



**STATE OF OKLAHOMA
BOARD OF TESTS FOR ALCOHOL AND DRUG INFLUENCE**

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

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

Joshua Smith
Director

ATTESTATION

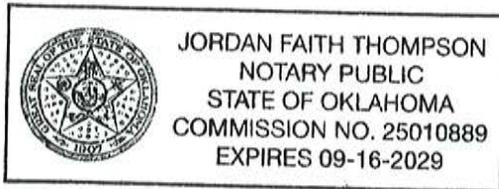
I, the undersigned *Joshua Smith* (Director/Records Custodian), attest under oath pursuant to 12 O.S. §2902 this record was made, at or near the time of the occurrence of the matters set forth by or from information transmitted by a person having knowledge of those matters; was kept in the course of 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 80-005977, in compliance with the agency's Maintenance Policy and Procedures.

Signed

Joshua Smith

Name of Position: Director/Records Custodian



State of Oklahoma

County of Oklahoma

Signed or attested before me on 03/09/2026 by

Joshua Smith.

Jordan Faith Thompson
(Signature of notarial officer)

Service Overview

Board of Tests for Alcohol and Drug Influence
*Enhancing public safety by ensuring the accuracy and scientific reliability
of blood and breath testing.*



3600 N. Martin Luther King Bldg #1
Oklahoma City, OK 73111
405-425-2460

BENCH CHECK DATE: 03/06/2026

SERIAL: 80-005977

DOCUMENTATION WITHIN SERVICE PACKET:

- BOT Certificate of Maintenance, Calibration, and Operation
- Bench Check
- CMI Certificate of Calibration
- CMI Evaluation Form
- CMI Work Order
- 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.

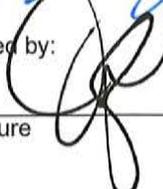
1. Maintenance was performed on the Intoxilyzer 8000, Serial No. 80-005977 on 03/06/2026 in accordance with 40 O.A.C. 30-1-3 and internal BOT maintenance policy and procedures.
2. A dry gas canister appearing on the National Highway Traffic Safety Administration's Conforming Products List of Calibrating 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.: 31425080A1-056
 - BOT analysis average test result: 0.082
 - Cylinder expiration date: 1/5/2028
3. In accordance with 40 O.A.C. 25-1-2.1, the approved reference standards and equipment were used:

Simulator Model			
Guth 12V500	Guth 12V500	Guth 12V500	Guth 12V500
Serial #			
MP9201	MP9202	MP9203	MP9204
Concentration			
.02	.04	.10	.20
Lot #			
25310	25090	25282	25360
Manufactured Date			
9/3/2025	3/11/2025	8/12/2025	10/21/2025
Expiration Date			
9/3/2027	3/11/2027	8/12/2027	10/21/2027
Solution Commission Date			
2/26/2026	2/26/2026	3/6/2026	3/6/2026

Completed by BOT Personnel:


Signature _____ Christopher Pape
Name

Breath-Alcohol Testing Program Administrator
Title _____

Certified by: 
Signature _____ Joshua Smith
Name

State Director
Title _____

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

BENCH CHECK DATE 03/06/2026	TIME PROCEDURE BEGAN 12:52:5	INSTRUMENT LOCATION 80-005977
INSTRUMENT TYPE Intoxilyzer	INSTRUMENT MODEL I-8000	INSTRUMENT SERIAL NUMBER 80-005977

TEST RESULTS

Diagnostics

PASS

Mouth Alcohol Test

PASS

RFI Test

PASS

Abort Test

PASS

Improper Sample Test

PASS

Interferent Detect Test

PASS

No Sample Given Test

PASS

Duplicate Breath Sampling Results

Value	Test 1	Test 2	Control Test
.02	0.016	0.016	0.018
.04	0.036	0.034	0.037
.10	0.094	0.093	0.097
.20	0.193	0.194	0.199

PASS

Insufficient Sample Test

PASS

Air Blank Contamination Test

PASS

Range Exceeded Test

PASS

CERTIFYING TECHNICIAN

I swear under penalty of perjury that in regards to the above listed instrument, I have complied with the Intoxilyzer Bench Checking Procedure approved by the State of Oklahoma.

SIGNATURE 	DATE 3/6/2026
NAME PAPE, CHRISTOPHER	PERMIT # 0000023020

CMI INC.

