

### 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:

1) The attached "Service Overview" is a true and accurate copy of maintenance performed on the Intoxilyzer 8000, serial number 80-005136, in compliance with the agency's Maintenance Policy and Procedures.

This packet consists of 16 pages.

Signed \_\_\_\_\_

Name of Position: Director/Records Custodian

Date of Attestation: 05/24/2022



Board of Yests for Alcohol and Drug Influence Entimicing public safety by ensuining the accuracy and scientific restability of blood and breath resting



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

#### **BENCH CHECK DATE:** <u>01-28-2019</u>

#### SERIAL: 80-005136

#### **DOCUMENTATION WITHIN SERVICE PACKET:**

- BOT Certificate of Calibration and Operation
- <u>CMI Certificate of Calibration 05-03-2018</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)

# 3/16 **Certificate of Calibration** This is to certify the calibration of IMOXILYZET ® serial number 80.005[3], 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 104 3, 2018 \_\_\_\_ Signed Technician 316 East 9th Street Owensboro, KY 42303 USA Part No. 650517 Rev.A

1

(()))



### 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>80-005136</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.



Presentation of this form certifies that the Intoxilyzer, SN: <u>80-005136</u>, functioned properly at the time of the breath test and hereby certifies the breath test result as valid.

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,

poher Blackelun

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

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

NCH CHECK DATE	TIME PROCEDU	a star helde over the o	INSTRUMENT LOCATION	6	
STRUMENT TYPE Intoxilyzer	- C - C - C - C - C - C - C - C - C - C	STRUMENT MODEL		INSTRUMENT SI	
4		and all the second second	RESULTS		
Sec.	1				
Diagnost PASS					
Mouth Alcoh PASS					
RFI Tes PASS			Marilana		1.5
Abort Te	est	1	Duplicate Breath	Sampling Re	esults
PASS	35.81	Valu	e Test 1	Test 2	Control Test
Improper Sam PASS	AOU 2012 12 12 12 12 12 12 12 12 12 12 12 12 1	. 02	0.018	0.019	0.020
Interferent Def	tect Test	.04	0.038	0.038	0.039
PASS	3	.10	0.097	0.096	0.099
No Sample Giv PASS		.20		0.194	0.197
Insufficient Sar PASS	nple Test		PA	ASS	
Air Blank Contam PASS					
Range Exceed PASS					
PASS	,				
Tanana da ana da		THE REPORT OF A DECK PARTY OF	G TECHNICIAN		
I swear under penalt the Intoxliyzer Benc	ch Checking P	nat in regards to rocedure approv	ed by the State of	of Oklahoma	have complied
				DATE	
K				C	01-28-2019
E				PERMIT #	1



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

#### **BENCH CHECK TECHNICIAN'S** REPORT

Date: 01 / 28 / 19 Start Time: 140

End Time: 1650

02-5-2021

### INSTRUMENT

Intoxilyzer Model Serial # 80-005136 8000

### **GAS CANISTER**

LOT # 344 18080A3 EXP Date

# 018

## REFERENCE

	Simulato	or Model	
Guth 2100	Guth 2100	Guth 2100	Guth 2100
	Ser	ial <u>#</u>	
DR3591	DR3753	DR3594	DR3754
	Conce	ntration	
.02	.04	.10	.20
	LO	<u>)T #</u>	
18020	17410	7410 18070	
	Manufact	ured Date	
01-09-2018	12-06-2017	02-26-2018	10-09-2017
	Expirati	on Date	
01-09-2020	12-06-2019	02-26-2020	10-09-2019
	Solution Com	mission Date	
1-17-19	1-17-19	1-17-19	1-17-19

