

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 *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:

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

This packet consists of pages. Signed

Name of Position: Director/Records Custodian

Date of Attestation:



Board of Tests for Alcohol and Drug Influence Enhancing public safety by ensuring the accuracy and scientific releability of blood and break testing



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

BENCH CHECK DATE: 05-19-2021

SERIAL: 80-004882

DOCUMENTATION WITHIN SERVICE PACKET:

- BOT Certificate of Calibration and Operation
- <u>CMI Certificate of Calibration 05-07-2021</u>
- Bench Check
- Bench Check Technician's Report
- BOT Dry Gas Certificate of Analysis
- <u>CMI Service Evaluation Form</u>
- <u>CMI Work Order</u>
- 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** <u>80-004882,</u> 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	11-24-09
Board of Tests Bench Check	01-27-10
Board of Tests Bench Check	10-05-11
Board of Tests Bench Check	11-08-12
Board of Tests Bench Check	08-05-13
Board of Tests Bench Check	06-17-15
Board of Tests Bench Check	12-03-15
Board of Tests Bench Check	05-23-17
Board of Tests Bench Check	05-08-19
Manufacturer Calibration	05-07-21
Board of Tests Bench Check	05-19-21



Presentation of this form certifies that the Intoxilyzer, SN: <u>80-004882</u>, 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,

O. pohr &Blackelun

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 80-004882, manufactured by CMI Inc., a subsidiary of MPD, Inc. of Owensboro, Kentucky, was tested and found to conform to the National Highway Traffic Safety Administration (NHTSA) Standard for Devices to Measure Breath Alcohol (Federal Register, Vol.58 No.179, pp 48705-48710, Sept. 17, 1993) for accuracy and precision. Reference materials are traceable through the National Institute of Standards and Technology (NIST) to the International System of Units (SI).

Date <u>May 07,2021</u> Signed <u>Alie</u> Joler

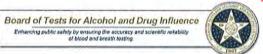
Technician

316 East 9th Street Owensboro, KY 42303 USA

Part No. 650517 Rev.A

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

ENCH CHECK DATE	TIME PROCEDURE BEGAN		STRUMENT LOCATION	2	
STRUMENT TYPE Intoxilyzer	INSTRUMEN			INSTRUMENT SE	
1		TEST RE	SULTS		
Diagnosti	cs				
PASS					
Mouth Alcoho					
PASS					
RFI Tes					
PASS		Dur	licate Breath	Sampling Re	sults
Abort Te	st			y	1120 1000
PASS		Value	Test 1	Test 2	Control Test
Improper Sam					
PASS		.02	0.017	0.018	0.018
Interferent Dete		.04	0.036	0.036	0.037
PASS		.10	0.099	0.097	0.098
No Sample Giv PASS	en Test	.20	0.197	0.194	0.194
Insufficient Sam PASS	nple Test		PA	SS	
Air Blank Contami PASS	nation Test				
Range Exceed PASS	ed Test				
		Dell'en el			
		CERTIFYING T			Anna Albert
I swear under penalty the Intoxliyzer Bench	y of perjury that in	regards to the	above listed i	instrument, I	have complied
	II Checking Floced	ure approved	by the State o		
				DAIL	
authen	2 2	3020		3	/19/200
APE, CHRISTO	PHER			PERMIT #	023020



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

BENCH CHECK TECHNICIAN'S REPORT

Date: 05/19/2021	Start Time:	11:20 End T	ime: <u>12:25</u>
INSTRUMENT			
Intoxilyzer Model		Serial #	
8000			04882
GAS CANISTER		1	
LOT #		EXP Date	
03521080A3-011		The second se	/2023
REFERENCE			
	Simula	tor Model	
Guth 2100	Guth 2100	Guth 2100	Guth 2100
		Serial #	
DR2834	DR3700	DR2455	DR3470
	Con	<u>centration</u>	
.02	.04	.10	.20
		_OT #	
20070	20060	20190	20160
	Manufa	actured Date	
02/13/2020	02/10/2020	04/06/2020	03/18/2020
	Expir	ation Date	
02/13/2022	02/10/2022	04/06/2022	03/18/2022
	Solution C	ommission Date	
5/3/2021	5/3/2021	5/17/2021	5/10/2021

REASON FOR BENCH CHECK

ØPOST REPAIR ØCYLINDER REPLACEMENT

TROUBLESHOOTING ROUTINE MAINTENANCE

COMMENTS

CMI re	placed	flow	sensor
--------	--------	------	--------

200

Technician Signature / Permit #

Christopher Pape #23020 Printed Name 7/16

Certificate	of Analysis – Dry Gas	- Contraction of the second seco
3/10/2021 Date of Analysis	0.080 Labelled target value (g/210L)	
O Cylinder #	D.079 Average test result	
Christopher Pa BOTTechnician Name and Signat	second second to the second of the second seco	
in accordance with BOT Poll	cy and Procedure Statement BRT-2.2.0, Moin suitable for use as an external refe rers with	Itenance, the above RETORNOR OF THE ADOVE RETORNOR OF THE ADOVE R

ALPHR INSTRUMENT 2 Intoxilyzer - Alcohol Analyzer Model 8000 SN 80-004923 03/10/2021 15:52

