

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:

1) The attached "Service Overview" is a true and accurate copy of maintenance performed on the Intoxilyzer 8000, serial number 80-004924, in compliance with the agency's Maintenance Policy and Procedures.

Signed

Name of Position: Director/Records Custodian

Date of Attestation: 11/03/2022

Service Overview

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

BENCH CHECK DATE: 11/03/2022

SERIAL: 80-004924

DOCUMENTATION WITHIN SERVICE PACKET:

- BOT Certificate of Maintenance, Calibration and Operation
- Bench Check
- BOT Dry Gas Certificate of Analysis
- Ilmo Specialty Gases Certificate of Analysis
- Mock Subject Test
- BOT Certificate of Analysis on Certified Solutions (4)
- Guth Laboratories Certificate of Analysis (4)



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CERTIFICATE of MAINTENANCE, CALIBRATION, and OPERATION

This certifies the Intoxilyzer 8000 referenced below, manufactured by CMI, Inc., a subsidiary of MPD, Inc. of Owensboro, Kentucky, is maintained by the Board of Tests for Alcohol and Drug Influence in accordance with 40 O.A.C. 30-1-3. The instrument reported below is hereby deemed to be in compliance with Board rules via linearity accuracy examination and operational/functional procedure evaluation also referred to as a "Bench Check". The Intoxilyzer 8000 appears on the National Highway Traffic Safety Administration's Conforming Products List of Evidential Breath Alcohol Measurement Devices (82 FR 50940 et seq) as an approved device. In accordance with 40 O.A.C. 25-1-2, this instrument is approved and certified for use in the State of Oklahoma as an automated evidential breath-alcohol measurement device by the Board of Tests pursuant to 47 O.S. § 759.

All analyses conducted by this instrument are considered precise, valid, and in accordance with 40 O.A.C. 30-1-3(b) Operating Procedure(s). A printed breath test operator affidavit containing the seal of the Board by this instrument confirms a calibration check successfully verified the instrument's calibration at the time of test. The printed breath test affidavit also serves as proof that safeguards in place to protect the breath samples, including but not limited to Ambient Air Interference, Radio Frequency Interference, Residual Mouth Alcohol, Deficient Samples, etc. were not triggered and the test is a true and accurate scientific measurement of the person's alcohol concentration.

- Maintenance was performed on the Intoxilyzer 8000, Serial No. <u>80-004924</u> on <u>11/03/2022</u> in accordance with 40 O.A.C. 30-1-3 and internal BOT maintenance policy and procedures.
- A dry gas canister appearing on the National Highway Traffic Safety Administration's Conforming Products List of Calibrating Units for Breath Alcohol Testers (77 FR 64588 et seq) and approved in accordance with 40 O.A.C. 25-1-3 and BOT maintenance policy was installed.
 - Manufacturer: ILMO Unit: 208 ppm / 105 L
 - Cylinder Lot No. Canister No.: 06022080A2-058
 - BOT analysis average test result: 0.081
- Cylinder expiration date: 04/05/2024

In accordance with 40 O.A.C. 25-1-2.1, the approved reference standards and equipment were used:

| Simulator Model | | | |
|--------------------------|--------------------|---|------------|
| Guth 2100 | Guth 2100 | Guth 2100 | Guth 2100 |
| Serial # | | | |
| DR2834 | DR3694 | DR2455 | DR3470 |
| Concentration | | 111111111111111111111111111111111111111 | |
| .02 | .04 | .10 | .20 |
| LOT# | | | Ú |
| 21340 | 21410 | 22080 | 22050 |
| Manufactured Date | | 10000 | |
| 8/24/2021 | 9/30/2021 | 3/7/2022 | 2/7/2022 |
| Expiration Date | | | |
| 8/24/2023 | 9/30/2023 | 3/7/2024 | 2/7/2024 |
| Solution Commission Date | A second particles | | |
| 11/03/2022 | 11/03/2022 | 11/03/2022 | 11/03/2022 |
| | | | 1 |

| | 11/03/2022 | 11/03/2022 | 11/03/2022 |
|------------------|------------------|-------------------------------|---------------------------|
| Completed by BOT | Personnel: | | |
| Signature/Name | Christopher Pape | Breath-Alcohol Testi Title | ing Program Administrator |

Certified by:

