



**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](http://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 80-006127, in compliance with the agency's Maintenance Policy and Procedures.

This packet consists of 13 pages.

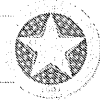
Signed \_\_\_\_\_

Name of Position: Director/Records Custodian

Date of Attestation: 05/25/2022

# Service Overview

Board of Tests for Alcohol and Drug Influence  
Enhancing public safety through the accuracy and consistency  
of blood alcohol testing



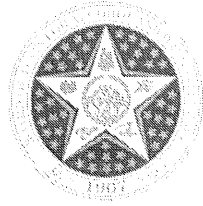
3600 N. Martin Luther King Bldg #9  
Oklahoma City, OK 73111  
405-425-2460

**BENCH CHECK DATE:** 08-30-2019

**SERIAL:** 80-006127

## **DOCUMENTATION WITHIN SERVICE PACKET:**

- BOT Certificate of Calibration and Operation
- Bench Check
- Bench Check Technician's Report
- BOT Dry Gas Certificate of Analysis
- Mock Subject Test
- BOT Certificates of Analysis on Certified Solutions (4)



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

Administrative Office at:  
Board of Tests for Alcohol and Drug Influence  
Post Office Box 36307  
Oklahoma City, Oklahoma 73136-2307

**Certificate of Calibration and Operation**

This is to certify that the calibration of **INTOXILYZER 8000**, serial number 80-006127, manufactured by CMI Inc., a subsidiary of MPD, Inc. of Owensboro, Kentucky, was tested and found to be in compliance with National Highway Traffic Safety Administration Standard for Devices to Measure Breath Alcohol (F.R., No. 179 48705-48710 Sept. 17, 1993) and with International Recommendation OIML R 126 Edition 1998 (E). Calibration solutions are traceable to NIST standard material 1828.

In addition the operational procedures and functions of this Intoxilyzer have also been tested and found to be in compliance with the Oklahoma Board of Tests for Alcohol and Drug Influence - Rules and Regulations OAC Title 40: 25-1-2 and 30-1-3 and is hereby certified for use as an evidential breath testing device within this state.

CERTIFICATION TYPE	DATE
Manufacturer Calibration	12-10-13
Board of Tests Bench Check	01-24-14
Board of Tests Bench Check	10-23-14
Manufacturer Calibration	07-29-16
Board of Tests Bench Check	02-03-17
Board of Tests Bench Check	11-17-17
Board of Tests Bench Check	08-30-19



Presentation of this form certifies that the Intoxilyzer, SN: 80-006127, functioned properly at the time of the breath test and hereby certifies the breath test result as valid.

Date:

Re: Request for Log of Test on Intoxilyzer 8000

Name:

Dear Sir:

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

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

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

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

Sincerely,



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

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

BENCH CHECK DATE 08/30/2019	TIME PROCEDURE BEGAN 11:43:4	INSTRUMENT LOCATION 80-006127
INSTRUMENT TYPE Intoxilyzer	INSTRUMENT MODEL I-8000	INSTRUMENT SERIAL NUMBER 80-006127

**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**

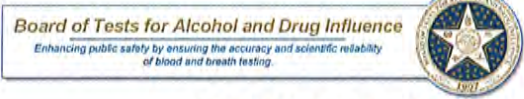
Value	Test 1	Test 2	Control Test
.02	0.016	0.017	0.018
.04	0.035	0.036	0.037
.10	0.093	0.093	0.095
.20	0.192	0.191	0.190

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 08/30/2019
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: 08/30/19 Start Time: 1115 End Time: 1250

**INSTRUMENT**

Intoxilyzer Model	Serial #
8000	80-006127

**GAS CANISTER**

LOT #	EXP Date
17919080A2 # 003	08-05-2021

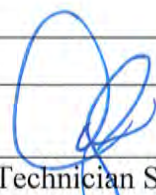
**REFERENCE**

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	02-26-2020	10-09-2019
Solution Commission Date			
08-26-19	08-26-19	08-26-19	08-26-19

**REASON FOR BENCH CHECK**

- POST REPAIR
- CYLINDER REPLACEMENT
- TROUBLESHOOTING
- ROUTINE MAINTENANCE

**COMMENTS**


 16837  
 Technician Signature / Permit #

Josh Smith  
 Printed Name

Certificate of Analysis – Dry Gas	
08-30-19	.080
Date of Analysis	Labelled target value (g/210L)
#003	.080
Cylinder #	Average test result
JOSIE SMITH <i>[Signature]</i>	
BOT Technician Name and Signature	