## **REASON FOR BENCH CHECK**

POST REPAIR CYLINDER REPLACEMENT

TROUBLESHOOTING ROUTINE MAINTENANCE

## COMMENTS

1663 Technician Signature / Permit # osh 2

Printed Name

6/16

Certificate	e of Analysis – Dry Gas			
1-22-19 Date of Analysis	Labelled target value (g/210L)		ALPHA INSTRUM Intoxilyzer - Model 8000	1ENT 2 - Alcohol Analyzer 5
¢018 Cylinder#	. 9812 Average test result		01/22/2019	
BOT Technician Name and Signa	ture BRT Form !	• ty gases	Test	g/210L
In accordance with BOT Po referenced dry gas cylinder i	licy and Procedure Statement BRT-2.1.0, <i>Maintenance</i> , the abc s suitable for use as an external reference with the Intoxilyzer 800	0 • Jacksonville, IL 62651-0790 -7634 • www.ilmoproducts.com	Air Blank Cal Check Air Blank Cal Check	0,000 0,081 0,000 0,081
			Air Blank	0 000

# **Certificate of Analysis**

Certificate ID:	11669
Part #:	BAC105L080T
Cylinder Size:	1.05L
Lot Number:	34418080A3
Expiration:	2/5/2021 🗸

Recip. 19

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: +/-0.002 BAC(G/210L) NDIR Ethanol. 208 ppm [5.2 ppm] Nitrogen Balance

#### Distributed by:

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

Model 8000 01/22/2019	anna dan	SN 80-004923 09:32
Test	g/210L	Time
Air Blank	0.000	09:33
Cal Check	0.081	09:33
Air Blank	0.000	09:33
Cal Check	0.081	09:34
Air Blank	0.000	09:34
Cal Check	0.081	09:35
Air Blank	0.000	09:35
Cal Check	0.081	09:35
Air Blank	0.000	09:36
Cal Check	0.082	09:36
Air Blank	0.000	09:37
Cal Check	0.081	09:37
Air Blank	0.000	09:38
Cal Check	0.081	09:38
Air Blank	0.000	09:39
Cal Check	0.081	09:39
Air Blank	0.000	09:39
Cal Check	0.082	09:40
Air Blank	0.000	09:40
Cal Check	0.081	09:41
Air Blank	0.000	09:41
Cal Check Stats		
Average	0.0812	
Std Dev	0.0004	
Rel Std Deu(%)	0.5192	

G	R 16837
Operato	pr's Signature
	V

\*NIST Traceable Reference Material Cylinder No. CC274523 / Job No. 09160306 Certified 362.2 µmol/mol Ethanol in Nitrogen

Specialty Gas Lab Tech

Store in dry area, away from sources of heat, ignition and direct sunlight. Do not allow storage area to exceed 52  $^{\circ}$ C (125  $^{\circ}$ F).

01-03-19 Date



The calibration results within this certificate were obtained using equipment and standards capable of producing analytical results traceable to NIST, and apply only to the items contained on this certificate. ILMO Products Company makes no warranty or representation as to the suitability of the use of any information provided for any particular purpose. The information use is at the sole discretion and risk of the user. Liability shall be limited to established replacement cost of this material or service.

	<del>9</del> /16 <u>m</u>			
		•		strument to be serviced. se delays in service.
(Note: please s	ship items in the	ir original s	hipping container	(s) or a similar protective box.)
1. Contact informa	tion: Custon	ner Number	731362	(contact Customer Service)
Name: Board	l of Tests		Phone: ( <b>405</b> )	425 2460
Fax: ( <b>405</b> ) <b>425</b> 2	2490	Email:	bot@dps.state.ol	k.us
2. Bill to Address:	3600 N ML King,	Bldg 9	Ship to Address:	Board of Tests 3600 N ML King, Bldg 9
	OKC, OK 73111			OKC, OK 73111
3. Serial Number:	80-005136		Instrument Model:	Intoxilyzer 500 / 8000
check. Tried 4	ading extremely I	alves on sam	ple chamber, but no	breath hose is plugged during cal o change. Unable to resolve issue.
***Hazardous	s Material Warnin	g! - <u>DO NO</u> T	[ return gas cylinde	rs with instrument!***
	airs Up To:		\$500 ∑\$750 Ω_if applicable)	Other \$
Authorized By:			Ship	to:
Joshua Smith		Breath Alcohol Program Admir		
Name Rease Prin	nt)	Title	CMI	, Inc
		02/28/201	8 Attr	n: Service Dept.
Signature		Date	316	East Ninth Street
V Cal	. 405-425-2460 Fax 405-42	25-2490	Ow	ensboro, KY 42303
No, please send	d estimate before	repairs are	made.	
Note: An es	stimate will be fay	ed <u>before</u> p	erforming any repai	rs and may cause delays in service
An evaluati	on fee (\$79.00 oi	r actual costs	s) will apply to estin	nates that are not repaired.

