



**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 (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 80-006125, in compliance with the agency's Maintenance Policy and Procedures.

This packet consists of 18 pages.

Signed 

Name of Position: Director/Records Custodian

Date of Attestation: 06/21/2022

Service Overview

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



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

BENCH CHECK DATE: 11-28-2018

SERIAL: 80-006125

DOCUMENTATION WITHIN SERVICE PACKET:

- BOT Certificate of Calibration and Operation
- CMI Certificate of Calibration 09-07-2018
- Bench Check
- Bench Check Technician's Report
- BOT Dry Gas Certificate of Analysis
- CMI Service Evaluation Form
- CMI Estimate
- CMI Work Order
- Mock Subject Test
- BOT Certificates of Analysis on Certified Solutions (4)

Date:

Re: Request for Log of Test on Intoxilyzer 8000

Name:

Dear Sir:

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

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

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

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

Sincerely,



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

Certificate of Calibration

This is to certify the calibration of **Intoxilyzer**® serial number 80-006125, 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 September 7, 2018

Signed [Signature]
Technician



316 East 9th Street
Owensboro, KY 42303
USA

Part No. 650517 Rev.A

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

BENCH CHECK DATE 11/28/2018	TIME PROCEDURE BEGAN 12:35	INSTRUMENT LOCATION 80-006125
INSTRUMENT TYPE Intoxilyzer	INSTRUMENT MODEL I-8000	INSTRUMENT SERIAL NUMBER 80-006125

TEST RESULTS

Diagnostics

PASS

Mouth Alcohol Test

PASS

RFI Test

PASS

Abort Test

PASS

Improper Sample Test

PASS

Interferent Detect Test

PASS

No Sample Given Test

PASS

Insufficient Sample Test

PASS

Air Blank Contamination Test

PASS

Range Exceeded Test

PASS


Duplicate Breath Sampling Results

Value	Test 1	Test 2	Control Test
.02	0.018	0.018	0.019
.04	0.038	0.038	0.040
.10	0.097	0.097	0.097
.20	0.195	0.195	0.193

PASS

CERTIFYING TECHNICIAN

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

SIGNATURE 	DATE 11/28/2018
NAME SMITH, JOSHUA	PERMIT # 0000016837



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

BENCH CHECK TECHNICIAN'S REPORT

Date: 11 / 28 / 18 Start Time: 1200 End Time: 1450

INSTRUMENT

Intoxilyzer Model 8000 Serial # 80-006125

GAS CANISTER

LOT # 24818080A2 # 039 EXP Date 10-05-2020


REFERENCE

Simulator Model			
Guth 2100	Guth 2100	Guth 2100	Guth 2100
Serial #			
DR3591	DR3753	DR3594	DR3754
Concentration			
.02	.04	.10	.20
LOT #			
18020	17410	18070	17340
Manufactured Date			
01-09-2018	12-06-2017	02-26-2018	10-09-2017
Expiration Date			
01-09-2020	12-06-2019	02-26-2018	10-09-2019
Solution Commission Date			
<u>11-19-18</u>	<u>11-19-18</u>	<u>11-19-18</u>	<u>11-19-18</u>

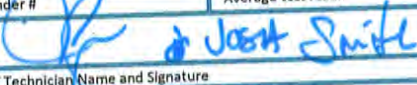
REASON FOR BENCH CHECK

- POST REPAIR
 CYLINDER REPLACEMENT
 TROUBLESHOOTING
 ROUTINE MAINTENANCE

COMMENTS

 16837
 Technician Signature / Permit #

Jask Smith
 Printed Name

Certificate of Analysis - Dry Gas	
11-27-18	.080
Date of Analysis	Labelled target value (g/210L)
# 039	.0811
Cylinder #	Average test result
 BOT Technician Name and Signature	



BRT Form 5.0

specialty gases

8/18

ALPHA INSTRUMENT 2
 Intoxilyzer - Alcohol Analyzer
 Model 8000 SN 80-004923
 11/27/2018 13:42


In accordance with BOT Policy and Procedure Statement BRT-2.1.0, Maintenance, the above referenced dry gas cylinder is suitable for use as an external reference with the Intoxilyzer 8000.