Service Evaluation Form

This form MUST be completed and enclosed with item to be serviced.

***** Hazardous Material Warning! – DO NOT return gas cylinder with instrument! *****

Note: Please ship items in their original shipping container.

Contact information:

Name Chris Pape **Phone:** (405) 425-2460
Email: christopher.pape@bot.ok.gov **Customer #** 731362 (contact Customer Service)

Your Billing Address

Agency Name: Board of Tests
Address: 3600 N ML King, Bldg 9
City: Oklahoma City **State:** OK **Zip:** 73111
Credit Card/PO #: _____
Name on Card: _____
Expiration Date: _____ **CVV** _____

Your Shipping Address

Agency Name: Board of Tests
Address: 3600 N ML King, Bldg 9
City: Oklahoma City **State:** OK **Zip:** 73111
Contact Person: Chris Pape
Contact Phone: (405) 425-2460
Email: christopher.pape@bot.ok.gov

Instrument Serial Number: 80-005977

Detailed Description of Problem:

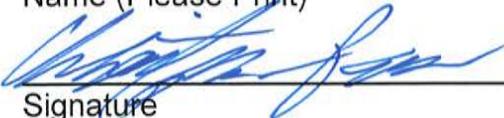
Unit will not POST

Note: For instruments not under warranty, an evaluation fee of \$83.00 (infrared and I-200) or \$43.50 (fuel cell), plus return shipping cost, will apply to all service items.

I authorize all repairs up to \$500 to be performed.

After repair, add "Certificate of Calibration" for: S-D2, S-D5, and I-800 (\$19)
 I-200, I-240, I-300, I-400, and I-600 (\$39)

Authorized By:

<u>Chris Pape</u>	<u>Breath Testing Admin</u>
Name (Please Print)	Title
	<u>6/4/2025</u>
Signature	Date

Ship item to:

CMI, Inc.
Attn: Service Dept.
316 East Ninth Street
Owensboro, KY 42303

Certificate of Calibration

This is to certify the calibration of **Intoxilyzer**® serial number 80-005977, 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 Nov. 25, 2025 Signed Christopher Marshall

Technician

CMI INC.

316 East 9th Street
Owensboro, KY 42303
USA

Part No. 650517 Rev.A



7/20

DATE: 6/11/2025

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

SERVICE WORK ORDER

409686

Bill To:
OK BOT
PO Box 36307
Oklahoma City, OK 73136-2307
USA
Customer #: 731362
Phone: 405-425-2424
Fax: 405-425-2490 fax

Ship To:
Oklahoma Board Of Tests
3600 Martin Luther King
Bldg #1
Oklahoma City OK 73136-3000
USA
Phone: 405-425-2424

MODEL #: 0024800K

Serial Number: 80-005977

BILL CODE: Out of Warranty

EXTRA PARTS RCVD:

BH, KB, BATTERY, GAS SHELF

DESCRIPTION OF PROBLEM

UNIT WILL NOT POST.

WORK PERFORMED:

Replaced parts listed; calibrated/final tested; software 8133.16

PARTS USED

Seq. No.	Part	Description	Quantity
40	FREIGHT	Service Freight	1.00 EA
100	650517	CERTIFICATE OF CALIBRATION	2.00 EA
110	441169	COVER DUST,5/8in x 1/2in	1.00 EA
120	470145	CAP,PLASTIC,.25IDx.50LG,RED	3.00 EA
130	470154	CAP,PLSTC,.406IDx.438-.562,RED	1.00 EA
140	470218	SEAL,TAMPER EVIDENT,SERVICE	1.00 EA
150	R021270G111T	PWB ASSY,SYSTEM,I8000,REQUAL,	1.00 EA
160	R150027	Requalified KEYBOARD, MINI, BL	1.00 EA
170	R210131	SENSOR,PRESSURE,1000PSI REQUAL	1.00 EA
180	690040	BATTERY,3VOLT,LITHIUM,CR2032	1.00 EA
190	470202	FILTER,FOAM,1.85x2.20	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