8/16

Test	g/210L	Time
Air Blank	0.000	15:53
Cal Check	0.079	15:53
Air Blank	0.000	15:53
Cal Check	0.079	15:54
Air Blank	0.000	15:54
Cal Check	0.080	15:55
Air Blank	0.000	15:55
Cal Check	0.080	15:55
Air Blank	0.000	15:56
Cal Check	0.080	15:56
Air Blank	0,000	15:57
Cal Check	0.080	15:57
Air Blank	0.000	15:58
Cal Check	0.079	15:58
Air Blank	0.000	15:59
Cal Check	0.079	15:59
Air Blank	0.000	15:59
Cal Check	0.079	16:00
Air Blank	0.000	16:00
Cal Check	0.079	16:01
Air Blank	0.000	16:01
Cal Check Stats		
Average	0.0794	
Std Deu	0.0005	
Rel Std Deu(%)	0.6503	

Certificate of Analysis

Certificate ID: Part #: **Cylinder Size:** Lot Number: Expiration:

BAC105L080T 105L 03521080A3 3/5/2023-

13683

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

105 Liters @ 1000 psig 70°F (21°C) Contents: Component: Ethanol 208 ppm Nitrogen Balance

Analytical Reported Accuracy Concentration: (U, k=2):

Analytical Method:

+/-0.002 BAC(G/210L) NDIR [5.2 ppm]

Distributed by:

CMI Inc. 316 East Ninth St Owensboro, KY · Phone 866-835-0 www.alcoholtest.

area to exceed 52 °C (125 °F).

Store in dry area, away from sources of heat, ignition and direct sunlight. Do not allow storage

Operator's Signature

*Traceable to: Certified Reference Material - 262.4 µmol/mol Ethanol in Nitrogen - Serial No. GN0015026 Lot No. 050319E11

lac

Specialty Bas Lab Tech



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.

ISO/IEC 17025:2017 Accredited Laboratory

02-23-2021

Issuance Date

CMI INC. Service Evaluation Form

This form MUST be completed and enclosed with instrument to be serviced. Failure to complete and return this form may cause delays in service.

(Note: please ship items in their original shipping container(s) or a similar protective box.)

1. 2. C.		Deres and a constant	100 a 10 b b.	
1. Contact informa	tion: Custo	mer Number	731362	(contact Customer Service)
Name: Board	d of Tests		Phone: (405)	425 2460
Fax: (405) 425 :	2490	Email:	christopher.pape	@bot.ok.gov
2. Bill to Address:	Board of Tests 3600 N ML King OKC, OK 73111		Ship to Address:	Board of Tests 3600 N ML King, Bldg 9 OKC, OK 73111
3. Serial Number:	80-004882		Instrument Model:	Intoxilyzer 500 / 8000
I Authorize Rep	airs Up To: 🏼	All 🗌\$250		rs with instrument!***
	i Humbol (unuo	i a copy of t		
Authorized By:			Ship	to:
Chris Pape		Deseth Tere		
		Breath les	ting Admin	
Name (Please Prin	nt)	Title		, Inc
Name (Please Prin	nt)	Title	CMI	, Inc n: Service Dept.
Name (Please Prin Signature	nt)		CMI Attr	
Signature	a	Title <u>1/27/2021</u> Date	CMI Attr 316	n: Service Dept.
Signature Ca	ll: <u>405-425-2460 d</u> d estimate befor	Title <u>1/27/2021</u> Date or email	CMI Attr 316 Ow	n: Service Dept. East Ninth Street
Signature Ca No, please send	II: <u>405-425-2460 d</u> d estimate befor	Title <u>1/27/2021</u> Date or email e repairs are	CMI Attr 316 Ow made.	n: Service Dept. East Ninth Street



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

Ship To:

USA

Po Box 36307

Oklahoma Board Of Tests DNU

3600 N MI King Blvd Blg 9

Oklahoma City OK 73111

Phone: 405-425-2424

SERVICE WORK ORDER

405705

BILL CODE: Out of Warranty

Bill To:

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

Serial Number: 80-004882

MODEL #: 002480OK EXTRA PARTS RCVD:

BH,KB W/COVER,BATTERY(B11-2485),GAS SHELF,GAS REG-GR4882

DESCRIPTION OF PROBLEM

FLOW SENSOR VALUE AT 112. PLEASE REPLACE SENSOR.

WORK PERFORMED:

Flow sensor /R value / low; soleniod / had leak; o-rings / cracked; replaced parts listed; calibration and final tested.

PARTS USED

to the second product of the second	

Seq. No.	Part	Description	Quantity
50	530030	TUBING, TYGON, .375IDx.562OD	2.00 IN
60	471201	O-RING,BUNA-N,-008,3/16inx5/16	1.00 EA
70	021357	SOLENOID ASSY, 18000	1.00 EA
80	650517	CERTIFICATE OF CALIBRATION	2.00 EA
90	441169	COVER DUST,5/8in x 1/2in	1.00 EA
100	470145	CAP, PLASTIC, .25IDx.50LG, RED	3.00 EA
110	470154	CAP,PLSTC,.406IDx.438562,RED	1.00 EA
120	470218	SEAL, TAMPER EVIDENT, SERVICE	1.00 EA
140	210120	SENSOR, SMD, PRESSURE	1.00 EA
150	470202	FILTER,FOAM,1.85x2.20	1.00 EA
160	402565	O-RING, NEOPRENE, .301IDx.06THK	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

DATE: 2/3/2021

SCTicket: SDH-PROD:Ver1.7 (2020-01-16)