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

Test	g/210L	Time
Air Blank	0.000	13:43
Cal Check	0.081	13:43
Air Blank	0.000	13:43
Cal Check	0.082	13:44
Air Blank	0.000	13:44
Cal Check	0.081	13:45
Air Blank	0.000	13:45
Cal Check	0.081	13:45
Air Blank	0.000	13:46
Cal Check	0.081	13:46
Air Blank	0.000	13:47
Cal Check	0.081	13:47
Air Blank	0.000	13:48
Cal Check	0.081	13:48
Air Blank	0.000	13:48
Cal Check	0.081	13:49
Air Blank	0.000	13:49
Cal Check	0.081	13:50
Air Blank	0.000	13:50
Cal Check	0.081	13:51
Air Blank	0.000	13:51
Cal Check Stats		
Average	0.0811	
Std Dev	0.0003	
Rel Std Dev(%)	0.3899	

Certificate of Analysis

Certificate ID: 11411
 Part #: BAC105L080T
 Cylinder Size: 105L
 Lot Number: 24818080A2 ✓
 Expiration: 10/5/2020 ✓

REC'D
 10/23/18


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

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

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

Distributed by:
 CMI Inc.
 316 East Ninth Street
 Owensboro, KY 4230
 Phone 866-835-0690
www.alcoholtest.com


 Operator's Signature 16837

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

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


 Specialty Gas Lab Tech

09-17-18
 Date



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

Service Evaluation Form

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

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

1. Contact information: Customer Number **731362** (contact Customer Service)
Name: **Board of Tests** Phone: **(405) 425 2460**
Fax: **(405) 425 2490** Email: **joshua.smith@bot.ok.gov**

2. Bill to Address: **Board of Tests** Ship to Address: **Board of Tests**
3600 N ML King, Bldg 9 **3600 N ML King, Bldg 9**
OKC, OK 73111 **OKC, OK 73111**

3. Serial Number: **80-006125** Instrument Model: **Intoxilyzer 500 / 8000**

4. Detailed Description of Problem:
Flow sensor R:Value low. Breath samples hard to deliver.

Hazardous Material Warning! - DO NOT return gas cylinders with instrument!

I Authorize Repairs Up To: All \$250 \$500 \$750 Other \$ _____
Purchase Order Number (attach a copy of P.O. if applicable) _____

Authorized By:

Ship to:

Joshua Smith

Breath Alcohol Testing
Program Admin

Name (Please Print)

Title

CMI, Inc

Signature

08/16/2018

Date

Attn: Service Dept.

316 East Ninth Street

Owensboro, KY 42303

Call: 405-425-2460 Fax 405-425-2490

No, please send estimate before repairs are made.

Note: An estimate will be faxed before performing any repairs and may cause delays in service.
An evaluation fee (\$79.00 or actual costs) will apply to estimates that are not repaired.

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

Service Estimate: 402580

PO #:

Ship To: Oklahoma Board Of Tests Blvd Adcu Annex Bldg #9 3600 Martin Luther King Oklahoma City OK 73136-3000 USA	Customer Number: 731362	Technician Name: Gary Watts
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BT, GAS SHELF

Call Line	Part Number/Description	Revision	Quantity	Service Call Type
1	002480OK UNIT ASSY,I8000,IMAGER/ETH/IMA	ND	1.00 EA	Out of Warranty
	Job: SRV4025800001			
	Our Part 002480OK	ND		

Serial Number(s): **80-006125**

Job Material

Seq. No.	Part	Description	Quantity	Est. Unit Price	Est. Ext. Price
80	650517	CERTIFICATE OF CALIBRATION CMI	2.00 EA	0.00	0.00
90	441169	COVER DUST,5/8" x 1/2" McMASTE	1.00 EA	0.00	0.00
100	470145	CAP,PLASTIC,.25IDx.50LG,RED ST	3.00 EA	0.00	0.00
110	470154	CAP,PLSTC,.406IDx.438-.562,RED	1.00 EA	0.00	0.00
120	021307	HOSE ASSY,BREATH,I8000	1.00 EA	250.00	250.00
130	210120	SENSOR,SMD,PRESSURE	1.00 EA	24.95	24.95

Labor, Freight, & Misc. Charges

Misc Code	Description	Amount
LABR	Service Repair Labor	170.00
LCAL	Service - Calibration Adjust	45.00
LFT	Service - Final Test	85.00
SVFT	Freight - Service	35.00

Total: 609.95

NOTE: AN EVALUATION FEE WILL APPLY TO ESTIMATES THAT ARE NOT REPAIRED.