Technician Name: Jacob Brown

SRV4096860001





STATE OF OKLAHOMA
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Chairman

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Joshua Smith
Director

Certificate of Analysis – Dry Gas

ALPHA INSTRUMENT

Intoxilyzer - Alcohol Analyzer

Model 8000

SN 80-002591

01/14/2026

09:55

Test	g/210L	Time
Air Blank	0.000	09:56
Cal Check	0.082	09:56
Air Blank	0.000	09:56
Cal Check	0.082	09:57
Air Blank	0.000	09:57
Cal Check	0.081	09:58
Air Blank	0.000	09:58
Cal Check	0.082	09:58
Air Blank	0.000	09:59
Cal Check	0.082	09:59
Air Blank	0.000	10:00
Cal Check	0.082	10:00
Air Blank	0.000	10:01
Cal Check	0.082	10:01
Air Blank	0.000	10:01
Cal Check	0.082	10:02
Air Blank	0.000	10:02
Cal Check	0.082	10:03
Air Blank	0.000	10:03
Cal Check	0.082	10:03
Air Blank	0.000	10:04
Cal Check Stats		
Average	0.0819	
Std Dev	0.0003	
Rel Std Dev (%)	0.3861	

Known Breath-Alcohol Equivalent (g/210L) Ratio of Nitrogen and Ethanol Gas (208 ppm/105 L)
0.08 g/210L = 208 PPM + 2605*

Manufacturer: ILMO	Manufacturer Cert. No.: 17662	Cylinder Size: 105L
Lot No.: 31425080A1	Cylinder No.: 056	Expiration Date: 01/05/2028
<p>The above 105 L cylinder has been analyzed via Infrared Spectroscopy utilizing the Intoxilyzer 8000 and was performed in accordance with the procedures prescribed by the State Director of Tests pursuant to 40 OAC 30-1-3. The above NIST traceable reference standard meets the requirements for use as a calibrating unit in accordance with 47 O.S. 759, 40 OAC 25-1-3, and appears on the current conforming products list of calibrating units for breath alcohol testers published by the U.S. Department of Transportation in the Federal Register [77 FR 64588 et seq]. * See Dubowski, K.M. and Essary N., <i>Journal of Anal. Toxicol.</i> (1996) 20(6): pp. 484-491. [g/210L = PPM +2605].</p>		
Signature 	Date: 01/14/2026	
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: 17662
Part #: BAC105L080T
Cylinder Size: 105L
Lot Number: 31425080A1
Expiration: 1/5/2028

RCVD
 1/7/26
 CP

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

Contents: 105 Liters @ 1000 psig 70°F (21°C)

Component:	Reported Concentration:	Analytical Accuracy (U, k=2): abs	Analytical Method:
Ethanol	208 ppm	+/-0.002 BAC(6/210L) [5.2 ppm]	NDIR
Nitrogen	Balance		

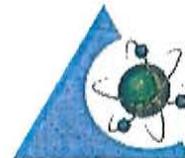
Distributed by:
 CMI Inc.
 316 East Ninth Street
 Owensboro, KY 42303
 Phone 866-835-0690
www.alcoholtest.com

*Reference Standard:
 NIST Traceable Certified Reference Material - 260.6 µmol/mol
 Ethanol in Nitrogen - Serial No. GN0015020 Lot No. 00424E1

Store in dry area, away from sources of heat, ignition and direct sunlight. Do not allow storage area to exceed 52 °C (125 °F).

Specialist Gas Lab Tech

12-12-2025
 Issuance Date



FJIA
 Testing
 Accreditation #61895

The calibration results within this certificate were obtained at the facility listed above 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. This certificate applies only to the items described and shall not be reproduced other than in full, without written approval from the Issuing facility.

OFFICER'S IMPAIRED DRIVING AFFIDAVIT

10/20

Section 1

ARREST DATE 03/06/2026		ARREST TIME 1330		COUNTY # 55		CITY #		CITATION #	
ARREST LOCATION BOT				CITY			COUNTY OKLAHOMA		
SUBJECT NAME NORTH, GAYLON LEVERNE				DATE OF BIRTH 08/09/1961		SEX M	HEIGHT 510	WEIGHT 165	
ADDRESS 3600 MARTIN LUTHER KING A			CITY OKLAHOMA CITY			STATE OK		ZIP CODE 73133	
DRIVER LICENSE # T083454871			EXPIRATION DATE 06/30/2019		STATE OK	CLASS A	RESTRICTIONS	ENDORSEMENTS M	
VEHICLE MAKE MOCK		MODEL MOCK		TAG # MOCK		STATE OK	CMV N	PLACARD N	

On the above date, time, and location, the above named person was arrested, and I had reasonable grounds to believe the person was driving or in actual physical control of a motor vehicle upon a public road, highway, street, turnpike, public parking lot, or other public place, or upon a private road, street, alley or lane which provides access to one or more single or multi-family dwelling within this state while under the influence of alcohol and/or other intoxicating substances as prohibited by law.