Technician Name: Leanna Shelnutt

SRV4057050001

OFFICER'S AFFIDAVIT AND NOTICE OF REVOCATION/DISQUALIFICATION

11/16

ARREST TIME		COUNTY#	CIT	Y#	CI	TATION #		_	
		CITY						A la cuito libro	AMA
/ERNE					961	SEX	RACE	HEIGHT	
R KING A	OKLAH	OMA CITY			1.12		1	ZIP COL	
			19	STATE OK	CLASS		RESTR	CTIONS	ENDORSEMENT
MODEL								N	PLACARD N
amed person was arrested, and I had r r public place, or upon a private road, s ances as prohibited by law.	easonable grounds t street, alley or lane w	to believe the person v hich provides access	vas drivir to one or	ng or in actual more single	l physical or multi-fa	control of mily dwelli	a motor ve ng within i	hicle upor his state v	a public road. while under the
	I145 VERNE R KING A MODEL MOCK amed person was arrested, and I had r r public place, or upon a private road, s	I 1 1 4 5 VERNE R KING A OKLAH MODEL MODEL MOCK amed person was arrested, and I had reasonable grounds r public place, or upon a private road, street, alley or lane w	1145 55 VERNE CITY CR KING A CITY OKLAHOMA CITY EXPIRATION DATE 06/30/20 MOCEL MOCK MOCK	1145 55 /ERNE Date o 08/ /R KING A CITY OKLAHOMA CITY EXPIRATION DATE 06/30/2019 MODEL MOCK Tat MOCK amed person was arrested, and I had reasonable grounds to believe the person was drivit r public place, or upon a private road, street, alley or lane which provides access to one or	1145 55 CITY DATE OF BIRTH 08/09/1 VERNE CITY CITY CITY CITY CITY CITY CITY CITY CITY OKLAHOMA CITY EXPIRATION DATE 06/30/2019 OK MODEL MOCK TAG # MOCK AMOCK amed person was arrested, and I had reasonable grounds to believe the person was driving or in actua r public place, or upon a private road, street, alley or lane which provides access to one or more single	1145 55 CITY VERNE DATE OF BIRTH 08/09/1961 CR KING A CITY OKLAHOMA CITY CITY STATE 06/30/2019 MODEL MOCK TAG # MOCK MOCK TAG # MOCK	1145 55 VERNE DATE OF BIRTH 08/09/1961 VERNE OKLAHOMA CITY CITY STATE OK CITY STATE OK CITY OKLAHOMA CITY CITY OK CITY STATE OK MODEL OG/30/2019 MOCK TAG # MOCK MOCK TAG # MOCK amed person was arrested, and I had reasonable grounds to believe the person was driving or in actual physical control of r public place, or upon a private road, street, alley or lane which provides access to one or more single or motif-family dwelli	1145 55 CITY COUNT VERNE DATE OF BIRTH 08/09/1961 SEX M RACE M ZR KING A CITY OKLAHOMA CITY STATE OK MODEL OKLAHOMA CITY OK MODEL 06/30/2019 OK RESTRI OK MODEL TAG # MOCK MOCK STATE OK amed person was arrested, and I had reasonable grounds to believe the person was driving or in actual physical control of a motor ver r public place, or upon a private road, street, alley or lane which provides access to one or more single or multi-family dwelling within 1	1145 55 CITY COUNTY OKLAHO VERNE DATE OF BIRTH 08/09/1961 SEX M W 510 CITY OKLAHOMA W 510 CITY OKLAHOMA OKLAHOMA CITY STATE OK CITY OKLAHOMA CITY CITY OKLAHOMA CITY OKLAHOMA CITY OK MODEL OG/30/2019 MOCK TAG # MOCK MOCK MOCK amed person was arrested, and I had reasonable grounds to believe the person was driving or in actual physical control of a motor vehicle upor r 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 vehicle upon