PLEASE SIGN AND FAX TO: 270-685-6268

APPROVED BY:  DATE: 08-30-2018

***TAX NOT INCLUDED**

**SERVICE WORK ORDER**

8/18

DATE	8-21-18
RCVD VIA	UPS

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

402580

BILL TO:
ATTN:
CITY STATE ZIP
CUSTOMER NO. 731362
PHONE

SHIP TO: OK Board of Tests
ATTN: Joshua Smith
3600 N. ML King
Bldg 9
CITY STATE ZIP OK OK 73111
PHONE 270-425-2460
FAX 405-425-2490

MODEL # 8000	SERIAL # 80-006125	0024800K	BILL CODE 1
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EXTRA PARTS REQD
 BT, gas shelf

DESCRIPTION OF PROBLEM
 Flow sensor value low. Breath sample hard to deliver

Infrared / Fuel Cell
 PRELIMINARY TEST INFORMATION

BATTERY- EXT NA V; INT 3.04V

Leak at breath. hose, broken at fitting. Flow sensor R: value 95-96

VERIFIED PROBLEM? Yes

WORK PERFORMED:

Replaced flow sensor and breath hose.
 Performed system checks.

Miscellaneous
 PRELIMINARY TEST INFORMATION

WORK PERFORMED:
 PBT

PARTS USED		
QTY	PART NO.	DESCRIPTION
1	021307	Hose Assy
1	210120	Sensor, SMN

REPAIR	CAL. ADJ.	CALIBRATION	FINAL
GTW	00P	00P	00P
½ HOURS	HOURS	HOURS	HOURS
4	0.5	1.0	1.0
DATE	DATE	DATE	DATE
Aug 31, 18	Sept 5, 18	Sept 7, 18	Sept 7, 18

SHIPPING STICKER HERE

SPECIAL SHIPPING INSTRUCTIONS

OFFICER'S AFFIDAVIT AND NOTICE OF REVOCATION/DISQUALIFICATION

12/18

Section 1

ARREST DATE 11/29/2018		ARREST TIME 1400		COUNTY # 55	CITY # 67	CITATION # MOCK		
ARREST LOCATION NONE					CITY WHAT		COUNTY OKLAHOMA	
SUBJECT NAME MOCK, SUBJECT TEST				DATE OF BIRTH 08/09/1961	SEX M	RACE W	HEIGHT 510	WEIGHT 165
ADDRESS 3600 MARTIN LUTHER KING A				CITY OKLAHOMA CITY		STATE OK	ZIP CODE 73133	
DRIVER LICENSE # T083454871				EXPIRATION DATE 06/30/2019	STATE OK	CLASS A	RESTRICTIONS	ENDORSEMENTS M
VEHICLE MAKE NN		MODEL NN		TAG # NN		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):

POST REPAIR MAINTENANCE. NEW GAS CANISTER INSTALL.

Describe person's condition (odor, actions, etc.):

NONE

THE PERSON WAS INFORMED OF THE IMPLIED CONSENT TEST REQUEST

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

Section 2

EQUIPMENT I-8000		SERIAL NUMBER 80-006125	SPECIALIST BOARD OF TESTS																																					
STANDARD Dry		TARGET VALUE 0.080	PERMIT NUMBER 16837																																					
MANUFACTURER ILMO		LOT # 24818080A2	DATE CYLINDER INSTALLED 11/28/2018	DATE CYLINDER EXPIRES 10/05/2020																																				
OBSERVATION START 1415	TEST DATE 11/29/2018	MOUTHPIECE G	<p style="text-align: center;">A 15-minute (or greater) deprivation/observation period was observed prior to and continuing to the time of test administration.</p> <p style="text-align: center;">I administered said Breath-Alcohol Test in compliance with the applicable operating procedure of the Board of Tests.</p> <p style="text-align: center;">SIGNATURE OF OPERATOR _____</p>																																					
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RESULT TABLE			<div style="border: 1px solid black; padding: 5px; width: fit-content; margin: auto;"> <p>Test Result BrAC g/210L 0.09</p> </div>																																					
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EFFECTIVE THIRTY (30) DAYS FROM DATE SERVED. Notice of Revocation is given that your driver's license is revoked or denied for a period of one hundred eighty (180) days or more, if you refused or failed the state's test(s). In addition, your commercial driving privilege in this state will be disqualified if you refused or failed the state's test(s) (operating a CMV or CDL holder) OR a test result of .04 or more while operating a commercial motor vehicle. To appeal the driver's license revocation/disqualification, the Department of Public Safety must receive your written request for an Administrative Hearing **within fifteen (15) days from the date you received notice of revocation or disqualification**. Submit your **written** request in person at 3600 N. MLK Ave. or by mail to Legal Division, Department of Public Safety, P.O. Box 11415, OKC, OK, 73136

SERVING OF NOTICE: I personally hand-delivered a copy of the above containing the Notice of Revocation to the person named in Section 1 above.