(Describe driving behavior or circumstances):

MOCK 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

BREATH-ALCOHOL ANALYSIS RECORD, REPORT OF THE PERSON NAMED IN SECTION 1 ABOVE, and LOG OF TEST AND MAINTENANCE RECORD.

Section 2

EQUIPMENT I-8000		SERIAL NUMBER 80-005977		SPECIALIST BOARD OF TESTS																																			
STANDARD Dry		TARGET VALUE 0.080		PERMIT NUMBER 23020																																			
MANUFACTURER ILMO		LOT # 31425080A1		DATE CYLINDER INSTALLED 03/06/2026	DATE CYLINDER EXPIRES 01/05/2028																																		
OBSERVATION START 1345	TEST DATE 03/06/2026	<p>A 15-minute (or greater) deprivation/observation period was observed prior to and continuing to the time of test administration.</p> <p>I administered said Breath-Alcohol Test in compliance with the applicable operating procedure of the Board of Tests.</p>  SIGNATURE OF OPERATOR																																					
RESULT TABLE																																							
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Test</th> <th style="text-align: left;">g/210L</th> <th style="text-align: left;">Time</th> </tr> </thead> <tbody> <tr><td>Air Blank</td><td>0.00</td><td>14:12</td></tr> <tr><td>Subject Test</td><td>0.00</td><td>14:13</td></tr> <tr><td style="padding-left: 20px;">Breath Volume</td><td>1.777 LITERS</td><td></td></tr> <tr><td>Air Blank</td><td>0.00</td><td>14:13</td></tr> <tr><td>Wait</td><td></td><td>14:15</td></tr> <tr><td>Air Blank</td><td>0.00</td><td>14:15</td></tr> <tr><td>Subject Test</td><td>0.00</td><td>14:16</td></tr> <tr><td style="padding-left: 20px;">Breath Volume</td><td>1.773 LITERS</td><td></td></tr> <tr><td>Air Blank</td><td>0.00</td><td>14:16</td></tr> <tr><td>Cal Check</td><td>0.08</td><td>14:17</td></tr> <tr><td>Air Blank</td><td>0.00</td><td>14:17</td></tr> </tbody> </table>		Test	g/210L	Time	Air Blank	0.00	14:12	Subject Test	0.00	14:13	Breath Volume	1.777 LITERS		Air Blank	0.00	14:13	Wait		14:15	Air Blank	0.00	14:15	Subject Test	0.00	14:16	Breath Volume	1.773 LITERS		Air Blank	0.00	14:16	Cal Check	0.08	14:17	Air Blank	0.00	14:17		
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Air Blank	0.00	14:17																																					
		NAME PAPE, CHRISTOPHER		<div style="border: 1px solid black; padding: 5px; text-align: center;"> Test Result BrAC g/210L 0.00 </div>																																			
		BADGE # 0000000484	PERMIT # 0000023020																																				
		AGENCY BOARD OF TESTS																																					

Section 3

What happens next?

1. Upon receipt and review of the Officer's Impaired Driving Affidavit and any associated test results, if applicable, the State of Oklahoma may revoke your Oklahoma driving privileges.
2. If you hold a commercial driver license or were driving a commercial motor vehicle, the State of Oklahoma may disqualify your privilege to operate a commercial motor vehicle.
3. You will continue to have driving privileges, if otherwise eligible, unless or until an Order of Revocation and/or Disqualification is issued by the State of Oklahoma.
4. The State of Oklahoma will send you the Order of Revocation and/or Disqualification to the address you have on file with Service Oklahoma.
To confirm or change your address on file, contact Service Oklahoma.
5. The Order and Notice of Revocation will inform you of your requirements to regain driving privileges in Oklahoma.

In accordance with Title 12 O.S. Section 426, "I state under penalty of perjury under the laws of Oklahoma that the foregoing is true and correct."