**ILMO**  
specialty gases

ALPHA INSTRUMENT <sup>7/13</sup>  
Intoxilyzer - Alcohol Analyzer  
Model 8000 SN 80-002591  
08/30/2019 10:31

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.  
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	10:31
Cal Check	0.079	10:31
Air Blank	0.000	10:32
Cal Check	0.080	10:32
Air Blank	0.000	10:33
Cal Check	0.080	10:33
Air Blank	0.000	10:34
Cal Check	0.080	10:34
Air Blank	0.000	10:34
Cal Check	0.080	10:35
Air Blank	0.000	10:35
Cal Check	0.080	10:36
Air Blank	0.000	10:36
Cal Check	0.080	10:37
Air Blank	0.000	10:37
Cal Check	0.080	10:37
Air Blank	0.000	10:38
Cal Check	0.079	10:38
Air Blank	0.000	10:39
Cal Check	0.080	10:39
Air Blank	0.000	10:40
Cal Check Stats		
Average	0.0798	
Std Dev	0.0004	
Rel Std Dev(%)	0.5283	

## Certificate of Analysis

Certificate ID: 12204  
Part #: BAC105L080T  
Cylinder Size: 105L  
Lot Number: 17919080A2 ✓  
Expiration: 8/5/2021 ✓

REC'D  
08/01/2019  
*[Signature]*

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 Str  
Owensboro, KY 4  
Phone 866-835-067  
[www.alcoholtest.ca](http://www.alcoholtest.ca)

*[Signature]*  
Operator's Signature 16837

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

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

*[Signature]*  
Specialty Gas Lab Tech

07-15-19  
Issuance 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.

ISO/IEC 17025:2005 Accredited Laboratory

# OFFICER'S AFFIDAVIT AND NOTICE OF REVOCATION/DISQUALIFICATION

8/13

Section 1

ARREST DATE <b>08/30/2019</b>		ARREST TIME <b>1200</b>		COUNTY # <b>55</b>	CITY # <b>82</b>	CITATION # <b>90</b>		
ARREST LOCATION <b>MOCK</b>				CITY <b>MOCK</b>		COUNTY <b>MCOK</b>		
SUBJECT NAME <b>MOCK, SUBJECT TEST</b>				DATE OF BIRTH <b>08/09/1961</b>	SEX <b>M</b>	RACE <b>W</b>	HEIGHT <b>510</b>	WEIGHT <b>165</b>
ADDRESS <b>3600 MARTIN LUTHER KING A</b>			CITY <b>OKLAHOMA CITY</b>		STATE <b>OK</b>	ZIP CODE <b>73133</b>		
DRIVER LICENSE # <b>T083454871</b>			EXPIRATION DATE <b>06/30/2019</b>	STATE <b>OK</b>	CLASS <b>A</b>	RESTRICTIONS	ENDORSEMENTS <b>M</b>	
VEHICLE MAKE <b>MOCKM</b>		MODEL <b>MOCK</b>		TAG # <b>MOCK</b>		STATE <b>OK</b>	CMV <b>N</b>	PLACARD <b>N</b>