Signature Joshua Smith State Director
Title

| Diagnostics | 1/03/2022 | CHECK DATE TIME PROCEDURE BEGAN 15:04:2 | | INSTRUMENT LOCATION 80-004924 | 4 | |
|---|--|---|--|-------------------------------|---------------|---------------|
| Diagnostics | RUMENT TYPE | | | | | |
| Diagnostics | ncoxilyzei | 1-80 | | ESIII TS | 80-00 | 4924 |
| Mouth Alcohol Test | | | 12011 | 200210 | | |
| Mouth Alcohol Test | | | | | | |
| Mouth Alcohol Test | Diagnostic | s | | | | |
| PASS | PASS | | | | | |
| No Sample Given Test PASS PASS | Mouth Alcoho | l Test | | | | |
| PASS Duplicate Breath Sampling Results | PASS | | | | | |
| PASS Duplicate Breath Sampling Results | RFI Test | | | | | |
| No Sample Given Test PASS PASS | | | | | | |
| PASS Value Test 1 Test 2 Control Test | | | Di | plicate Breath | Sampling Re | sults |
| Improper Sample Test | | τ | Water | 7.54 | T40 | Control |
| DASS .02 0.018 0.017 0.019 | | | value | rest | Test 2 | Test |
| Interferent Detect Test | 그 그리고 하는 아니라 하다니 그 그리고 있다. | le Test | 46 | | | |
| PASS No Sample Given Test PASS Insufficient Sample Test PASS Air Blank Contamination Test PASS Range Exceeded Test | PASS | | .02 | 0.018 | 0.017 | 0.019 |
| No Sample Given Test PASS Insufficient Sample Test PASS Air Blank Contamination Test PASS Range Exceeded Test | | ct Test | .04 | 0.037 | 0.037 | 0.039 |
| No Sample Given Test PASS Insufficient Sample Test PASS Air Blank Contamination Test PASS Range Exceeded Test | PASS | | .10 | 0.098 | 0.094 | 0.099 |
| Insufficient Sample Test PASS PASS Air Blank Contamination Test PASS Range Exceeded Test | No Sample Give | en Test | 1 2 2 2 2 2 | | | |
| PASS Air Blank Contamination Test PASS Range Exceeded Test | PASS | | .20 | 0.194 | 0.192 | 0.198 |
| PASS Air Blank Contamination Test PASS Range Exceeded Test | Insufficient Sam | ole Test | | PA | SS | |
| PASS Range Exceeded Test | | 100 | | | | |
| PASS Range Exceeded Test | Air Blank Contamir | ation Test | | | | |
| | | 1000 | | | | |
| | Danas Evenado | d Toot | | | | |
| TABB | | a rest | | | | |
| | 11100 | | | | | |
| | | | CERTIFYING | TECHNICIAN | V 100 | |
| CERTIFYING TECHNICIAN | I swear under penalty | of periury that in | regards to th | e above listed | instrument. I | have complied |
| | 그런 그의 교실하는 이 경기 때문 사람들이 하다는 가득 기다리 하는 그 보였다. | | The second secon | | | |
| I swear under penalty of perjury that in regards to the above listed instrument, I have complied the Intoxliyzer Bench Checking Procedure approved by the State of Oklahoma. | NATURE | Grade Charles and an | A 10 A) 7 LW | | DATE | 7 |
| I swear under penalty of perjury that in regards to the above listed instrument, I have complied the Intoxliyzer Bench Checking Procedure approved by the State of Oklahoma. | | . , | | | | |
| I swear under penalty of perjury that in regards to the above listed instrument, I have complied the Intoxliyzer Bench Checking Procedure approved by the State of Oklahoma. | 1// | -12- | | | 11 | 1210- |
| I swear under penalty of perjury that in regards to the above listed instrument, I have complied the Intoxliyzer Bench Checking Procedure approved by the State of Oklahoma. | 1 | | | | | / 4 / / . |

0000023020

NAME

PAPE,

CHRISTOPHER



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Joshua Smith Director

Certificate of Analysis - Dry Gas

ALPHA INSTRUMENT Intoxilyzer - Alcohol Analyzer Model 8000

SN 80-002591

04/25/2022

14:42

| Test | g/210L | Time |
|-----------------|--------|-------|
| Air Blank | 0.000 | 14:43 |
| Cal Check | 0.081 | 14:43 |
| Air Blank | 0.000 | 14:43 |
| Cal Check | 0.081 | 14:44 |
| Air Blank | 0.000 | 14:44 |
| Cal Check | 0.081 | 14:45 |
| Air Blank | 0.000 | 14:45 |
| Cal Check | 0.081 | 14:45 |
| Air Blank | 0.000 | 14:46 |
| Cal Check | 0.081 | 14:46 |
| Air Blank | 0.000 | 14:47 |
| Cal Check | 0.081 | 14:47 |
| Air Blank | 0.000 | 14:48 |
| Cal Check | 0.080 | 14:48 |
| Air Blank | 0.000 | 14:48 |
| Cal Check | 0.081 | 14:49 |
| Air Blank | 0.000 | 14:49 |
| Cal Check | 0.081 | 14:50 |
| Air Blank | 0.000 | 14:50 |
| Cal Check | 0.081 | 14:50 |
| Air Blank | 0.000 | 14:51 |
| Cal Check Stats | | |
| Average | 0.0809 | |
| Std Dev | 0.0003 | |
| Rel Std Dev(%) | 0.3908 | |

| Known Breati | 0.08 g/210L | = 208 PPM ÷ 2605* | Ethanol Gas (208 ppm/105 L) | |
|---|---|---|--|--|
| Manufacturer: ILMO | Manufacturer Cert. N | ^{lo.:} 14689 | Cylinder Size: 105L | |
| Lot No.: 06022080A2 | Cylinder No.: 58 | | Expiration Date: 04/05/2024 | |
| prescribed by the State Director of Tests p calibrating unit in accordance with 47 O.S. | ursuant to 40 OAC 30-1-3. The 759, 40 OAC 25-1-3, and appe of Transportation in the Federal | above NIST traceable r ars on the current confo Register [77 FR 64588 | 00 and was performed in accordance with the procedures reference standard meets the requirements for use as a brining products list of calibrating units for breath alcoholet seq]. * See Dubowski, K.M. and Essary N., Journal of | |
| Signature United Accounts | | Date: 04/25/2022 | | |
| Name Christopher Pape | | Permit No.: 23020 | | |



7 Eastgate Dr. • P.O. Box 790 • Jacksonville, IL 62651-0790 217-245-2183 • Fax: 217-243-7634 • www.ilmoproducts.com

Certificate of Analysis

Certificate ID:

Part #:

BAC105L080T

Cylinder Size:

105L

Lot Number:

06022080A2

Expiration:

4/5/2024

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

Contents:

105 Liters @ 1000 psig 70°F (21°C)

Analytical

Reported

Accuracy

Analytical

Component:

Concentration:

(U, k=2):

Method:

Ethano1 Nitrogen 208 ppm Balance +/-0.002 BAC(G/210L) NDIR

[5.2 ppm]

Distributed by:

CMI Inc.