Date served: **11/29/2018** Signature of officer: _____ Badge #: _____

In accordance with Title 12 O.S. Section 426, "I state under **penalty of perjury** under the laws of Oklahoma that the foregoing is true and correct." Section 4

Date: **11/29/2018** Place (location when signed): _____ Signature of arresting officer: _____

NAME SMITH, JOSHUA		AGENCY BOARD OF TESTS	
BADGE 0000000435	AGENCY ADDRESS INTER-AGENCY	ZIP CODE 00000	PHONE "4054252460"

OTHER WITNESSES:

Section 5

1	NAME	TITLE	ADDRESS	PHONE
2	NAME	TITLE	ADDRESS	PHONE

Temporary License Issued

OFFICER'S AFFIDAVIT AND NOTICE OF REVOCATION/DISQUALIFICATION

13/18

Section 1

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DRIVER LICENSE # T083454871			EXPIRATION DATE 06/30/2019	STATE OK	CLASS A	RESTRICTIONS	ENDORSEMENTS M	
VEHICLE MAKE NN		MODEL NN		TAG # NN		STATE OK	CMV N	PLACARD N

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EFFECTIVE THIRTY (30) DAYS FROM DATE SERVED. Notice of Revocation is given that your driver's license is revoked or denied for a period of one hundred eighty (180) days or more, if you refused or failed the state's test(s). In addition, your commercial driving privilege in this state will be disqualified if you refused or failed the state's test(s) (operating a CMV or CDL holder) OR a test result of .04 or more while operating a commercial motor vehicle. To appeal the driver's license revocation/disqualification, the Department of Public Safety must receive your written request for an Administrative Hearing **within fifteen (15) days from the date you received notice of revocation or disqualification**. Submit your **written** request in person at 3600 N. MLK Ave. or by mail to Legal Division, Department of Public Safety, P.O. Box 11415, OKC, OK, 73136

SERVING OF NOTICE: I personally hand-delivered a copy of the above containing the Notice of Revocation to the person named in Section 1 above.

Date served: **11/29/2018** Signature of officer: _____ Badge #: _____

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

Date: **11/29/2018** Place (location when signed): _____ Signature of arresting officer: _____

NAME SMITH, JOSHUA		AGENCY BOARD OF TESTS	
BADGE 0000000435	AGENCY ADDRESS INTER-AGENCY	ZIP CODE 00000	PHONE "4054252460"

Temporary License Issued

ARRESTEE'S COPY
BOT Form AFF02 07/2008

STATE OF OKLAHOMA - DEPARTMENT OF PUBLIC SAFETY
Receipt for Driver License and Temporary Driving Permit

.02 or Greater BrAC for under 21 yoa, 0.08 or Greater BrAC for 21 yoa and older, or REFUSAL

DATE OF ARREST		TIME OF ARREST								
11/29/2018		1400								
NAME (LAST, FIRST, MIDDLE)										
MOCK, SUBJECT TEST										
ADDRESS										
3600 MARTIN LUTHER KING A										
CITY					STATE		ZIP CODE			
OKLAHOMA CITY					OK		73133			
DRIVER LICENSE NUMBER				STATE	BIRTHDATE		SEX	RACE	WEIGHT	HEIGHT
T083454871				OK	08/09/1961		M	W	165	510
CLASS		EXPIRATION		RESTRICTIONS		ENDORSEMENTS				
A		06/30/2019				M				



BrAC
0.09

DATE
ISSUED: 11/29/2018

This form is valid as a driver permit for a period of thirty (30) days from the date it was issued.

Anyone using this form thirty (30) days after issuance may be driving under suspension. All law enforcement officers may determine if the holder is driving under suspension by requesting a Driver's License status through OLETS. This receipt and permit is issued to individuals who have refused to take or have taken a breath test to determine Alcohol Content and the results indicated a Breath Alcohol Content as specified under the Implied Consent Law and Title 47, 11-902, and/or 11-906.4.

VIOLATOR'S REVOCATION NOTICE

Upon receipt of a written blood or breath test report reflecting that the arrested person, if under twenty-one (21) years of age, had any measurable quantity of alcohol in the person's blood or breath, or, if the arrested person is twenty-one (21) years of age or older, a blood or breath alcohol concentration of eight-hundredths (0.08) or more, or refused the State's test, accompanied by a sworn report from a law enforcement officer that the officer had reasonable grounds to believe the arrested person had been operating or was in actual physical control of a motor vehicle while under the influence of alcohol as prohibited by law, the Department shall revoke or deny the driving privilege of the arrested person for a period as provided by Section 6-205.1 of Title 47. Revocation or denial of the driving privilege of the arrested person shall become effective thirty (30) days after the arrested person is given written notice thereof by the officer as provided in this section or by the Department as provided in Section 2-116 of Title 47.