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. ROUTINE MAINTENANCE, NEW GAS CANISTER INSTA**

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

### 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 <b>I-8000</b>		SERIAL NUMBER <b>80-006127</b>	SPECIALIST <b>BOARD OF TESTS</b>																																					
STANDARD <b>Dry</b>		TARGET VALUE <b>0.080</b>	PERMIT NUMBER <b>16837</b>																																					
MANUFACTURER <b>ILMO</b>		LOT # <b>17919080A2</b>	DATE CYLINDER INSTALLED <b>08/30/2019</b>	DATE CYLINDER EXPIRES <b>08/05/2021</b>																																				
OBSERVATION START <b>1215</b>	TEST DATE <b>08/30/2019</b>	MOUTHPIECE <b>G</b>	A 15-minute (or greater) deprivation/observation period was observed prior to and continuing to the time of test administration.																																					
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Test</th> <th>g/210L</th> <th>Time</th> </tr> </thead> <tbody> <tr><td>Air Blank</td><td>0.00</td><td>13:09</td></tr> <tr><td>Subject Test</td><td>0.00</td><td>13:09</td></tr> <tr><td>Breath Volume</td><td>1.421 LITERS</td><td></td></tr> <tr><td>Air Blank</td><td>0.00</td><td>13:09</td></tr> <tr><td>Wait</td><td></td><td>13:11</td></tr> <tr><td>Air Blank</td><td>0.00</td><td>13:12</td></tr> <tr><td>Subject Test</td><td>0.00</td><td>13:12</td></tr> <tr><td>Breath Volume</td><td>1.191 LITERS</td><td></td></tr> <tr><td>Air Blank</td><td>0.00</td><td>13:12</td></tr> <tr><td>Cal Check</td><td>0.07</td><td>13:13</td></tr> <tr><td>Air Blank</td><td>0.00</td><td>13:13</td></tr> </tbody> </table>					Test	g/210L	Time	Air Blank	0.00	13:09	Subject Test	0.00	13:09	Breath Volume	1.421 LITERS		Air Blank	0.00	13:09	Wait		13:11	Air Blank	0.00	13:12	Subject Test	0.00	13:12	Breath Volume	1.191 LITERS		Air Blank	0.00	13:12	Cal Check	0.07	13:13	Air Blank	0.00	13:13
Test	g/210L	Time																																						
Air Blank	0.00	13:09																																						
Subject Test	0.00	13:09																																						
Breath Volume	1.421 LITERS																																							
Air Blank	0.00	13:09																																						
Wait		13:11																																						
Air Blank	0.00	13:12																																						
Subject Test	0.00	13:12																																						
Breath Volume	1.191 LITERS																																							
Air Blank	0.00	13:12																																						
Cal Check	0.07	13:13																																						
Air Blank	0.00	13:13																																						
I administered said Breath-Alcohol Test in compliance with the applicable operating procedure of the Board of Tests.																																								
SIGNATURE OF OPERATOR																																								
NAME <b>SMITH, JOSHUA</b>																																								
BADGE # <b>0000000435</b>		PERMIT # <b>0000016837</b>																																						
AGENCY <b>BOARD OF TESTS</b>																																								

**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 on the Department approved form, within fifteen (15) days from the date you received notice of revocation or disqualification. The approved hearing request form is available at <https://www.ok.gov/dps/documents/ReqHearing.pdf>. Submit your hearing request form in person at 3600 N. MLK Ave. or by mail to Legal Division, Department of Public Safety, P.O. Box 11415, OKC, OK 73136. It shall be a misdemeanor punishable by imprisonment for not less than seven (7) days nor more than six (6) months, or by a fine of not more than Five Hundred Dollars (\$500.00), or by both such fine and imprisonment, for any person to apply for a renewal or a replacement license to operate a motor vehicle while the person's license, permit, or other evidence of driving privilege is in the custody of a law enforcement officer or the Department.

Section 3

**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: **08/30/2019** 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: **08/30/2019** Place (location when signed): \_\_\_\_\_ Signature of arresting officer: \_\_\_\_\_

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

OTHER WITNESSES:

Section 5

1	NAME	TITLE	ADDRESS	PHONE
2	NAME	TITLE	ADDRESS	PHONE

No Temporary License Issued:  
Test Below Legal Limit



# OFFICER'S AFFIDAVIT AND NOTICE OF REVOCATION/DISQUALIFICATION

9/13

Section 1

ARREST DATE <b>08/30/2019</b>		ARREST TIME <b>1200</b>		COUNTY # <b>55</b>	CITY # <b>82</b>	CITATION # <b>90</b>		
ARREST LOCATION <b>MOCK</b>					CITY <b>MOCK</b>	COUNTY <b>MCOK</b>		
SUBJECT NAME <b>MOCK, SUBJECT TEST</b>				DATE OF BIRTH <b>08/09/1961</b>	SEX <b>M</b>	RACE <b>W</b>	HEIGHT <b>510</b>	WEIGHT <b>165</b>
ADDRESS <b>3600 MARTIN LUTHER KING A</b>			CITY <b>OKLAHOMA CITY</b>		STATE <b>OK</b>	ZIP CODE <b>73133</b>		
DRIVER LICENSE # <b>T083454871</b>			EXPIRATION DATE <b>06/30/2019</b>	STATE <b>OK</b>	CLASS <b>A</b>	RESTRICTIONS	ENDORSEMENTS <b>M</b>	
VEHICLE MAKE <b>MOCKM</b>		MODEL <b>MOCK</b>		TAG # <b>MOCK</b>		STATE <b>OK</b>	CMV <b>N</b>	PLACARD <b>N</b>