316 East Ninth Street Owensboro, KY 42303 Phone 866-835-0690 www.alcoholtest.com

*Traceable to:

Certified Reference Material - 251.8 µmol/mol

Ethanol in Nitrogen - Serial No. CC198518 Lot No. 111318E1

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

03-28-2022

Issuance Date



Accreditation #61895

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.

7/17

OFFICER'S AFFIDAVIT AND NOTICE OF REVOCATION/DISOUALIFICATION

| RREST DATE 11/03/2022 | | ST TIME | | COUNTY # | | CITY# | CITATIO | ON# | | |
|--|--|---|---|--|--|--|--|--|---|-------------------|
| RREST LOCATION | 110 | 00 | | 133 | CITY | | | cour | | 5667 |
| BOT | | | | | 16.0 | or north | Iso | | KLAHOI | - |
| BREATHTEST, | DELTA | | | | | 1/01/19 | 85 | | 510 | 200 |
| DDRESS | | | CITY | ALIONA C | 1000 | | STATE | | ZIP CODE | |
| 3600 MLK | | | OKL | AHOMA C | | STATE | OK | | 731 | L L ENDORSEMEN |
| 3083463042 | | | | 10/31 | /202 | 2 OK | D | - 1 | 22.11.2 | |
| HIGLE MAKE MOCK | | MOCK | | | | MOCK | | OK | N CWA | N N |
| the above date, time, and loca mway, street, turnpike, public pri sence of alcohol and/or other in scribe driving behavior or circu MOCK SUBJECT scribe person's condition (odor, | arking lot, or other public place toxicating substances as professionations: $	ext{TEST}$ | e, or upon a private | e road, street, alley or l | ane which provides | access to o | ne or more single or | multi-family o | dwelling withi | n this state wh | ile under the |
| OUTINE MAINT | ENANCE, INST | | W CYLINDE | | NSENT TES | FREQUEST | | | | |
| EATH-ALCOHOL ANALYSIS I | RECORD, REPORT OF THE | | | | 902.000 | | RD. | | | Sectio |
| UIPMENT | - second designated at 11th | SERIAL | NUMBER | SPECIALIST | | | 100 | | | 77787 |
| -8000 ANDARD | | 80 | -004924 TARGET VALUE | Name of Street, Street | OF T | | | - | | |
| ry | | | 0.080 | | 230 | 20 | | | | |
| NUFACTURER LMO | | | 06022 | 08022 | DATE CYL | 03/2022 | | | DER EXPIRES | |
| SERVATION START TEST | DATE | | | | | tion/observati | ion | 04/0 | 5/202 | * |
| .615 11 | /03/2022 | | | | | and continuing | | | | |
| | a/2101 | m.t. | | the time of te | | | | 1 | THE ST | ATE |
| rest | g/210L | Time | 1200000000 | TAY ALCO | 7.37 | 13.32 T. A. | . 1.11 | 14% | *** | *** (%) |
| Air Blank Subject Test Breath Volume Air Blank Wait Air Blank Subject Test Breath Volume | 0.00 0.00 2.167 LITERS 0.00 0.00 0.00 2.050 LITERS | 16:49 16:50 16:52 16:53 16:53 | complian | ce with the | applic | Alcohol Tes able operati | St. January | SOREAT SE | 1907 | |
| Air Blank Cal Check | 0.00 | 16:53 16:54 | NAME | 100000 | 7 | | | - | Test Re | enlt |
| Air Blank | 0.00 | 16:54 | PAPE, CH | RISTOPHE | R PERMIT# | | | | BrAC g/2 | |
| | | | 0000000 | 484 | | 0023020 | | | 7.5 | |
| | | | BOARD O | F TESTS | | | | | 0.0 | 0 |
| FECTIVE THIRTY (30) DAY: s or more, if you refused or the presenting a CMV or CDL holde to result of this arrest by filing to may be eligible to participation as a result of this acception as a result of this acception. RVING OF NOTICE: If countability Program to the served: | alled the state's test(s). In r) OR a test result of .04 or a petition in the District Copate in the Impaired Drive arrest from appearing on a days of the date listed by personally hand delive the person named in 3 | addition, your co more while opera ourt of the County or Accountability your driving rec relow. Mail the r ered a copy of | mmercial driving privating a commercial main which you were as program (IDAP) acord. Participation i equest for IDAP to the above containe. | ilege in this state vertice. You rested. Your petil fministered by the n IDAP may redu the Department of | will be disquently appearation must be departmant of Public Section 2015 | ualified if you refuse all any Departmenta of filed within thirty (ent of Public Safe ount of fees you wafety at P.O. Box | ed or failed to a action aga 30) days of ty (DPS). C vill be requi | ne state's te nst your dri the date list completion red to pay homa City, | est(s) ver license ed below. of IDAP may to the State. OK 73136. ont Impaired | You must |
| accordance with Title 12 | | | | under the leve | o of Object | ama that the f- | ranalan la | 1 2 2 1 | | Section |
| ccordance with Title 12 e: | 2 O.S. Section 426, "I section 426, "I section 426, "I section 426, "I section wh | | enaity of perjury | under the laws | | noma that the fo ure of arresting | | true and | correct." | Section |
| 1E | | on signed) | | AGENCY | 11.5 | | omder | | | |
| | STOPHER | | | BOARD | OF | TESTS | le | | | |
| 000000484 | AGENCY ADDRESS INTER – AGEN | 1CY | | | | 2IP CODE 0 0 0 0 0 |) 40 | 54252 | 2460 | |
| HER WITNESSES: | | 0.7.6 | | | | | 1 | | | Section |
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| NAME | | | | | | | | | | |
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8/17