Section 4

Date: _____ Place (location when signed): _____ Signature of arresting officer: _____

NAME PAPE, CHRISTOPHER		AGENCY BOARD OF TESTS	
BADGE 0000000484	AGENCY ADDRESS INTER-AGENCY	ZIP CODE 00000	PHONE 4054252460

OTHER WITNESSES:

Section 5

1	NAME	TITLE	ADDRESS	PHONE
2	NAME	TITLE	ADDRESS	PHONE

OFFICER'S IMPAIRED DRIVING AFFIDAVIT

11/20

Section 1

ARREST DATE 03/06/2026		ARREST TIME 1330		COUNTY # 55	CITY #	CITATION #	
ARREST LOCATION BOT				CITY		COUNTY OKLAHOMA	
SUBJECT NAME NORTH, GAYLON LEVERNE				DATE OF BIRTH 08/09/1961		SEX M	HEIGHT 510
ADDRESS 3600 MARTIN LUTHER KING A		CITY OKLAHOMA CITY			STATE OK	ZIP CODE 73133	
DRIVER LICENSE # T083454871			EXPIRATION DATE 06/30/2019		STATE OK	CLASS A	RESTRICTIONS M
VEHICLE MAKE MOCK		MODEL MOCK		TAG # MOCK		STATE OK	CMV N

On the above date, time, and location, the above named person was arrested, and I had reasonable grounds to believe the person was driving or in actual physical control of a motor vehicle upon a public road, highway, street, turnpike, public parking lot, or other public place, or upon a private road, street, alley or lane which provides access to one or more single or multi-family dwelling within this state while under the influence of alcohol and/or other intoxicating substances as prohibited by law.

(Describe driving behavior or circumstances):

MOCK 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

BREATH-ALCOHOL ANALYSIS RECORD, REPORT OF THE PERSON NAMED IN SECTION 1 ABOVE, and LOG OF TEST AND MAINTENANCE RECORD.

Section 2

EQUIPMENT I-8000		SERIAL NUMBER 80-005977	SPECIALIST BOARD OF TESTS	
STANDARD Dry		TARGET VALUE 0.080	PERMIT NUMBER 23020	
MANUFACTURER ILMO		LOT # 31425080A1	DATE CYLINDER INSTALLED 03/06/2026	DATE CYLINDER EXPIRES 01/05/2028
OBSERVATION START 1345	TEST DATE 03/06/2026	<p>A 15-minute (or greater) deprivation/observation period was observed prior to and continuing to the time of test administration.</p> <p>I administered said Breath-Alcohol Test in compliance with the applicable operating procedure of the Board of Tests.</p> <p style="text-align: center;"><i>Christopher Pape</i> SIGNATURE OF OPERATOR</p>		
RESULT TABLE				
Test	g/210L	Time		
Air Blank	0.00	14:12		
Subject Test	0.00	14:13		
Breath Volume	1.777 LITERS			
Air Blank	0.00	14:13		
Wait		14:15		
Air Blank	0.00	14:15		
Subject Test	0.00	14:16		
Breath Volume	1.773 LITERS			
Air Blank	0.00	14:16		
Cal Check	0.08	14:17	<div style="border: 1px solid black; padding: 5px;"> <p>Test Result BrAC g/210L 0.00</p> </div>	
Air Blank	0.00	14:17		
NAME PAPE, CHRISTOPHER		BADGE # 0000000484	PERMIT # 0000023020	
AGENCY BOARD OF TESTS				

Section 3

What happens next?

1. Upon receipt and review of the Officer's Impaired Driving Affidavit and any associated test results, if applicable, the State of Oklahoma may revoke your Oklahoma driving privileges.
2. If you hold a commercial driver license or were driving a commercial motor vehicle, the State of Oklahoma may disqualify your privilege to operate a commercial motor vehicle.
3. You will continue to have driving privileges, if otherwise eligible, unless or until an Order of Revocation and/or Disqualification is issued by the State of Oklahoma.
4. The State of Oklahoma will send you the Order of Revocation and/or Disqualification to the address you have on file with Service Oklahoma.
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In accordance with Title 12 O.S. Section 426, "I state under penalty of perjury under the laws of Oklahoma that the foregoing is true and correct."