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. ROUTINE MAINTENANCE, NEW GAS CANISTER INSTA**

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

### 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 <b>I-8000</b>		SERIAL NUMBER <b>80-006127</b>	SPECIALIST <b>BOARD OF TESTS</b>																																						
STANDARD <b>Dry</b>		TARGET VALUE <b>0.080</b>	PERMIT NUMBER <b>16837</b>																																						
MANUFACTURER <b>ILMO</b>		LOT # <b>17919080A2</b>	DATE CYLINDER INSTALLED <b>08/30/2019</b>	DATE CYLINDER EXPIRES <b>08/05/2021</b>																																					
OBSERVATION START <b>1215</b>	TEST DATE <b>08/30/2019</b>	MOUTHPIECE <b>G</b>	A 15-minute (or greater) deprivation/observation period was observed prior to and continuing to the time of test administration.  I administered said Breath-Alcohol Test in compliance with the applicable operating procedure of the Board of Tests.  _____ SIGNATURE OF OPERATOR																																						
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Test</th> <th>g/210L</th> <th>Time</th> </tr> </thead> <tbody> <tr><td>Air Blank</td><td>0.00</td><td>13:09</td></tr> <tr><td>Subject Test</td><td>0.00</td><td>13:09</td></tr> <tr><td>Breath Volume</td><td>1.421 LITERS</td><td></td></tr> <tr><td>Air Blank</td><td>0.00</td><td>13:09</td></tr> <tr><td>Wait</td><td></td><td>13:11</td></tr> <tr><td>Air Blank</td><td>0.00</td><td>13:12</td></tr> <tr><td>Subject Test</td><td>0.00</td><td>13:12</td></tr> <tr><td>Breath Volume</td><td>1.191 LITERS</td><td></td></tr> <tr><td>Air Blank</td><td>0.00</td><td>13:12</td></tr> <tr><td>Cal Check</td><td>0.07</td><td>13:13</td></tr> <tr><td>Air Blank</td><td>0.00</td><td>13:13</td></tr> </tbody> </table>						Test	g/210L	Time	Air Blank	0.00	13:09	Subject Test	0.00	13:09	Breath Volume	1.421 LITERS		Air Blank	0.00	13:09	Wait		13:11	Air Blank	0.00	13:12	Subject Test	0.00	13:12	Breath Volume	1.191 LITERS		Air Blank	0.00	13:12	Cal Check	0.07	13:13	Air Blank	0.00	13:13
Test	g/210L	Time																																							
Air Blank	0.00	13:09																																							
Subject Test	0.00	13:09																																							
Breath Volume	1.421 LITERS																																								
Air Blank	0.00	13:09																																							
Wait		13:11																																							
Air Blank	0.00	13:12																																							
Subject Test	0.00	13:12																																							
Breath Volume	1.191 LITERS																																								
Air Blank	0.00	13:12																																							
Cal Check	0.07	13:13																																							
Air Blank	0.00	13:13																																							
NAME <b>SMITH, JOSHUA</b>			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">Test Result BrAC g/210L <b>0.00</b></td> </tr> </table>			Test Result BrAC g/210L <b>0.00</b>																																			
Test Result BrAC g/210L <b>0.00</b>																																									
BADGE # <b>0000000435</b>		PERMIT # <b>0000016837</b>																																							
AGENCY <b>BOARD OF TESTS</b>																																									

**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 on the Department approved form, within fifteen (15) days from the date you received notice of revocation or disqualification.

Section 3

The approved hearing request form is available at <https://www.ok.gov/dps/documents/ReqHearing.pdf>. Submit your hearing request form in person at 3600 N. MLK Ave. or by mail to Legal Division, Department of Public Safety, P.O. Box 11415, OKC, OK 73136. It shall be a misdemeanor punishable by imprisonment for not less than seven (7) days nor more than six (6) months, or by a fine of not more than Five Hundred Dollars (\$500.00), or by both such fine and imprisonment, for any person to apply for a renewal or a replacement license to operate a motor vehicle while the person's license, permit, or other evidence of driving privilege is in the custody of a law enforcement officer or the Department.

**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: **08/30/2019** 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: **08/30/2019** Place (location when signed): \_\_\_\_\_ Signature of arresting officer: \_\_\_\_\_

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

No Temporary License Issued:  
Test Below Legal Limit

ARRESTEE'S COPY  
BOT Form AFF02 01/2019



**GUTH LABORATORIES, INC.**  
 590 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

Certificate of Analysis – Wet Bath	
Date of Analysis <b>09-26-2018</b>	Labelled target value (g/210L) <b>0.0200</b> <sup>10/13</sup>
Lot Number <b>18020</b>	Average test result (g/210L) <b>0.0204</b>
BOT Technician Name and Signature <b>Jose C. Ortiz</b>	



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*

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.