DATE	INC.		SERVICE	
BCVD VIA 316 E. 9 <sup>th</sup> St., Phone	Owensboro KY 866-835-0690 270-685-6268	42303	40	1732
BILL TO:	SHIP T	0:0 K	Board o	f Tests
ATTN:	ATTN:			
	3600	NC	ML Kine	)
	131d a	29		
CITY STATE ZIP	CITYC	0	OK	7311ZP
CUSTOMER NO. 7313.62	PHONE	5-4	25-246	C
PHONE	FAX (()	5- 4	25-249	6
MODEL # 8000/ SERIAL # 80-005136	0000	1480	OK	BILL CODE
EXTRA-PARTS ROVD	2.0			
DESCRIPTION OF PROBLEM. Sulution reading extremely low. Needs	and have	Incare	0.1001:1.	al' .
		1000	PARTS	Transaction of the second s
Infrared / Fuel Cell PRELIMINARY TEST INFORMATION Solution reading low and gas reading to Josh Smith requests flow Sensor	high.	QTY	PART NO.	DESCRIPTION
replacement. Fan filter deterioration	VERIFIED PROBLEM?	1	470202	Filter, Foam
WORK PERFORMED:			210120	Sensor, SMD
Replaced flow sensor and fan F.	Iter.			
Dat ad system and update di	iecks.			
Autocal performed to correct 11	iproper			
Replaced flow sensor and tan f. Performed system and update du Autocal performed to correct in readings.		(		
Miscellaneous PRELIMINARY TEST INFORMATION				
WORK PERFORMED:				
BV				
GTW CAL. ADJ. CALIBRATON FINAL			SHIPPING STI	CKER HERE
½ HOURS HOURS HOURS HOURS   4 0 5 1 1   DATE DATE DATE DATE			SPECIAL SHIPPING	INSTRUCTIONS
Apr. 27, 18 May 1, 18 May 3, 18 May 3,	18		X.	
FORM# CMI SWO REV (1)				