OFFICER'S AFFIDAVIT AND NOTICE OF REVOCATION/DISQUALIFICATION

| REPORT OF THE PRINCE OF THE STATE OF THE PERSON MAS INFORMED OF THE INFLIED CONSENT TEST REQUEST THE PERSON WAS INFORMED OF THE INFLIED CONSENT TEST REQUE | 11/03/2022 | | EST TIME | | COUNTY 55 | # | CITY# | C | TATION # | | | Secti |
|--|---|--|--|--|---|--|---|---|--|--|---|-------------|
| DETERMINED THE PROPERTY OF THE PERSON NAMED IN SECTION 1 ABOVE, AND 10 10 10 10 10 10 10 10 10 10 10 10 10 | RREST LOCATION | 1.1.0 | 300 | | 155 | CITY | | | | | | NO.021 |
| DEREATHTEST, DELTA O(L) AHOMA CITY OKLAHOMA OKLAHOMA CITY OKLAHOMA CITY OKLAHOMA CITY OKLAHOMA CITY OKLAHOMA OKLAHOMA CITY OKLAHOMA OKLA | | | | | | le ce | OF BUCK | | Toes | OK | | |
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| BOBAT Company Compan | DRESS | | | | AHOMA (| | | S | TATE | | ZIP COD | E |
| MOCK MOCK IN BOOK and location, the above named seem was arrested, and had reasonable grounds to believe the person was afring or in actual physical cortex of a motor vehicle upon a public road way. Seek Lumpile, public parking byte or other public parking byte or other public parking byte or other public parking byte. **COUTINE MAINTENANCE, INSTALLED NEW CYLINDER** **THE PERSON WAS INTORNED OF THE INSTALLED NEW CYLINDER** **THE PERSON WAS INTORN | | | | 7-70-0 | | | | U.S. and 10 10 | 3 | RESTRI | CTIONS | ENDORSEME |
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| ANDARO DRY OPTY OLOTY OLOTY | | | - TO TO THE PARTY OF THE PARTY | | | OF TH | ESTS | | | | | |
| Comparison Com | ANDARD | | 1 - 0 | TARGET VALUE | | PERMIT NU | MBER | | | | | |
| ECTIVE THIRTY (39) 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) so or more, if you refused or failed the state's test(s), in addition, your commercial driving privilege in this state with early period your will be required to participate to in the impaired Driving account of this areast to a required to participate in the impaired Driving account of this areast to a required to the time of test administration. I administrered said Breath-Alcohol Test in compliance with the applicable operating procedure of the Board of Tests. Mair Blank 0.00 16:53 Breath Volume 2.050 LITERS Air Blank 0.00 16:53 Breath Volume 2.050 LITERS Air Blank 0.00 16:54 BADGE POPERATOR NAME PAPE, CHRISTOPHER BADGE PO0000023020 AGENCY BOARD OF TESTS ECTIVE THIRTY (39) 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) so or more, if you refused or failed the state's test(s), in addition, your commercial ordiving privilege in this state will be desired. You may appear mental account or line areas by filing a petition in the limpaired Driver Accountability Program (DAP) administered to left delimin thiny (30) days of the date listed below. Mail the required to participate in the limpaired Driving accountability Program (DAP) administered to the Board or Public Safety (PS). Completion of IDAP may prevent a cachion as a result of this arrest from appearing on your driving record. Participation in 1DAP may reduce the amount of fees you will be required to pay to the State. You must be set to be participated in the limpaired Driving accountability Program (DAP) administered in the required to pay to the State. You must be set to be participated in the limpaired Driving accountability Program (DAP) and the state of the development of DAP may prevent a cachion as a result of this arrest from appearing on your driving record. Participation in 1DAP may red | | | | | | | | D | IDATE | CYLINDS | REYPIPE | S |
| A 15-minute (or greater) deprivation/observation period was observed prior to and continuing to the time of test administration. A 15-minute (or greater) deprivation/observation period was observed prior to and continuing to the time of test administration. I administered said Breath-Alcohol Test in compliance with the applicable operating procedure of the Board of Tests. Breath Volume 2.167 LITERS Breath Volume 2.050 LITERS Breath Volume 3.000 16:53 BROADE FORENATE BOOD 00 00 00 48 4 00 00 00 23 0 2 0 AGENCY BOARD OF TESTS ECTIVE 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) or or more, if you refused or falled the state's test(s). In addition, your commercial driver well-deliver velicle. You may appeal any Departmental action against your driver commercial motion vehicle. You may appeal any Departmental action against your driver incomes result of this arrest by filling a period of the beat below. may be eligible to participate in the Impaired Driver Accountability Program (IDAP) administered by the Department of Public Safety (DPS). Completion of IDAP may prevent action as a result of this arrest to mappearing on your driving revented. Participation in IDAP may request the program to the person named in Section 1 above. Be served: Signature of officer: Badge #: Secondance 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." Secondance 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." Secondance with Title 12 O.S. Section 426, "I state under penalty of perjury under the laws of Oklahoma that the foregoing | | | | | 080A2 | | | | | | | |
| Air Blank 0.00 16:50 Breath Volume 2.167 LITERS Air Blank 0.00 16:50 Breath Volume 2.167 LITERS Air Blank 0.00 16:53 Breath Volume 2.050 LITERS Air Blank 0.00 16:54 Air Blank 0.00 16:54 Air Blank 0.00 16:54 Breath Volume 2.050 LITERS Air Blank 0.00 16:54 Breath Volume 2.050 LITERS Air Blank 0.00 16:55 Breath Volume 2.050 LITERS Air Blank 0.00 16:54 BAPE CHRISTOPHER BAOGE # PERMIT # DO00023020 NAGENCY BOARD OF TESTS ECTIVE 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) so range, if you refused or failed the state's test(s). In addition, your commercial driving privilege in this state will be disqualified if your refused or failed the state's test(s) are result of this arrest by filing a petition in the District Court of the County in which you were arrested. Your petition may appeal any pear any pear any support of the date listed below. It may be eligible to participate in the Impaired Driver Accountability Program (IDAP) administered by the