THE PERSON WAS INFORMED OF THE IMPLIED CONSENT TEST REQUEST

QUIPMENT	the property of the property of the		NUMBER		EST AND MAINTENANCE RECOR	D.	Section :
I-8000			-004882	BOARD	OF TESTS		
TANDARD		100	TARGET VAL		PERMIT NUMBER		
Dry			0.080)	23020		
MANUFACTURER	1.		LOT #		DATE CYLINDER INSTALLED	DATE CYLINDER EX	
ILMO			0352:	L080A3	05/19/2021	03/05/2	023
1150 DESERVATION START TEST	5/19/2021	G	A 15-min	ute (or greate	r) deprivation/observatio	m	
ESULT TABLE	5/19/2021	G			prior to and continuing		
					est administration.	THI	STATE
Test	g/210L	Time		Charles of the Contract of the			*** 0
Air Blank	0.00	12:16	I adminis	tered said l	Breath-Alcohol Test	in 3 ***	1+++10
Subject Test	0.00	12:16	The second s			1 - 00 6	KA ST.E
Breath Volume	2.183 LITERS				e applicable operatir	Ig H **	A
Air Blank	0.00	12:17	proc	edure of th	ne Board of Tests.	4 ***	*** [8]
Wait		12:19	/	-1-1	~ ~ ~	F + 1	A
Air Blank	0.00	12:19	1/1	111.14	500/	0 +*	***
Subject Test	0.00	12:19	Und	1019.	R		
Breath Volume	2.117 LITERS		SIGNATURE	OF OPERATOR			907
Air Blank	0.00	12:20		V		and the second	
Cal Check	0.08	12:20	NAME		N ²	Test	Result
Air Blank	0.00	12:21		HRISTOPHI			
			BADGE #		PERMIT #	Brac	g/210L
			000000	0484	0000023020		
			And the second se		0000025020		00
FECTIVE THIRTY (30) DAY	YS FROM DATE SERVED.	Notice of Revoc	ation is given that	F TESTS	e is revoked or denied for a perio	d of one hundred eighty (180)	Section
ys or more, if you refused on berating a CMV or CDL hold a result of this arrest by filin u may be eligible to partice vocation as a result of this quest IDAP within thirty (3 ERVING OF NOTICE: countability Program to	r failed the state's test(s). I (er) OR a test result of .04 c g a petition in the District C signate in the Impaired Driv arrest from appearing of 0) days of the date listed I personally hand deliv o the person named ir	n addition, your co or more while oper court of the County ver Accountability n your driving red below. Mail the vered a copy of Section 1 abo	BOARD C attion is given that y immercial driving pr ating a commercial in which you were y Program (IDAP) a sord. Participation request for IDAP to f the above conti- ve.	F TESTS your driver's licens ivilege in this state motor vehicle. Yo arrested. Your pe indministered by t in IDAP may red the Department		d of one hundred eighty (180) or failed the state's test(s) inction against your driver licen)) days of the date listed below (DPS). Completion of IDAP be required to pay to the S 415, Oklahoma City, OK 731	Section se may prevent a tate. You must 36.
ys or more, if you refused on berating a CMV or CDL hold a result of this arrest by filin u may be eligible to partice vocation as a result of this quest IDAP within thirty (3 ERVING OF NOTICE: countability Program to	r failed the state's test(s). I (er) OR a test result of .04 c g a petition in the District C signate in the Impaired Driv arrest from appearing of 0) days of the date listed I personally hand deliv o the person named ir	n addition, your co or more while oper court of the County ver Accountability n your driving red below. Mail the vered a copy of Section 1 abo	BOARD C attion is given that y immercial driving pr ating a commercial in which you were y Program (IDAP) a sord. Participation request for IDAP to f the above conti- ve.	F TESTS your driver's licens ivilege in this state motor vehicle. Yo arrested. Your pe indministered by t in IDAP may red the Department	e is revoked or denied for a perio will be disqualified if you refused u may appeal any Departmental a tition must be filed within thirty (30 he Department of Public Safety uce the amount of fees you will of Public Safety at P.O. Box 11	d of one hundred eighty (180) or failed the state's test(s) inction against your driver licen)) days of the date listed below (DPS). Completion of IDAP be required to pay to the S 415, Oklahoma City, OK 731	Section se may prevent a tate. You must 36.
ys or more, if you refused on berating a CMV or CDL hold a result of this arrest by filin bu may be eligible to partice vocation as a result of this quest IDAP within thirty (3 ERVING OF NOTICE: countability Program to ate served: 05/1	r failed the state's test(s). I ter) OR a test result of .04 c g a petition in the District C sarrest from appearing or 0) days of the date listed I personally hand deliv o the person named in 9/2021 Sig	n addition, your co or more while oper court of the County ver Accountability n your driving red below. Mail the vered a copy of a Section 1 abo	BOARD C ation is given that y immercial driving pr ating a commercial in which you were y Program (IDAP) a sord. Participation request for IDAP to f the above cont ve.	OF TESTS your driver's licens ivilege in this state motor vehicle. Yo arrested. Your pe diministered by t In IDAP may red the Department aining the Notic	e is revoked or denied for a perio will be disqualified if you refused u may appeal any Departmental a tition must be filed within thirty (30 he Department of Public Safety uce the amount of fees you will of Public Safety at P.O. Box 11	d of one hundred eighty (180) or failed the state's test(s) inction against your driver licen 0) days of the date listed below (DPS). Completion of IDAP be required to pay to the S 415, Oklahoma City, OK 731 ptice of Department Impa Badge #:	Section se may prevent a tate. You must 36. lired Driving