# **OFFICER'S AFFIDAVIT AND NOTICE OF REVOCATION/DISOUALIFICATION**

10/16

	-			<b>X</b> • • •			~ '			Section 1
ARREST DATE 01/28/201	19	ARREST TIME		COUNTY 55		CITY #	CITATION			
ARREST LOCATION					CITY				LAHOM	
	BJECT TEST					те оғ віктн ) 8 / 0 9 / 1 9		RACE W	HEIGHT	WEIGHT
	TIN LUTHER	KING A	СІТ	KLAHOMA			STATE OK		ZIP CODE 7313	
DRIVER LICENSE # T0834548'	71			EXPIRATION	<sup>DATE</sup> 0/201	9 OK	A A		N	-
VEHICLE MAKE MOCK		MODEL MOCK				MOCK		STATE OK		ACARD
highway, street, turnpike, p influence of alcohol and/or (Describe driving behavior	and location, the above name oublic parking lot, or other pu other intoxicating substance or circumstances): CT TEST. POS	blic place, or upon a private s as prohibited by law.	road, street, a	alley or lane which provide	es access to o	one or more single or r	iysical control o nulti-family dwo	of a motor ve elling within t	hicle upon a pu his state while	ublic road, under the
Describe person's conditio	n (odor, actions, etc.):									
NONE										
		THE PERSON V	VAS INFORMI	ED OF THE IMPLIED CO	ONSENT TES	T REQUEST				
	LYSIS RECORD, REPORT				EST AND M	INTENANCE RECOR	RD.			Section 2
EQUIPMENT			NUMBER -00513	B6 BOARD	OF T	ESTS				
STANDARD		100	TARGET	VALUE	PERMIT N	UMBER				
Dry			0.0	080	168	37	יעו	TE CYLINDE	REXPIRES	
ILMO	Y			18080A3	01/	28/2019			/2021	
OBSERVATION START	TEST DATE 01/28/201	9 G		minute (or greate			on			
RESULT TABLE	01/20/201		peri	iod was observed	•	Ų			THE STA	
Test	g/210L	Time		to the time of t	est admin	istration.		OF .	· *	
Air Blank Subject Test Breath Volu Air Blank Wait Air Blank Subject Test Breath Volu Air Blank	0.00 0.00 0.00	15:01 15:02 15:03 15:04	comp p signati	nistered said l liance with the procedure of th	e applic	able operation		OREAT BE		OFFIC A
Cal Check Air Blank	0.08 0.00	15:04 15:05	NAME SMITH,	JOSHUA					Test Resu	
nii blunk	0.00	13.05	BADGE # 00000	000435	PERMIT #	0016837		Bi	AC g/21	
				OF TESTS				•		<b>,</b>
period of one hundre this state will be disc commercial motor ve an Administrative He	Y (30) DAYS FROM L ed eighty (180) days o qualified if you refused shicle. To appeal the paring within fifteen ( LK Ave. or by mail to	r more, if you refused or failed the state's driver's license revod <b>15) days from the c</b>	d or failed t test(s) (ope cation/disqu <b>late you re</b>	he state's test(s). I erating a CMV or Cl ualification, the Dep ceived notice of r	n addition, DL holder) artment o <b>evocatio</b> n	your commercia OR a test result f Public Safety m or disqualifica	I driving pr of .04 or m ust receive <b>tion.</b> Subn	ivilege in tore while a your writ	operating a ten request	for
	CE: I personally hand			containing the Notic	ce of Revo	cation to the per	son named	in Sectio	n 1 above.	
	28/2019							adge #:		
	itle 12 O.S. Section 4		nalty of pe	<b>rjury</b> under the law	vs of Oklah	noma that the for	egoing is tr	ue and co	orrect."	Section 4
Date: 01/28/2	2019 Place (locati	on when signed):		AGENCY	Signat	ure of arresting o	officer:			
SMITH, J	JOSHUA			BOARI	OF	TESTS				
BADGE 0000000043	5 AGENCY ADDRESS	GENCY					PHONE <b>40</b> 5	54252	460"	
OTHER WITNESSE	S:									Section 5
NAME			TITLE	ADDRESS			PHON	E		
1 NAME			TITLE	ADDRESS			PHON	E		
2										
No Temporary Li	cense Issued:		OFFI		,					