Section 4

Date: _____ Place (location when signed): _____ Signature of arresting officer: _____

NAME PAPE, CHRISTOPHER		AGENCY BOARD OF TESTS	
BADGE 0000000484	AGENCY ADDRESS INTER-AGENCY	ZIP CODE 00000	PHONE 4054252460



12/20

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

Certificate of Analysis – Reference Solution

ALPHA INSTRUMENT
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-002591
02/18/2026 11:13

Test	g/210L	Time
Air Blank	0.000	11:13
Cal Check	0.021	11:14
Air Blank	0.000	11:14
Cal Check	0.020	11:15
Air Blank	0.000	11:16
Cal Check	0.020	11:16
Air Blank	0.000	11:17
Cal Check	0.021	11:18
Air Blank	0.000	11:18
Cal Check	0.020	11:19
Air Blank	0.000	11:19
Cal Check	0.020	11:20
Air Blank	0.000	11:21
Cal Check	0.020	11:21
Air Blank	0.000	11:22
Cal Check	0.020	11:23
Air Blank	0.000	11:23
Cal Check	0.020	11:24
Air Blank	0.000	11:24
Cal Check	0.020	11:25
Air Blank	0.000	11:26
Cal Check Stats		
Average	0.0202	
Std Dev	0.0004	
Rel. Std Dev (%)	2.0872	

NIST Traceable Breath-Alcohol Equivalent (g/210L +/- 3%) Ratio of ethanol and water free of test interfering substances.		
Manufacturer: Guth	Manufactured Date: 9/3/2025	Concentration: 0.02
Lot No.: 25310	Expiration Date: 9/3/2027	Equipment Model: Guth 12V500
The above solution has been analyzed via Infrared Spectroscopy utilizing the Intoxilyzer 8000 and was performed in accordance with the procedures prescribed by the State Director of Tests pursuant to 40 OAC 30-1-3. The above NIST traceable reference solution meets the requirements for use pursuant to 40 OAC 25-1-2.1. Approved breath-alcohol measurement equipment and reference solutions. Equipment used appears on the current or supplemented Conforming Products List of Calibrating Units for Breath Alcohol Testers (72 FR 34747), published by the National Highway Traffic Safety Administration.		
Signature 	Date: 2/18/2026	
Name Christopher Pape	Permit No.: 23020	

**GUTH LABORATORIES, INC.**

690 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-664-5470

CERTIFICATE OF ANALYSISACVD
1/20/26
CP

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **25310** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **September 4, 2025**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.0239%** (w/vol) ethyl alcohol. The expiration date for this lot number is **September 3, 2027** 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 FN03062417 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.



**STATE OF OKLAHOMA
BOARD OF TESTS FOR ALCOHOL AND DRUG INFLUENCE**

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

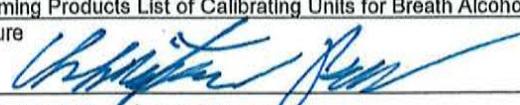
Post Office Box 36307
Oklahoma City, Oklahoma 73136-2307
Phone: (405) 425-2460 Fax: (405) 425-2490
www.bot.ok.gov

Joshua Smith
Director

Certificate of Analysis – Reference Solution

ALPHA INSTRUMENT 2
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-004923
07/01/2025 11:06

Test	g/210L	Time
Air Blank	0.000	11:07
Cal Check	0.037	11:07
Air Blank	0.000	11:08
Cal Check	0.037	11:09
Air Blank	0.000	11:09
Cal Check	0.038	11:10
Air Blank	0.000	11:10
Cal Check	0.038	11:11
Air Blank	0.000	11:12
Cal Check	0.037	11:12
Air Blank	0.000	11:13
Cal Check	0.038	11:14
Air Blank	0.000	11:14
Cal Check	0.038	11:15
Air Blank	0.000	11:15
Cal Check	0.038	11:16
Air Blank	0.000	11:17
Cal Check	0.038	11:17
Air Blank	0.000	11:18
Cal Check	0.038	11:19
Air Blank	0.000	11:19
Cal Check Stats		
Average	0.0377	
Std Dev	0.0004	
Rel Std Dev (%)	1.2812	