LPMA INSTRUMENT  
 Intoxilyzer – Alcohol Analyzer  
 Model 8000 SN 80-002591  
 9/26/2018 15:36

Test	g/210L	Time
ir Blank	0.000	15:36
al Check	0.020	15:37
ir Blank	0.000	15:37
al Check	0.020	15:38
ir Blank	0.000	15:39
al Check	0.020	15:39
ir Blank	0.000	15:40
al Check	0.020	15:41
ir Blank	0.000	15:41
al Check	0.020	15:42
ir Blank	0.000	15:42
al Check	0.020	15:43
ir Blank	0.000	15:44
al Check	0.021	15:44
ir 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
Check Stats		
Average	0.0204	
Std Dev	0.0005	
1 Std Dev(%)	2.5312	

*[Signature]*  
 Operator's Signature  
**16837**

*[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.

690 NORTH 67th STREET • HARRISBURG, PA 17111-2811 • TELEPHONE: 717-664-6470

Certificate of Analysis - Wet Bath	
09-26-18	.040
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	

11/13



BRT Form 6.0

## CERTIFICATE OF ANALYSIS

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.

### 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.

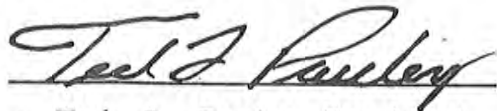
ALPHA INSTRUMENT  
Intoxilyzer - Alcohol Analyzer  
Model 8000  
09/26/2018

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	

  
Operator's Signature


16837

  
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	0.0996
Lot Number	Average test result (g/210L)
	
BOT Technician Name and Signature: <i>Josh [Signature]</i>	



**GUTH LABORATORIES, INC.**  
 590 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

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 **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.

*REC'D  
08/25/18  
[Signature]*

ALPHA INSTRUMENT  
 Intoxilyzer – Alcohol Analyzer  
 Model 8000 SN 80-002591  
 09/27/2018 08:28

Test	g/210L	Time
Alr Blank	0.000	08:28
Cal Check	0.100	08:29
Alr Blank	0.000	08:29
Cal Check	0.100	08:30
Alr Blank	0.000	08:31
Cal Check	0.099	08:31
Alr Blank	0.000	08:32
Cal Check	0.100	08:33
Alr Blank	0.000	08:33
Cal Check	0.100	08:34
Alr Blank	0.000	08:34
Cal Check	0.100	08:35
Alr Blank	0.000	08:36
Cal Check	0.099	08:36
Alr Blank	0.000	08:37
Cal Check	0.099	08:38
Alr Blank	0.000	08:38
Cal Check	0.099	08:39
Alr Blank	0.000	08:39
Cal Check	0.100	08:40
Alr 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	Test result (g/210L)
	




13/13

**GUTH LABORATORIES, INC.**  
 590 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470  
 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  
 08/25/18  


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.

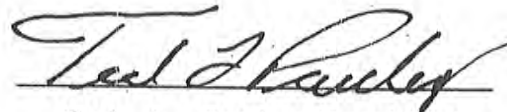
When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of **0.200 g/210L +/- 3%**.

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

PER INSTRUMENT  
 Intoxilyzer - Alcohol Analyzer  
 Model 8000 SN 80-002591  
 3/27/2018 15:27

Test	g/210L	Time
r Blank	0.000	15:27
l Check	0.196	15:28
r Blank	0.000	15:29
l Check	0.196	15:29
r Blank	0.000	15:30
l Check	0.197	15:31
r Blank	0.000	15:31
l Check	0.197	15:32
r Blank	0.000	15:33
l Check	0.197	15:33
r Blank	0.000	15:34
l Check	0.197	15:35
r Blank	0.000	15:35
l Check	0.197	15:36
r Blank	0.000	15:36
l Check	0.197	15:37
r Blank	0.000	15:38
l Check	0.197	15:38
r Blank	0.000	15:39
l Check	0.197	15:40
r Blank	0.000	15:40
l Check	0.000	15:40
Check Stats		
Average	0.1968	
1 Dev	0.0004	
1 Std Dev(%)	0.2142	

  
 Operator's Signature 16837

  
 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.