# OFFICER'S AFFIDAVIT AND NOTICE OF REVOCATION/DISQUALIFICATION

12/16

pts							1				Section
ARREST DATE 01/28/2019		RREST TIME		COUNTY #	СІТ	Y #	СІТ	ATION #			
	I			СІТ	Y		I		COUNT		м <i>т</i> л
SUBJECT NAME					DATE O			SEX	RACE	LAHO	WEIGHT
MOCK, SUBJE	CT TEST		CITY		08/	09/19		M	W	510	
3600 MARTIN	LUTHER	KING A		HOMA CIT	Y	1074	C	)K	Inchi	731	.33
$\frac{\text{DRIVER LICENSE } \#}{\text{T083454871}}$				EXPIRATION DATE		STATE OK	CLASS A		RESTRI		ENDORSEMENTS
VEHICLE MAKE MOCK					TAC	;# IOCK			TE K	CMV N	PLACARD
On the above date, time, and loca highway, street, turnpike, public p		erson was arrested, an	d I had reasonable grour		was drivir	ng or in actual p		ontrol of a	motor ve	hicle upon	a public road,
influence of alcohol and/or other in (Describe driving behavior or circu	ntoxicating substances a		e road, succe, ancy or far	ie which provides access		more single of	mana-ran	iny uwein	ig within t	115 State W	
MOCK SUBJECT		REPAIR. N	NEW GAS CAN	ISTER INST	ALL.						
Describe person's condition (odor	, actions, etc.):										
NONE											
		THE PERSON	WAS INFORMED OF TH	E IMPLIED CONSENT	теат об	OUFST					
BREATH-ALCOHOL ANALYSIS	RECORD, REPORT OF					-	RD.				Section 2
EQUIPMENT		SERIAL	NUMBER S	PECIALIST							
STANDARD		80-	TARGET VALUE	PERM	TES						
Dry MANUFACTURER	·····		0.080		837	RINSTALLED		DATE		REXPIRE	c
ILMO	~~~~~		344180	80A3 01	/28	/2019				/202	
OBSERVATION START TEST 1410 01	DATE /28/2019	MOUTHPIECE		(or greater) dep							
RESULT TABLE	,,_010		} -	s observed prior e time of test adr		-	3			THE S	TATE
Test	g/210L	Time		e une or test adi	mistra	ation.		-	Se .		
Air Blank	0.00	15:00	I administer	ed said Breat	h-Alc	ohol Tes	st in				+++
Subject Test	0.00 2 144 LITTERS	15:00	compliance	e with the app	licabl	e operat:	ing	[			
Breath Volume Air Blank	2.144 LITERS 0.00	15:01		lure of the Bo		-	e	\	al***		(* + + E
Wait	0.00	15:02							15		
Air Blank Subject Test	0.00 0.00	15:03 15:04							ľ	***	
Breath Volume	1.324 LITERS	45.01	SIGNATURE OF C	PERATOR						1907	
Air Blank Cal Check	0.00 0.08	15:04 15:04	NAME	5011					г	est Re	ault
Air Blank	0.00	15:04	SMITH, JC	SHUA	<b>T</b> #					AC g/2	
			00000004			16837					
			AGENCY BOARD OF	TESTS					(		0
EFFECTIVE THIRTY (30)	DAYS FROM DA	TE SERVED. No	tice of Revocation	n is given that your	driver's	license is	revoke	d or der	ied for	а	Section 3
period of one hundred eigl his state will be disqualifie	nty (180) days or m	ore, if you refuse	d or failed the state	s test(s). In additi	ion, you	r commerci	al drivi	ng privil	ege in		
commercial motor vehicle	. To appeal the dri	ver's license revo	cation/disqualificat	ion, the Departmer	nt of Pul	olic Safety r	nust re	ceive y	our writ	ten requ	est for
an Administrative Hearing	within fifteen (15	) days from the <b>(</b>	date you received	notice of revocat	ion or	disqualifica	ation.	Submit	your wi	ritten re	quest in
berson at 3600 N. MLK Av											
SERVING OF NOTICE:				ng the Notice of R	evocatio	on to the pe	rson na	amed in	Section	n 1 abov	e.
Date served: 01/28	<b>3/2019</b> s	ignature of officer						Bad	ge #:		
n accordance with Title 12	2 O.S. Section 426	"I state under pe	nalty of perjury u	nder the laws of Ol	klahoma	a that the fo	regoin	g is true	and co	rrect."	Section 4
Date: 01/28/201	9 Place (location	when signed):			nature	of arresting	officer:				
SMITH, JOS		.ak		AGENCY BOARD OF	' TE	STS					
	AGENCY ADDRESS	ENCY					PHC		250	460'	1
	THIN YO					00000	<u></u>	1034	252	400'	