NIST Traceable Breath-Alcohol Equivalent (g/210L +/- 3%) Ratio of ethanol and water free of test interfering substances.		
Manufacturer: Guth	Manufactured Date: 3/11/2025	Concentration: 0.040
Lot No.: 25090	Expiration Date: 3/11/2027	Equipment Model: Guth 2100
The above solution has been analyzed via Infrared Spectroscopy utilizing the Intoxilyzer 8000 and was performed in accordance with the procedures prescribed by the State Director of Tests pursuant to 40 OAC 30-1-3. The above NIST traceable reference solution meets the requirements for use pursuant to 40 OAC 25-1-2.1. Approved breath-alcohol measurement equipment and reference solutions. Equipment used appears on the current or supplemented Conforming Products List of Calibrating Units for Breath Alcohol Testers (72 FR 34747), published by the National Highway Traffic Safety Administration.		
Signature 	Date: 7/1/2025	
Name Christopher Pape	Permit No.: 23020	

**GUTH LABORATORIES, INC.**

690 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

CERTIFICATE OF ANALYSISRCVD
5/30/25
CP

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **25090** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **March 12, 2025**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.0480%** (w/vol) ethyl alcohol. The expiration date for this lot number is **March 11, 2027** 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 **FN06032102** 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.



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

Certificate of Analysis – Reference Solution

ALPHA INSTRUMENT
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-002591
03/06/2026 09:29

Test	g/210L	Time
Air Blank	0.000	09:29
Cal Check	0.099	09:30
Air Blank	0.000	09:31
Cal Check	0.098	09:31
Air Blank	0.000	09:32
Cal Check	0.099	09:33
Air Blank	0.000	09:33
Cal Check	0.099	09:34
Air Blank	0.000	09:35
Cal Check	0.098	09:35
Air Blank	0.000	09:36
Cal Check	0.098	09:37
Air Blank	0.000	09:37
Cal Check	0.098	09:38
Air Blank	0.000	09:38
Cal Check	0.098	09:39
Air Blank	0.000	09:40
Cal Check	0.098	09:40
Air Blank	0.000	09:41
Cal Check	0.099	09:42
Air Blank	0.000	09:42
Cal Check Stats		
Average	0.0984	
Std Dev	0.0005	
Rel Std Dev (%)	0.5247	

NIST Traceable Breath-Alcohol Equivalent (g/210L +/- 3%) Ratio of ethanol and water free of test interfering substances.

Manufacturer: Guth	Manufactured Date: 08/12/2025	Concentration: 0.100
Lot No.: 25282	Expiration Date: 08/12/2027	Equipment Model: Guth 12V500
The above solution has been analyzed via Infrared Spectroscopy utilizing the Intoxilyzer 8000 and was performed in accordance with the procedures prescribed by the State Director of Tests pursuant to 40 OAC 30-1-3. The above NIST traceable reference solution meets the requirements for use pursuant to 40 OAC 25-1-2.1. Approved breath-alcohol measurement equipment and reference solutions. Equipment used appears on the current or supplemented Conforming Products List of Calibrating Units for Breath Alcohol Testers (72 FR 34747), published by the National Highway Traffic Safety Administration.		
Signature: 	Date: 03/06/2026	
Name: Christopher Pape	Permit No.: 23020	

**GUTH LABORATORIES, INC.**

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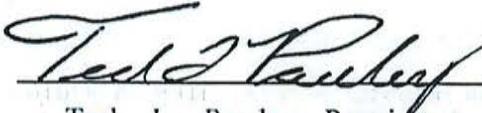
CERTIFICATE OF ANALYSISRCVD
1/20/26
CP

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **25282** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **August 14, 2025**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.1209%** (w/vol) ethyl alcohol. The expiration date for this lot number is **August 12, 2027** 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 **FN04042408** 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.