Department of fees you will be required to pay to the state. You must sest IDAP within thirty (30) days of the date listed below. Mail the request for IDAP to the Department of Public Safety (DPS). Completion of IDAP may prevent a scation as a result of this arrest from appearing on your driving record. Participation in IDAP may reduce the amount of fees you will be required to pay to the State. You must sest IDAP within thirty (30) days of the date listed below. Mail the request for IDAP to the Department of Public Safety (DPS). Completion of IDAP may prevent a scation as a result of this arrest from appearing on your driving record. Participation in IDAP may reduce the amount of fees you will be required to pay to the State. You must sest IDAP within thirty (30) days of the date listed below. Mail the request for IDAP to th | 615 11 SULT TABLE | /03/2022 | | period w | as observed | prior to ar | d continuir | | | / | THE S | TATE |
| Subject Test 0.00 16:50 Breath Volume 2.167 LITERS 16:50 Air Blank 0.00 16:53 Breath Volume 2.050 LITERS 16:53 Breath Volume 2.050 LITERS 16:53 Breath Volume 2.050 LITERS 16:53 Air Blank 0.00 16:54 Air Blank 0.00 16:54 Breath Volume 2.050 LITERS 16:54 Air Blank 0.00 16:54 Breath Volume 2.050 LITERS 16:54 Air Blank 0.00 16:54 Breath Volume 2.050 LITERS 16:54 Air Blank 0.00 16:54 Breath Volume 2.050 LITERS 16:54 Air Blank 0.00 16:54 Breath Volume 2.050 LITERS 16:54 Air Blank 0.00 16:54 BRADE # PAPE, CHRISTOPHER BRADE # PERMIT # 0000023020 BROARD OF TESTS ECTIVE 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) Sec 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). In addition, your commercial driving privilege in this state will be disqualified 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). In addition, your commercial driving privilege in this state will be disqualified 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). In addition, your driver license is revoked or denied for a period of one hundred eighty (180) Sec or more, if you refused or failed the state's test(s). In addition, your driver license is revoked or denied for a period of one hundred eighty (180) one of failed the state's test(s). In addition, your driver license is revoked or denied for a period of one hundred eighty (180). Sec or more, if you refused or failed the state's test(s). In addition, your driver license is revoked or denied for a period of one hundred eighty (180). Sec or more, if you refused or failed the state's test(s). In addition, you refused or fail | lest. | g/210L | Time | Evita Color | | | , , , , , , , , , , , , , , , , , , , | | | 13% | *** | 1. 1. 69 |
| Breath Volume 2.167 LITERS of the Blank 0.00 16:50 ration 16:52 ration 16:52 ration 16:53 Breath Volume 2.050 LITERS of the Blank 0.00 16:53 Breath Volume 2.050 LITERS ration 16:54 ration 16:54 ration 16:55 Breath Volume 2.050 LITERS ration 16:54 ration 16:54 ration 16:55 ration 1 | Air Blank | 0.00 | 16:49 | I administ | ered said I | Breath-A | Icohol Te | est in | | A | A | A # 4 /c |
| PARE SIGNATURE OF OPERATOR NAME PAPE, CHRISTOPHER Drocedure of the Board of Tests. Procedure of the Boar | | | 16:50 | compliane | ce with the | applica | ble opera | ting | | 8 ** | | * |
| Signature of Perant Solution of Solution o | | | 16:50 | proce | edure of th | e Board | of Tests. | | | A ** | | *** |
| Breath Volume 2.050 LITERS did Plank 0.00 16:53 Rial Check 0.08 16:54 Air Blank 0.00 16:54 DATE OF TESTS ECTIVE 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) O.00 0.00 0.00 0.00 0.00 0.00 0.00 0. | | | | 14 | 4 | 0- | | _ | | 10/4 | | 1.15 |
| Signature of operation Signature of operat | | | | 1100 | 12/ | 1 | | | | 1 | *** | |
| Test Result BrAC g/210L 0 .00 | - 10 1 개 및 10 MIN (1997) - 10 MIN (1997) - 10 MIN (1997) | | 16:53 | SIGNATURE OF | OPERATOR | | | | 1/6 | | 190 | |
| Test Result Blank 0.00 16:54 16:554 | | | | NAME | | | | | | | and an | POST COL |
| ECTIVE 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) 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). In addition, your commercial driving privilege in this state will be disqualified 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). In addition, your commercial driving privilege in this state will be disqualified if you refused or failed the state's test(s). Section 426 in addition, your commercial driving privilege in this state will be disqualified if you refused or failed the state's test(s). Section 426 in addition, your commercial driving privilege in this state will be disqualified if you refused or failed the state's test(s). As one of the county in the privilege in this state will be disqualified 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). Section 426 in addition, your commercial driving privilege in this state will be disqualified if you refused or failed the state's test(s). Section 426 in addition, your commercial driving privilege in this state will be disqualified if you refused or failed the state's test(s). Section 426 in addition, your commercial driving privilege in this state will be disqualified if you refused or failed the state's test(s). Section 426 in addition, your commercial driving privilege in this state will be disqualified if you refused or failed the state's test(s). Section 426 in addition, your commercial driving privilege in this state will be disqualified if you refused or failed the state's test(s). Section 4 In addition your addition, your and your driver it is state will be disqualified | | | | The second secon | RISTOPHE | ER | | | | | | |