ivs or more, if you refused on perating a CMV or CDL hold a result of this arrest by filin vocation as a result of the quest IDAP within thirty (3 ERVING OF NOTICE: ccountability Program to ate served: 05/11 accordance with Title ate: 05/19/202	r failed the state's test(s). I er) OR a test result of .04 c ig a petition in the District C cipate in the Impaired Drive a arrest from appearing or 0) days of the date listed I personally hand delli o the person named in 9/2021 Sig 12 O.S. Section 426, "	n addition, your co or more while oper Sourt of the County ver Accountability n your driving red below. Mail the i vered a copy of a Section 1 abo nature of office I state under po	BOARD C ation is given that y immercial driving pr ating a commercial in which you were y Program (IDAP) a sord. Participation request for IDAP to f the above cont ve.	OF TESTS your driver's licens ivilege in this state motor vehicle. Yo arrested. Your pe diministered by t In IDAP may red the Department aining the Notic	e is revoked or denied for a perio will be disqualified if you refused u may appeal any Departmental a tition must be filed within thirty (30 he Department of Public Safety uce the amount of fees you wil of Public Safety at P.O. Box 11 ce of Revocation and the No	d of one hundred eighty (180) or failed the state's test(s) inction against your driver licen b) days of the date listed below (DPS). Completion of IDAP to be required to pay to the S 415, Oklahoma City, OK 731 bitce of Department Impa Badge #: agoing is true and correc	Section se may prevent a tate. You must 36. lired Driving
ys or more, if you refused on berating a CMV or CDL hold a result of this arrest by filin bu may be eligible to partic vocation as a result of this quest IDAP within thirty (3 ERVING OF NOTICE: ccountability Program to ate served: 05/11 accordance with Title 1 ate: 05/19/202	r failed the state's test(s). I er) OR a test result of .04 c ig a petition in the District C cipate in the Impaired Drive arrest from appearing or 0) days of the date listed I personally hand delli o the person named in 9/2021 Sig 12 O.S. Section 426, " 21 Place (location w	n addition, your co or more while oper Sourt of the County ver Accountability n your driving red below. Mail the i vered a copy of a Section 1 abo nature of office I state under po	BOARD C ation is given that y immercial driving pr ating a commercial in which you were y Program (IDAP) a sord. Participation request for IDAP to f the above cont ve.	PF TESTS your driver's licens ivilege in this state motor vehicle. Yo arrested. Your pe doministered by t In IDAP may red the Department aining the Notic y under the law	e is revoked or denied for a perio will be disqualified if you refused u may appeal any Departmental a tition must be filed within thirty (3) the Department of Public Safety uce the amount of fees you will of Public Safety at P.O. Box 11 ce of Revocation and the No ws of Oklahoma that the fore Signature of arresting o	d of one hundred eighty (180) or failed the state's test(s) inction against your driver licen b) days of the date listed below (DPS). Completion of IDAP to be required to pay to the S 415, Oklahoma City, OK 731 bitce of Department Impa Badge #: agoing is true and correc	Section se may prevent a tate. You must 36. lired Driving
ys or more, if you refused on ierating a CMV or CDL hold a result of this arrest by filin u may be eligible to partic rocation as a result of this juest IDAP within thirty (3 RVING OF NOTICE: accountability Program to the served: $05/11$ accordance with Title f the: $05/19/202$ ME PAPE, CHRID DGE	r failed the state's test(s). I er) OR a test result of .04 c ig a petition in the District C cipate in the Impaired Drive a arrest from appearing or 0) days of the date listed I personally hand delli o the person named in 9/2021 Sig 12 O.S. Section 426, "	n addition, your cc or more while oper court of the County ver Accountability n your driving rec below. Mail the i vered a copy of a Section 1 abo nature of office I state under pothen hen signed):	BOARD C ation is given that y immercial driving pr ating a commercial in which you were y Program (IDAP) a sord. Participation request for IDAP to f the above cont ve.	DF TESTS your driver's licens ivilege in this state motor vehicle. Yo arrested. Your pe doministered by t In IDAP may red the Department aining the Notic	e is revoked or denied for a perio will be disqualified if you refused u may appeal any Departmental a titlon must be filed within thirty (3) the Department of Public Safety uce the amount of fees you will of Public Safety at P.O. Box 11 ce of Revocation and the No ws of Oklahoma that the fore Signature of arresting o	d of one hundred eighty (180) or failed the state's test(s) inction against your driver licen b) days of the date listed below (DPS). Completion of IDAP to be required to pay to the S 415, Oklahoma City, OK 731 bitce of Department Impa Badge #: agoing is true and correc	Section se may prevent a tate. You must 36. aired Driving t," Section
ys or more, if you refused on ierating a CMV or CDL hold a result of this arrest by filin u may be eligible to partic rocation as a result of this juest IDAP within thirty (3 RVING OF NOTICE: accountability Program to the served: $05/11$ accordance with Title the: $05/19/202$ ME PAPE, CHRI DGE 0000000484	r failed the state's test(s). I er) OR a test result of .04 of g a petition in the District (cipate in the Impaired Drive a arrest from appearing or 0) days of the date listed I personally hand delling to the person named in 9/2021 Sig 12 O.S. Section 426, " 21. Place (location works) STOPHER [AGENCY ADDRESS	n addition, your cc or more while oper court of the County ver Accountability n your driving rec below. Mail the i vered a copy of a Section 1 abo nature of office I state under pothen hen signed):	BOARD C ation is given that y immercial driving pr ating a commercial in which you were y Program (IDAP) a sord. Participation request for IDAP to f the above cont ve.	DF TESTS your driver's licens ivilege in this state motor vehicle. Yo arrested. Your pe doministered by t In IDAP may red the Department aining the Notic y under the law	e is revoked or denied for a perio will be disqualified if you refused u may appeal any Departmental a tition must be filed within thirty (31 the Department of Public Safety uce the amount of fees you will of Public Safety at P.O. Box 11 ce of Revocation and the No ws of Oklahoma that the fore Signature of arresting o O OF TESTS [ZIP CODE	d of one hundred eighty (180) or failed the state's test(s) iction against your driver licen (DPS). Completion of IDAP be required to pay to the S 415, Oklahoma City, OK 731 btice of Department Impa Badge #: egoing is true and correc fficer:	Section w. may prevent a tate. You must 36. aired Driving t," Section