		Certificate of Analysis – Wet Bath					
		09-26-2018	02003/16				
	)	Date of Analysis	Labelled target value (g/210L)				
Jun An		, 18020	0.0204	the marter			
2010-	GUTH LABORATORIE	SENUTONC.	Average test result (g/210L)				
"hand "	590 NORTH 67th STREET O HARRISBURG, PA 1711	-4511 Ø TELEPHONE: 717-	-564-5470				
×.		BOT Technician Name and Signature	OTUIP CO	BRT Form 6.0			
-		In accordance with BRT – 2.1.	0, Maintenance, ne above referenced simu	làtor solution is			

Suitable for use as an external reference in maintenance of the Intoxilyzer 8000.

Certified Alcohol Reference Solution for Simulator

intoxilyzer - Alcohol Analy Model 8000 09/26/2018		5N 80-00259 15:3	
Test	g/210L	Tine	
Air Blank	.0,000	15:36	
Cal Check	0.020	15:37	
Air Blank	0.000	15:37	
Cal Check	0.020	15:38	
Air Blank	0.000	15:39	
Cal Check	0,020	15:39	
Rir Blank	0.000	15:40	
Cal Check	0.020	15:41	
Air Blank	0,000	15:41	
Cal Check	0,020	15:42	
Air Blank	0.000	15:42	
Cal Check	0.020	15:43	
Air Blank	0.000	15:44	
Cal Check	0.021	15:44	
Air Blank	0.000	15:45	
al Check	0.021	15:46	
ir Blank	0.000	15:46	
al Check	0.021	15:47	
ir Blank	0.000	15:47	
al Check	0.021	15:48	
ir Blank	0.000	15:49	
al Check Stats			
Average	0.0204		
Std Dev	0.0005	м.	
Rel Std Deu(%)	2.5312		

Operate

Signature

Random Samples of Lot Number 18020 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on January 11, 2018, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.0238% (w/vol) ethyl alcohol. The expiration date for this lot number is January 9, 2020 at 11:59 PM.

When used in a calibrated Simulator, operating at  $34^{\circ}C$  +/- .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 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.

		Certificate of Analysis – Wet Bath		A ANTIN TA
A.@		09-26-18	,040	
1 12	A	Date of Analysis	Labelled target value (g/210L)	
(AA) GI	UTH LABORATOR	EG IN17410	0.0396	A HOL
34 590 N	ORTH 67th STREET O HARRISBURG, PA	17111 ASI	Average test result (g/210L)	
V		, JOSH SMITH		
12 Aug 10 Aug		BOT Technician Name and Signature	2	BRT Form 6.0
	CERTIFICATE OF	In accordance with BRT – 2.1.	0, Maintenance, the above referenced simu reference in maintenance of the Intoxilyzer	ilator solution is 8000.

### Certified Alcohol Reference Solution for Simulator

Intoxilyzer - Nodel 8000 09/26/2018		SN 80-002591 15:54
Test		-12
Test	g/210L	Tine
Air Blank	0.000	15:54
Cal Check	0.040	15:55
Air Blank	0.000	15:56
Cal Check	0.039	15:56
Air Blank	0.000	15:57
Cal Check	0.039	15:58
Air Blank	0.000	15:58
Cal Check	0.040	15:59
Air Blank	0.000	15:59
Cal Check	0.040	16:00
Air Blank	0.000	16:01
Cal Check	0.040	16:01
Rir Blank	0.000	16:02
Cal Check	0.039	16:03
Air Blank	0.000	16:03
Cal Check	0,040	16:04
Air Blank	0.000	16:04
Cal Check	0.040	16:05
Air Blank	0.000	16:06
Cal Check	0.039	16:06
Air Blank	0.000	16:07
Cal Check Stats		
Ruerage .	0.0396	
Std Dev	0.0005	
Rel Std Deu(%)	1.3040	

ALPHA INSTRUMENT

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

Ted L. Pauley, President GUTH LABORATORIES, INC.