| AGENCY BOARD OF TESTS ECTIVE 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) so 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). In addition, you're commercial driving privilege in this state will be disqualified if you refused or failed the state's test(s). In addition, you're commercial driving privilege in this state will be disqualified if you refused or failed the state's test(s). In addition, you're commercial driving revords. You may appeal any Departmental action against your driver license is result of this arrest by filing a petition in the District Court of the County in which you were arrested. You're petition must be filed within thirty (30) days of the date listed below. In a result of this arrest from appearing on your driving record. Participation in IDAP may reduce the amount of fees you will be required to pay to the State. You must used IDAP within thirty (30) days of the date listed below. Mail the request for IDAP to the Department of Public Safety at P.O. Box 11415, Oklahoma City, OK 73136. RVING OF NOTICE: I personally hand delivered a copy of the above containing the Notice of Revocation and the Notice of Department Impaired Driving countability Program to the person named in Section 1 above. Badge #: CCCORDINATION OF TESTS Signature of arresting officer: Signature of arresti | and Marketin | 3.00 | 10:34 | | 191 | | 022020 | 1 | | В | | |
| BOARD OF TESTS ECTIVE 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) Scor 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). In addition, your commercial driving privilege in this state will be disqualified if you refused or failed the state's test(s). One or more while operating a commercial motor vehicle. You may appeal any Departmental action against your driver license result of this arrest by filing a petition in the District Court of the County in which you were arrested. Your petition must be filed within thirty (30) days of the date listed below. May be eligible to participate in the Impaired Driver Accountability Program (IDAP) administered by the Department of Public Safety (DPS). Completion of IDAP may prevent a result of this arrest from appearing on your driving record. Participation in IDAP may reduce the amount of fees you will be required to pay to the State. You must used IDAP within thirty (30) days of the date listed below. Mail the request for IDAP to the Department of Public Safety (DPS). Glahoma City, OK 73136. RVING OF NOTICE: I personally hand delivered a copy of the above containing the Notice of Revocation and the Notice of Department Impaired Driving countability Program to the person named in Section 1 above. Exercise Signature of officer: Signature of officer: Place (location when signed): Signature of arresting officer: Place (location when signed): Signature of arresting officer: APE, CHRISTOPHER AGENCY BOARD OF TESTS Signature of PHONE | | | | The second secon | 404 | 10000 | 023020 | | | (| 0.0 | 00 |
| sor 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) reating a CMV or CDL holder) OR a test result of .04 or more while operating a commercial motor vehicle. You may appeal any Departmental action against your driver license result of this arrest by filing a petition in the District Court of the County in which you were arrested. Your petition must be filed within thirty (30) days of the date listed below. may be eligible to participate in the Impaired Driver Accountability Program (IDAP) administered by the Department of Public Safety (DPS). Completion of IDAP may prevent a sociation as a result of this arrest from appearing on your driving record. Participation in IDAP may reduce the amount of fees you will be required to pay to the State. You must usest IDAP within thirty (30) days of the date listed below. Mail the request for IDAP to the Department of Public Safety at P.O. Box 11415, Oklahoma City, OK 73136. RVING OF NOTICE: I personally hand delivered a copy of the above containing the Notice of Revocation and the Notice of Department Impaired Driving countability Program to the person named in Section 1 above. The section of the person named in Section 1 above. Signature of officer: Place (location when signed): Signature of arresting officer: Place (location when signed): Signature of arresting officer: Place (location when signed): Signature of arresting officer: Place (AGENCY ADDRESS) Signature of PHONE | | | | | F TESTS | | | | | | | |
| 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." AGENCY PAPE, CHRISTOPHER AGENCY BOARD OF TESTS AGENCY BOARD OF TESTS AGENCY BOARD OF TESTS AGENCY BOARD OF TESTS | ays or more, if you refused or perating a CMV or CDL holds is a result of this arrest by filing ou may be eligible to particivocation as a result of this quest IDAP within thirty (30 ERVING OF NOTICE: I ccountability Program to | failed the state's test(s). In r) OR a test result of .04 o a petition in the District C pate in the Impaired Driv arrest from appearing or) days of the date listed in personally hand delive the person named in | n addition, your co or more while oper ourt of the County rer Accountability n your driving red below. Mail the overed a copy of Section 1 abo | AGENCY BOARD Of ation is given that you mercial driving privating a commercial mr. in which you were any Program (IDAP) adcord. Participation in request for IDAP to a fithe above containve. | F TESTS pur driver's licens illege in this state otor vehicle. You rested. Your pei Iministered by t in IDAP may red the Department | e is revoked o will be disque u may appeal iltion must be he Departme uce the amou of Public Saf | r denied for a p lified if you refu any Departmen filed within thirty nt of Public Sa int of fees you ety at P.O. Boo | eriod of of sed or fatel action (30) da fety (DP will be c 11415, | illed the s n against y ys of the o S). Comp required Oklahom | tate's lest your drive date listed pletion of to pay to na City, O artment | (180) (s) r license l below. f IDAP ma the State K 73136. | Sony preven |
| te:Place (location when signed):Signature of arresting officer: | | | A CONTRACTOR OF THE CONTRACTOR | | | | | | | | | |
| AGENCY PAPE, CHRISTOPHER DGE AGENCY BOARD OF TESTS DGE AGENCY ADDRESS ZIP CODE PHONE | | | | enalty of perjury | under the law | | | | | e and co | orrect." | Section |
| DGE JAGENCY ADDRESS ZIP CODE PHONE | ME | Victoria de la compansión de la compansi | nen aigneu) | | | 75.00 | and he do to | y onice | | | | |
| 000000484 INTER-AGENCY 00000 4054252460 | | AGENCY ADDRESS | | | DOARI | OF I | ZIP CODE | | | Jara a | Later 1 | |