ys or more, if you refused on berating a CMV or CDL hold a result of this arrest by filin vocation as a result of the vocation as a result of this vocation as a	r failed the state's test(s). I er) OR a test result of .04 of g a petition in the District (cipate in the Impaired Drive a arrest from appearing or 0) days of the date listed I personally hand delling to the person named in 9/2021 Sig 12 O.S. Section 426, " 21. Place (location works) STOPHER [AGENCY ADDRESS	n addition, your cc or more while oper court of the County ver Accountability n your driving rec below. Mail the i vered a copy of a Section 1 abo nature of office I state under pothen hen signed):	BOARD C ation is given that y immercial driving pr ating a commercial in which you were y Program (IDAP) a sord. Participation request for IDAP to f the above cont ve.	DF TESTS your driver's licens ivilege in this state motor vehicle. Yo arrested. Your pe doministered by t In IDAP may red the Department aining the Notic y under the law	e is revoked or denied for a perio will be disqualified if you refused u may appeal any Departmental a tition must be filed within thirty (31 the Department of Public Safety uce the amount of fees you will of Public Safety at P.O. Box 11 ce of Revocation and the No ws of Oklahoma that the fore Signature of arresting o O OF TESTS [ZIP CODE	d of one hundred eighty (180) or failed the state's test(s) iction against your driver licen (DPS). Completion of IDAP be required to pay to the S 415, Oklahoma City, OK 731 btice of Department Impa Badge #: egoing is true and correc fficer:	Section w. may prevent a tate. You must 36. aired Driving t," Section
ivys or more, if you refused on perating a CMV or CDL hold a result of this arrest by filin but may be eligible to particle vocation as a result of this guest IDAP within thirty (3 ERVING OF NOTICE: ccountability Program to ate served: 05/1 accordance with Title ate: 05/19/202 AME PAPE, CHRI ADGE 0000000484 THER WITNESSES: NAME 1	r failed the state's test(s). I er) OR a test result of .04 of g a petition in the District (cipate in the Impaired Drive a arrest from appearing or 0) days of the date listed I personally hand delling to the person named in 9/2021 Sig 12 O.S. Section 426, " 21. Place (location works) STOPHER [AGENCY ADDRESS	n addition, your cc or more while oper court of the County ver Accountability n your driving rec below. Mail the i vered a copy of a Section 1 abo nature of office I state under pothen hen signed):	BOARD C ation is given that y immercial driving pr aling a commercial in which you were y Program (IDAP) a cord. Participation request for IDAP to f the above cont ve.	DF TESTS your driver's licens ivilege in this state motor vehicle. Yo arrested. Your pe doministered by to in IDAP may red to the Department alining the Notic y under the law AGENCY BOARI	e is revoked or denied for a perio will be disqualified if you refused u may appeal any Departmental a tition must be filed within thirty (31 the Department of Public Safety uce the amount of fees you will of Public Safety at P.O. Box 11 ce of Revocation and the No ws of Oklahoma that the fore Signature of arresting o O OF TESTS [ZIP CODE	d of one hundred eighty (180) or failed the state's test(s) iction against your driver licen (DPS). Completion of IDAP be required to pay to the S 415, Oklahoma City, OK 731 otice of Department Impa Badge #: Badge #: fflcer: PHONE 4054252460	Section se may prevent a tate. You must 36. aired Driving t," Section
ys or more, if you refused on berating a CMV or CDL hold a result of this arrest by filin vocation as a result of the vocation as a result of this accordance within thirty (3 ERVING OF NOTICE: countability Program to accordance with Title accordance with Title accordance with Title DAPE, CHRI DAPE, CHRI DAPE, CHRI DAGE DO00000484 THER WITNESSES: NAME	r failed the state's test(s). I er) OR a test result of .04 of g a petition in the District (cipate in the Impaired Drive a arrest from appearing or 0) days of the date listed I personally hand delling to the person named in 9/2021 Sig 12 O.S. Section 426, " 21. Place (location works) STOPHER [AGENCY ADDRESS	n addition, your cc or more while oper court of the County ver Accountability n your driving rec below. Mail the i vered a copy of a Section 1 abo nature of office I state under pothen hen signed):	BOARD C ation is given that y immercial driving pr aling a commercial in which you were y Program (IDAP) a cord. Participation request for IDAP to f the above cont ve.	DF TESTS your driver's licens ivilege in this state motor vehicle. Yo arrested. Your pe doministered by to in IDAP may red to the Department alining the Notic y under the law AGENCY BOARI	e is revoked or denied for a perio will be disqualified if you refused u may appeal any Departmental a tition must be filed within thirty (31 the Department of Public Safety uce the amount of fees you will of Public Safety at P.O. Box 11 ce of Revocation and the No ws of Oklahoma that the fore Signature of arresting o O OF TESTS [ZIP CODE	d of one hundred eighty (180) or failed the state's test(s) iction against your driver licen (DPS). Completion of IDAP be required to pay to the S 415, Oklahoma City, OK 731 otice of Department Impa Badge #: Badge #: fflcer: PHONE 4054252460	Section w. may prevent a tate. You must 36. aired Driving t," Section