Upon the written request of the person whose driving privilege has been revoked or denied by this notice, the Department of Public Safety shall grant the person an opportunity to be heard if the request is received by the Department within fifteen (15) days after the notice. The sworn report of the officer, together with the results of any test or tests, shall be deemed true, absent any facial deficiency, should the requesting person fail to appear at the scheduled hearing.

ARRESTING OFFICER	
SIGNATURE	BADGE NUMBER
	000000435
SMITH, JOSHUA	AGENCY
	BOARD OF TESTS



GUTH LABORATORIES, INC.

590 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-6470

Certificate of Analysis – Wet Bath	
09-26-2018	15/18
Date of Analysis	Labelled target value (g/210L)
18020	0.0204
Lot Number	Average test result (g/210L)
Joshi Smith	
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

RECD
08/25/18
[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°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.

ALPHA INSTRUMENT
Intoxilyzer - Alcohol Analyzer
Model 8000
09/26/2018

SN 80-002591
15:36

Test	g/210L	Time
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
Air 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
Cal Check	0.021	15:46
Air Blank	0.000	15:46
Cal Check	0.021	15:47
Air Blank	0.000	15:47
Cal Check	0.021	15:48
Air Blank	0.000	15:49
Cal Check Stats		
Average	0.0204	
Std Dev	0.0005	
Rel Std Dev(%)	2.5312	

[Signature]
16837
Operator's Signature

[Signature]
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.



GUTH LABORATORIES, INC.

590 NORTH 67th STREET • HARRISBURG, PA 17111-4514 • TELEPHONE: 717-664-6470

Certificate of Analysis - Wet Bath

09-26-18	.040 ^{16/18}
Date of Analysis	Labelled target value (g/210L)
17410	0.0396
Lot Number	Average test result (g/210L)
Josh Smith	
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

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.

RECD
8/25/18
JR

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.

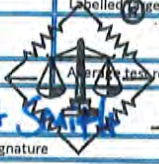
ALPHA INSTRUMENT
Intoxilyzer - Alcohol Analyzer
Model 8000
09/26/2018
SN 80-002591
15:54

Test	g/210L	Time
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
Air 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		
Average	0.0396	
Std Dev	0.0005	
Rel Std Dev(%)	1.3040	

JR
16837
Operator's Signature

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

NIST Traceability:
Testing was conducted using Cerilliant Reference Standard lot number **FN12181501** whose values are traceable to NIST.
All balances are calibrated annually by an outside agency using NIST traceable weights. Calibration verification is done prior to each use utilizing NIST traceable weights.

Certificate of Analysis - Wet Bath	
09-27-2018	.100
Date of Analysis	Labelled Target value (g/210L)
18070	0.9996
Lot Number	Actual Test result (g/210L)
	
GUTH LABORATORIES, INC. 590 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470	
BOT Technician Name and Signature: <i>Josh Satter</i>	

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

*REC'D
02/25/18
[Signature]*

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.

ALPHA INSTRUMENT
 Intoxilyzer - Alcohol Analyzer
 Model 8000 SN 00-002591
 09/27/2018 08:28

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
Air Blank	0.000	08:41
Cal Check Stats		
Average	0.0996	
Std Dev	0.0005	
Rel Std Dev(%)	0.5184	

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

Ted L. Pauley, President
GUTH LABORATORIES, INC.

[Signature] 16837
 Operator's Signature

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.

Certificate of Analysis - Wet Bath

09-27-2018 .200

Date of Analysis Labelled target value (g/210L)

17340 0.1968

Lot Number Analytical result (g/210L)

Josh Smith

BOT Technician Name and Signature

GUTH LABORATORIES, INC.

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BRT Form 6.0



18/18

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

REC'D
08/25/18
[Signature]

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°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.

ALPHA INSTRUMENT
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-002591
09/27/2018 15:27

Test	g/210L	Time
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
Air Blank	0.000	15:35
Cal Check	0.197	15:36
Air Blank	0.000	15:36
Cal Check	0.197	15:37
Air Blank	0.000	15:38
Cal Check	0.197	15:38
Air Blank	0.000	15:39
Cal Check	0.197	15:40
Air Blank	0.000	15:40
Cal Check Stats		
Average	0.1968	
Std Dev	0.0004	
Rel Std Dev(%)	0.2142	

[Signature] 16837
Operator's Signature

[Signature]

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.