Dr. Jarrad Wagner, Ph.D., F-ABFT Chairman Post Office Box 36307 Oklahoma City, Oklahoma 73136-2307 Phone: (405) 425-2460 Fax: (405) 425-2490 www.bot.ok.gov

Joshua Smith Director

Certificate of Analysis - Reference Solution

ALPHA INSTRUMENT

Intoxilyzer - Alcohol Analyzer

Model 8000

SN 80-002591

09/23/2022

09:37

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

| Manufacturer: Guth | Manufactured Date: 8/24/2021 | Concentration: 0.02 |
|---|---|---|
| Lot No.: 21340 | Expiration Date: 8/24/2023 | Equipment Model: Guth 2100 |
| prescribed by the State Director of Tests p to 40 OAC 25-1-2.1. Approved breath-alco | a Infrared Spectroscopy utilizing the Intoxilyzer 8000 and oursuant to 40 OAC 30-1-3. The above NIST traceable no ohol measurement equipment and reference solutions. E nits for Breath Alcohol Testers (72 FR 34747), published | eference solution meets the requirements for use pursuant guipment used appears on the current or supplemented |
| Signature | Date: 9/23/20 | 022 |
| Name Christopher Pape | Permit No.: 230 | 20 |



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

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

Joshua Smith Director

Certificate of Analysis - Reference Solution

ALPHA INSTRUMENT Intoxilyzer - Alcohol Analyzer Model 8000

10/24/2022

SN 80-002591 15:45

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

| Manufacturer: Guth | Manufactured Date: 10/4/2021 | Concentration: 0.040 | | |
|--|--|---|--|--|
| Lot No.: 21410 | Expiration Date: 9/30/2023 | Equipment Model: Guth 2100 | | |
| prescribed by the State Director of Tes to 40 OAC 25-1-2.1. Approved breath- Conforming Products List of Calibrating | via Infrared Spectroscopy utilizing the Intoxilyzer 8000 and ts pursuant to 40 OAC 30-1-3. The above NIST traceable alcohol measurement equipment and reference solutions. In Units for Breath Alcohol Testers (72 FR 34747), published | reference solution meets the requirements for use pursuant Equipment used appears on the current or supplemented | | |
| Signature Parties Part | Date: 10/24/ | /2022 | | |
| Name Christopher Pape | Permit No.: 23 | Permit No.: 23020 | | |



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

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

Joshua Smith Director

Certificate of Analysis - Reference Solution

ALPHA INSTRUMENT

Intoxilyzer - Alcohol Analyzer

Model 8000

SN 80-002591

06/27/2022

11:40

| Test | g/210L | Time |
|-----------------|--------|-------|
| Air Blank | 0.000 | 11:40 |
| Cal Check | 0.100 | 11:41 |
| Air Blank | 0.000 | 11:41 |
| Cal Check | 0.100 | 11:42 |
| Air Blank | 0.000 | 11:43 |
| Cal Check | 0.100 | 11:43 |
| Air Blank | 0.000 | 11:44 |
| Cal Check | 0.100 | 11:45 |
| Air Blank | 0.000 | 11:45 |
| Cal Check | 0.100 | 11:46 |
| Air Blank | 0.000 | 11:47 |
| Cal Check | 0.101 | 11:47 |
| Air Blank | 0.000 | 11:48 |
| Cal Check | 0.101 | 11:49 |
| Air Blank | 0.000 | 11:49 |
| Cal Check | 0.101 | 11:50 |
| Air Blank | 0.000 | 11:50 |
| Cal Check | 0.100 | 11:51 |
| Air Blank | 0.000 | 11:52 |
| Cal Check | 0.100 | 11:52 |
| Air Blank | 0.000 | 11:53 |
| Cal Check Stats | | |
| Average | 0.1003 | |
| Std Dev | 0.0004 | |
| Rel Std Dev(%) | 0.4815 | |

| NIST Traceable Breath-A | lcohol Equivalent (g/210L +/- 3%) Ratio of ethanol and | water free of test interfering substances. |
|---|---|---|
| Manufacturer: Guth | Manufactured Date: 03/07/2022 | Concentration: 0.10 |
| Lot No.: 22080 | Expiration Date: 03/07/2024 | Equipment Model: Guth 2100 |
| prescribed by the State Director of Tests to 40 OAC 25-1-2.1. Approved breath-ald Conforming Products List of Calibrating U | ia Infrared Spectroscopy utilizing the Intoxilyzer 8000 and pursuant to 40 OAC 30-1-3. The above NIST traceable recohol measurement equipment and reference solutions. Edults for Breath Alcohol Testers (72 FR 34747), published | eference solution meets the requirements for use pursuant |
| Name Christopher Pape | Date: 06/27/2 | 2022 |
| Name Christopher Pape | Permit No.: 230 | 20 |