OFFICER'S AFFIDAVIT AND NOTICE OF REVOCATION/DISQUALIFICATION

12/16

DUNTY #	CIT	V#	CITATI	10 A A 44		
22			GIAN	ON #		
CITY						OMA
A CITY						DE 133
130/20		0 TT		RES	TRICTIONS	ENDORSEMENTS
				STATE	CMV N	
	A CITY TION DATE /30/20	CITY DATE OF 08/ A CITY TION DATE /30/2019	CITY DATE OF BIRTH 08/09/196 A CITY TION DATE /30/2019 TAG # MOCK	CITY DATE OF BIRTH 08/09/1961 A CITY STATE OK 30/2019 OK A TAG # MOCK	CITY COL DATE OF BIRTH 08/09/1961 M W A CITY STATE /30/2019 OK A TAG # MOCK STATE OK	CITY COUNTY OKLAHO O8/09/1961 M W 510 OK 733 A CITY COK 733 A CITY COK 733 MOK A RESTRICTIONS A CITY OK 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, timpike, 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

QUIPMENT	IS RECORD, REPORT OF TH		IN SECTION 1 ABOV		EST AND MAINTENANCE RECORD.	Section
I-8000			-004882	BOARD	OF TESTS	
TANDARD		100	TARGET VALU		PERMIT NUMBER	
Dry			0.080		23020	
ANUFACTURER			LOT		DATE CYLINDER INSTALLED	DATE CYLINDER EXPIRES
ILMO				080A3	05/19/2021	03/05/2023
BSERVATION START TES	5/19/2021	G	A 15-minu	te (or greate	r) deprivation/observation	100/00/2020
SULT TABLE					prior to and continuing	AE STA
Test	g/210L	Time	to	the time of t	est administration.	01 *** A*** 0
Air Blank Subject Test	0.00 0.00	12:16 12:16	1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.		Breath-Alcohol Test in e applicable operating	
Breath Volume Air Blank Wait	2.183 LITERS 0.00	12:17 12:19			e Board of Tests.	
Air Blank Subject Test Breath Volume	0.00	12:19 12:19	SIGNATURE O	OPERATOR	ye	1907
Air Blank	2.117 LITERS 0.00	12:20	7223	1		the second s
Cal Check	0.08	12:20	NAME			Terret Derrold
Air Blank	0.00	12:20	PAPE, CH	IRISTOPHE	SR.	Test Result
			BADGE #	1.2.2	PERMIT #	BrAC g/210L
			0000000	484	0000023020	0.00
			AGENCY			0.00
			BOARD O		and the second	
vs or more, if you refused of erating a CMV or CDL hole a result of this arrest by fill u may be eligible to parti- rocation as a result of thi	or failed the state's test(s). In Ider) OR a test result of .04 c ing a petition in the District O icipate in the Impaired Driv is arrest from appearing or	addition, your con r more while operation ourt of the County er Accountability your driving rec	mmercial driving priv tling a commercial m in which you were a Program (IDAP) ac ord. Participation i	ilege in this state otor vehicle. You rested. Your per Iministered by t	e is revoked or denied for a period of on will be disqualified if you refused or faile u may appeal any Departmental action a ition must be filed within thirty (30) days he Department of Public Safety (DPS) uce the amount of fees you will be re- of Public Safety at P.O. Box 11415, O	d the state's test(s) gainst your driver license of the date listed below. . Completion of IDAP may prevent a wired to next to the State. You must
RVING OF NOTICE: countability Program	I personally hand delive to the person named in	vered a copy of Section 1 abov	the above conta	ning the Notic	e of Revocation and the Notice of	f Department Impaired Driving
	.9/2021 Sign					_ Badge #:
accordance with Title	12 O.S. Section 426, "I	state under pe	nalty of perjury	under the law	s of Oklahoma that the foregoing	is true and correct." Section
	21 Place (location w	nen signed):	- <u> </u>	_	_ Signature of arresting officer:	
PAPE, CHR	ISTOPHER			BOARI	OF TESTS	

AGENCY ADDRESS

INTER-AGENCY

BADGE

0000000484

ARRESTEE'S COPY BOT Form AFF02 03/2020 ZIP CODE

00000

PHONE

4054252460

	Certifica	te of Anal	rsis – Wet Bath 13/16
8/	11/202	DE	0.020
Date of Ana			ta(E)value (g/210L)
and shares the state	070		
trial and it to be made	the second second second		2020
Lot Numbe	r	- Aker se	GUTHE ABORATORIES, INC.
chris	stophes	Photo	MARTINEAN STREED . HARRISBURG, PA 17111-4511 . TELEPHONE: 717-564-5470
	cian Name and Si		
BUTTechni	cian Name and Si	gnature	BRT Form 6.0
In accord	ance with BRT	- 2.2.0, Mainte	nance, the above referenced simulator solution is
suitable f	or use as an ex	ternal reference	
1.000.000.000	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
ALPHA INSTRU	MENT 2		CERTIFICATE OF ANALYSIS CVV
	- Alcohol Analy	Izer	1/1/2000
Model 8000		SN 80-004923	6115
08/11/2020		09;42	
			C/
2.4	12.2	27.00	Certified Alcohol Reference Solution for Simulator
Test	g/210L	Time	Continue Automoti Reference Solution for Simulator
Air Blank	0,000	09:42	
Cal Check	0.020	09; 43	
Air Blank	0.000	09:43	Random Samples of Lot Number 20070 of
Cal Check	0.020	09:44	
Air Blank	0.000	09:45	Alcohol Reference Solution for Simulator were analyzed by
Cal Check	0.020	09:45	inconst reference berution for simulator were analysed by
Air Blank	0.000	09:46	and abarmeter and Fabruary 17 2020 using a Parkin Elmar Cou
Cal Check	0.020	09:47	gas chromatography on February 17, 2020, using a Perkin Elmer Gas
Air Blank	0.000	09:47	
Cal Check	0.021	09:48	Chromatograph Autosystem XL S/N: 610N9030209, and found to contain
Air Blank	0.000	09:48	지수가 아이에 집에 집에 가지 않는 것을 하는 것이 같이 많이 많이 가지 않는 것이 없다. 것이 집에 있는 것에서 가지 않는 것이 같이 많이 많이 많이 많이 많이 많이 없다. 것이 없는 것이 없다. 것이 없는 것이 없다. 않은 것이 없는 것이 없 않은 것이 없는 것이 없는 것이 없는 것이 없는 것이 없는 것이 없다. 것이 없는 것이 없다. 것이 없는 것이 없는 것이 없는 것이 없는 것이 않은 것이 않은 것이 않은 것이 않은 것이 않는 것이 않이 않은 것이 없다. 것이 없는 것 않이
Cal Check	0.020	09:49	0.0242% (w/vol) ethyl alcohol. The expiration date for this lot
Air Blank	0.000	09:49	and the second stands and the second stands and second stands
al Check	0.020	09:50	number is February 13, 2022 at 11:59 PM.
In Disok	0 000	80.01	number is reducitly 13, 4044 at 11.37 rive.

Cal Ch Air Bla Cal Che Air Bla Cal Check 0.020 Air Blank 0.000 Cal Check 0.020 Air Blank 0.000 Cal Check 0.020 Air Blank 0.000 Cal Check 0,019 Air Blank 0.000 Cal Check Stats 0.0200 Average Std Dev 0.0004 Rel Std Deu(%) 2.3569

Operator's Signature

09:51

09:51

09:52

09:53

09:53

09:54

09:54

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

34°C +/- .2°C, this solution will give a breath alcohol

analysis instrument reading of 0.020 g/210L +/- 3%.