**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

Certificate of Analysis – Reference Solution

ALPHA INSTRUMENT

Intoxilyzer - Alcohol Analyzer

Model 8000

SN 80-002591

02/26/2026

09:24

Test	g/210L	Time
Air Blank	0.000	09:24
Cal Check	0.198	09:25
Air Blank	0.000	09:25
Cal Check	0.199	09:26
Air Blank	0.000	09:27
Cal Check	0.198	09:27
Air Blank	0.000	09:28
Cal Check	0.199	09:29
Air Blank	0.000	09:29
Cal Check	0.199	09:30
Air Blank	0.000	09:31
Cal Check	0.198	09:31
Air Blank	0.000	09:32
Cal Check	0.199	09:33
Air Blank	0.000	09:33
Cal Check	0.198	09:34
Air Blank	0.000	09:34
Cal Check	0.199	09:35
Air Blank	0.000	09:36
Cal Check	0.198	09:36
Air Blank	0.000	09:37
Cal Check Stats		
Average	0.1985	
Std Dev	0.0005	
Rel Std Dev(%)	0.2655	

NIST Traceable Breath-Alcohol Equivalent (g/210L +/- 3%) Ratio of ethanol and water free of test interfering substances.

Manufacturer: Guth	Manufactured Date: 10/21/2025	Concentration: 0.200
Lot No.: 25360	Expiration Date: 10/21/2027	Equipment Model: Guth 12V500
The above solution has been analyzed via Infrared Spectroscopy utilizing the Intoxilyzer 8000 and was performed in accordance with the procedures prescribed by the State Director of Tests pursuant to 40 OAC 30-1-3. The above NIST traceable reference solution meets the requirements for use pursuant to 40 OAC 25-1-2.1. Approved breath-alcohol measurement equipment and reference solutions. Equipment used appears on the current or supplemented Conforming Products List of Calibrating Units for Breath Alcohol Testers (72 FR 34747), published by the National Highway Traffic Safety Administration.		
Signature 	Date: 2/26/2026	
Name Christopher Pape	Permit No.: 23020	

**GUTH LABORATORIES, INC.**

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CERTIFICATE OF ANALYSISRCVD
1/20/26
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Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **25360** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **October 22, 2025**, 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 21, 2027** 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 FN07012401 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 Lawton PD 1	Unit Serial # 80-005977	Date: 20/20 5/8/25
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Inventory Process

Unit checked in to BOT Unlink Gas Canister from Unit Old Cylinder #: 32324080A2-024
 New Unit Checked out Remove old cylinder from unit (After Lab Evaluation) Old cylinder disposed in inventory Old cylinder archived

<p><u>Check in Procedure</u></p> <p><input type="checkbox"/> Connect unit to ethernet connection 172.019.004. 155</p> <p><input type="checkbox"/> Download any stored records _____</p> <p><input type="checkbox"/> Change unit location to Serial number</p> <p><input type="checkbox"/> Update Unit Date and time</p> <p>Previous time: _____</p> <p>New Time: _____</p> <p><input type="checkbox"/> Execute a new Forms load on the unit</p>	<p><u>Notes from the Field</u></p> <p><input type="checkbox"/> Routine Swap <input checked="" type="checkbox"/> Issues in the Field</p> <p>Unit will not POST</p>
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Lab Evaluation

Breath Hose Hold Vacuum?: Test Chamber Hold Vacuum?:

DVM

3µm _____ Chamber Temp _____ Snap Test ok?
9µm _____ Breath Hose Temp _____ RFI Detected?

Peripheral Tests

Speaker (F5) Power LED Green (F6) Red (F7) Fan (F9)
Gas Regulator (F11) Pump (F10) Receipt paper

Atmospheric Sensor Flow Sensor Tank Sensor

Pressure _____ Correction Factor _____ Resistance _____ Value _____ Is regulator close to Tank Sensor Value? Yes / No

Sent to CMI (if needed) Reason Sent *Unit will not POST*

Date Sent *6/4/25*
Invoice Sent *8/25/25*
Date Returned *12/5/25*

<p><u>Repairs needed:</u></p>	<p><u>Repairs Made:</u></p> <p>Ready for Bench Check? <input checked="" type="checkbox"/></p>
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<p><u>Inventory Process</u></p> <p><input type="checkbox"/> Linked Cylinder to Unit <input type="checkbox"/> Bench Check Technician Report <input type="checkbox"/> Changed Unit Status <input type="checkbox"/> Mock Subject Test Completed <input type="checkbox"/> Bench Check Report Completed <input type="checkbox"/> Certificate of Calibration and Operation <input type="checkbox"/> Service Overview Completed</p>	<p>To complete if unit sent to CMI</p> <p><input type="checkbox"/> CMI Workorder <input type="checkbox"/> CMI Certificate of Calibration _____ <input type="checkbox"/> CMI Service Evaluation Form</p>
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