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Joshua Smith Director

Certificate of Analysis - Reference Solution

ALPHA INSTRUMENT

Intoxilyzer - Alcohol Analyzer

Model 8000

SN 80-002591

11:11

06/27/2022

Std Dev

Rel Std Dev(%)

g/210L Time Test 0.000 11:11 Air Blank 0.199 11:12 Cal Check Air Blank 0.000 11:12 Cal Check 0.200 11:13 Air Blank 0.000 11:14 Cal Check 0.200 11:14 Air Blank 0.000 11:15 Cal Check 0.200 11:16 Air Blank 11:16 0.000 Cal Check 0.201 11:17 11:17 Air Blank 0.000 Cal Check 0.200 11:18 0.000 Air Blank 11:19 0.201 Cal Check 11:19 Air Blank 0.000 11:20 Cal Check 0.200 11:21 Air Blank 0.000 11:21 Cal Check 0.200 11:22 Air Blank 0.000 11:23 Cal Check 0.201 11:23 11:24 Air Blank 0.000 Cal Check Stats Average 0.2002

| Manufacturer: Guth | Manufactured Date: 02 | /07/2022 | Concentration: 0.20 |
|--|--|---|---|
| Lot No.: 22050 | Expiration Date: 02/0 | 7/2024 | Equipment Model: Guth 2100 |
| prescribed by the State Director of Test to 40 OAC 25-1-2.1. Approved breath-a Conforming Products List of Calibrating | s pursuant to 40 OAC 30-1-3. The abo lcohol measurement equipment and re Units for Breath Alcohol Testers (72 Fi | ive NIST traceable refe ference solutions. Equ R 34747), published by | as performed in accordance with the procedures erence solution meets the requirements for use pursuan ipment used appears on the current or supplemented the National Highway Traffic Safety Administration. |
| Signature | | Date: 06/27/20 | 022 |
| Name Christopher Pape | | Permit No.: 2302 | 0 |

0.0006

0.3159



KCVD 5/9/2022

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 21340 of
Alcohol Reference Solution for Simulator were analyzed by
gas chromatography on August 25, 2021, using a Perkin Elmer Gas
Chromatograph Autosystem XL S/N: 610N9030209, and found to contain
0.0242% (w/vol) ethyl alcohol. The expiration date for this lot
number is August 24, 2023 at 11:59 PM.

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

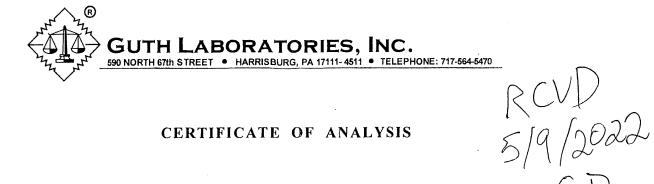
The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President GUTH LABORATORIES, INC.

NIST Traceability:

Testing was conducted using Cerilliant Reference Standard lot number FN05122004 whose values are traceable to NIST.

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



Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 21410 Alcohol Reference Solution for Simulator were analyzed by chromatography on October 4, 2021, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.0485% (w/vol) ethyl alcohol. The expiration date for this lot number is September 30, 2023 at 11:59 PM.

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

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

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

NIST Traceability:

Testing was conducted using Cerilliant Reference Standard lot number FN08211802 whose values are traceable to NIST.

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



5/9/2022

Certified Alcohol Reference Solution for Simulator

CP

Random Samples of Lot Number 22080 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on March 9, 2022, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1214% (w/vol) ethyl alcohol. The expiration date for this lot number is March 7, 2024 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.100 g/210L +/- 3%.

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

Ted L. Pauley, President GUTH LABORATORIES, INC.

NIST Traceability:

Testing was conducted using Cerilliant Reference Standard lot number FN03052002 whose values are traceable to NIST.

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



Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 22050 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on February 9, 2022, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.2437% (w/vol) ethyl alcohol. The expiration date for this lot number is February 7, 2024 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.200 g/210L +/- 3%.

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

Ted L. Pauley, President GUTH LABORATORIES, INC.

NIST Traceability:

Testing was conducted using Cerilliant Reference Standard lot number FN06231703 whose values are traceable to NIST.

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

| Location Returned From | Unit Serial # | 17/17 Date: | | |
|--|---|---|--|--|
| Troop B HQ | 80-004924 | 11/2/22 | | |
| Inventory Process Old Cylinder #: Old Cylinder #: Old Cylinder #: Old Cylinder disposed in inventory New Unit Checked out Remove old cylinder from unit (After Lab Evaluation) Old cylinder archived | | | | |
| Check in Procedure Connect unit to ethernet connection 172.019.004, 133 Download any stored records 3 Change unit location to Serial number Update Unit Date and time Previous time: 1/3/22 1029 New Time: 7 | Notes from the Field Routine Swap Issues in the Fiel | d | | |
| Lab Evaluation Breath Hose Hold Vacuum?: DVM | | | | |
| $3\mu \text{m} = \frac{13116}{13358}$ Chamber Temp $\frac{47.00}{15}$ | Snap Test ok? RFI Detected? | | | |
| Peripheral Tests Speaker (F5) Power LED Green (F6) Pump (F10) Atmospheric Sensor Pressure 948 Correction Factor 6 | Receipt paper Flow Sensor Tank Sensor | Is regulator close to Tank Sensor Value? Wes / No | | |
| Sent to CMI (If needed) Date Sent Invoice Sent Date Returned | | | | |
| Repairs needed: | Ready for Bench Check? | | | |
| Inventory Process □ Bench Check Technici □ Linked Cylinder to Unit □ Mock Subject Test Co □ Changed Unit Status □ Certificate of Calibrati □ Bench Check Report Completed □ Service Overview Com | mpleted | oviluzer Check-in sheet Version 2.0 | | |