When used in a calibrated Simulator, operating at

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.

100 10 0	of Analysis – Wet Bath	
7/20/2020	0.040	
20060	Labelled target value (g/210L)	
at Number	Averale Unt rewit (g/220L)	
hickohor R	Select CU h	ABORATORIES, INC.
OT Technician Name and Signat		THE STATE OF MARRISBURG, PA 17111- 4511 @ TELEPHONE: 717-564-5470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

RCV'D 6/1/20

ALPHA UNIT SUB	
Intoxilyzer - Alcoho	Analyzer
Model 8000	SN 80-003400
07/22/2020	14:57

Random Samples of Lot Number 20060 of *CP* Alcohol Reference Solution for Simulator were analyzed by gas chromatography on February 11, 2020, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.0483% (w/vol) ethyl alcohol. The expiration date for this lot number is February 10, 2022 at 11:59 PM.

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

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

aul

Ted 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.

Test	g/210L	Time
Air Blank	0.000	14:57
Cal Check	0.040	14:58
Air Blank	0.000	14:59
Cal Check	0.039	14:59
Air Blank	0.000	15:00
Cal Check	0.039	15:01
Air Blank	0.000	15:01
Cal Check	0.039	15:02
Air Blank	0.000	15:02
Cal Check	0.039	15:03
Air Blank	0.000	15:04
Cal Check	0.039	15:04
Air Blank	0.000	15:05
Cal Check	0.040	15:06
Air Blank	0.000	15:06
Cal Check	0.040	15:07
Air Blank	0.000	15:07
Cal Check	0.040	15:08
Air Blank	0.000	15:09
Cal Check	0.040	15:09
Air Blank	0.000	15:10
Cal Check Stats		
Average	0,0395	
Std Deu	0.0005	
Rel Std Dev(%)	1.3342	

Signature

the second s	or Analysis – Wet Bath		
Ob 16 20 Date of Analysis	Labelled target value (g/210L)		15/16
20190	.098		
Lot Number	Augent test result (g/210L)		
Josh Smith		BONATORIES, INC.	
BOT Technician Name and Signatu	ire , St	TRO ET BRT Forth 6.0 TSE IRG, PA 17111- 4511 @ TELEPHONE: 717-564-5470	-
In accordance with BRT - 2.	2.0, Maintenance, the above referenced	simulator solution is	Qui là
suitable for use as an extern	al reference in maintenance of the intoxi	lyzer 8000.	LECIO

CERTIFICATE OF ANALYSIS

ALPHA INSTRUMENT Intoxilyzer - Alcohol Analyzer SN 80-002591 Certified Alcohol Reference Solution for Simulator Model 8000 06/16/2020 16:18

Test	g/210L	Time
Air Blank	D. 000	16:18
Cal Check	0.099	16:19
Air Blank	0.000	16:20
Cal Check	0.098	16:20
Air Blank	0.000	16:21
Cal Check	0.097	16:22
Air Blank	0.000	16;22
Cal Check	0.098	16:23
Air Blank	0.000	16:24
Cal Check	0.098	16:24
Air Blank	0.000	16:25
Cal Check	0.098	16:26
Air Blank	0.000	16:26
Cal Check	0.098	16:27
Air Blank	0.000	16:27
Cal Check	0.097	16:28
lir Blank	0.000	16:29
Tal Check	0.098	16:29
lir Blank	0.000	16:30
al Check	0.098	15:31
lir Blank	0.000	16:31
al Check Stats		
Average	0.0979	
Std Dev	0.0005	
Rel Std Deu(%)	0.5798	

Random Samples of Lot Number 20190 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on April 8, 2020, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1206% (w/vol) ethyl alcohol. The expiration date for this lot number is April 6, 2022 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.

1003 Ignature Operator

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

NIST Traceability:

Testing was conducted using Cerilliant Reference Standard lot number FN02271802 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	
01/07/2020	00200	
ate of Analysis	Lakalled to traine (g/210L)	
20160	12 0.197	And Till your
ot Number	Av applest support and and	Aboratories, Inc.
Wistoper Paper	590 NORTH STI	
OT Technician Name and Signature	U azusu	BRT Form 6.0

CERTIFICATE OF ANALYSIS

E, 17,02

Certified Alcohol Reference Solution for Simulator

LPHR UNIT SUB atoxilyzer - Alcohol Analyzer odel 8000 SN 80-003400 7/07/2020 15:25 est g/210L Time ir Blank 0.000 15:26 al Check 0.196 15:26 ir Blank 0.000 15:27

Random Samples of Lot Number 20160 of Alcohol Reference Solution for Simulator were analyzed by chromatography on March 20, 2020, using a Perkin Elmer Gas gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.2427% (w/vol) ethyl alcohol/ The expiration date for this lot number is March 18, 2022 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 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.

al Check 0.196 15:28 ir Blank 0.000 15:28 al Check 0.197 15:29 ir Blank 0.000 15:29 al Check 0.196 15:30 ir Blank 0.000 15:31 al Check 0.198 15:31 Ir Blank 0.000 15:32 al Check 0,198 15:33 ir Blank 0.000 15:33 al Check 0.197 15:34 ir Blank 0.000 15:35 0.198 al Check 15:35 ir Blank 0.000 15:36 al Check 0.198 15:37 ir Blank 0,000 15:37 al Check 0.197 15:38 15:38 lir Blank 0.000 al Check Stats 0.1971 Average 0.0008 Std Deu Rel Std Deu(%) 0.4442