceability:
 Testing was conducted using Cerilliant Reference Standard lot number **FN1218501** 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)
 BOT Technician Name and Signature	


BRT Form 6.0

GUTH LABORATORIES, INC.

17111-4511 • TELEPHONE: 717-564-5470

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


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

SN 80-004923
16:25

Certified Alcohol Reference Solution for Simulator

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, President
GUTH LABORATORIES, INC.


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	1.20
Date of Analysis	Labelled target value (g/210L)
17090	1.2045
Lot Number	Average test result (g/210L)
 Josh Smith	
BOT Technician Name and Signature	




LABORATORIES, INC.

HARRISBURG, 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.

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

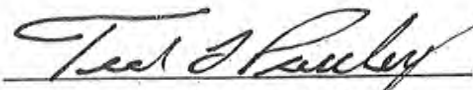
Certified Alcohol Reference Solution for Simulator

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.



Ted L. Pauley, President
GUTH LABORATORIES, INC.


Operator's Signature 16837

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.