NIST Traceability:

68

Operator's Signature

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.

Certificate of An	alysis – Wet Bath		
09-27-2018 Date of Analysis	.100		
18070	11ed greet value (g/210L)	True of	
lost and	590 NORTH 67th STREET	• HARRISBURG, PA 17111- 4511	INC. • TELEPHONE: 717-564-5470
BOT Technician Name and Signature		BRT Form 6.0	

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

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Intoxilyzer - Alcohol Anal Model 8000 09/27/2018		SN 80-00259 08:2	
Test	g/210L	Time	
Air Blank	0,000	08:28	
Cal Check	0.100	08:29	
Air Blank	0.000	08:29	
Cal Check	0.100	08:30	
Air Blank	0.000	08:31	
Cal Check	0.099	08:31	
Air Blank	0.000	08:32	
Cal Check	0.100	08:33	
Air Blank	0.000	08:33	
Cal Check	0.100	08:34	
Air Blank	0.000	08:34	
Cal Check	0.100	08:35	
Air Blank	0.000	08:36	
Cal Check	0.099	08:36	
Air Blank	0.000	08:37	
Cal Check	0.099	08;38	
Air Blank	0.000	08:38	
Cal Check	0.099	08:39	
Air Blank	0.000	08:39	
Cal Check	0.100	08:40	
ir Blank	0,000	08:41	
Cal Check Stats			
Average	0.0996		
Std Deu	0.0005		
Rel Std Dev(%)	0.5184		

Operator

Signatur

Random Samples of Lot Number 18070 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on February 28, 2018, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1219% (w/vol) ethyl alcohol. The expiration date for this lot number is February 26, 2020 at 11:59 PM.

When used in a calibrated Simulator, operating at  $34^{\circ}C$  +/- .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 FN04271602 whose values are traceable to NIST. All balances are calibrated annually by an outside agency using NIST traceable weights. Calibration verification is done prior to each use utilizing NIST traceable weights.

#### HLABORATORIES, INC. STILL STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

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

Labelled target value (g/210L)

test result (g/210L)

507

,200

0,1968

Certificate of Analysis - Wet Bath

09-27-2018

BOT Technician Name and Signature

Date of Analysis

Lot Number

17340

#### CERTIFICATE OF ANALYSIS

BRT Form 6.0

Certified Alcohol Reference Solution for Simulator

Intoxilyzer - Alcohol Anal Model 8000 09/27/2018		SN 80-D0259 15:2	
Test	g/210L	Tine	
Air Blank	0.000	15:27	
Cal Check	0,196	15:28	
Air Blank	0.000	15:29	
Cal Check	0.196	15:29	
Air Blank	0.000	15:30	
Cal Check	0.197	15:31	
Air Blank	0.000	15:31	
Cal Check	0.197	15:32	
Air Blank	0.000	15:33	
Cal Check	0.197	15:33	
Air Blank	0.000	15:34	
Cal Check	0.197	15:35	
Rir Blank	0.000	15:35	
al Check	0.197	15:36	
ir Blank	0.000	15:36	
al Check	0.197	15:37	
lir Blank	0.000	15:38	
al Check	0.197	15:38	
ir Blank	0.000	15:39	
al Check	0.197	15:40	
ir Blank al Check Stats	0.000	15:40	
Average	0.1968		
Std Deu	0.0004		
Rel Std Dev(%)	0.2142		

Operator

Signatur

Random Samples of Lot Number 17340 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on October 10, 2017, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.2410% (w/vol) ethyl alcohol. The expiration date for this lot number is October 9, 2019 at 11:59 PM.

When used in a calibrated Simulator, operating at  $34^{\circ}C$  +/- .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.