



**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 80-006151, 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 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:** 01-22-2019

**SERIAL:** 80-006151

## **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)



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

BENCH CHECK DATE 01/22/2019	TIME PROCEDURE BEGAN 14:34	INSTRUMENT LOCATION 80-006151
INSTRUMENT TYPE Intoxilyzer	INSTRUMENT MODEL I-8000	INSTRUMENT SERIAL NUMBER 80-006151

**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	0.016	0.018
.04	0.036	0.036	0.037
.10	0.097	0.094	0.096
.20	0.194	0.191	0.194

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 01-22-2019
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: 01 / 22 / 19 Start Time: 1415 End Time: 1618

### INSTRUMENT

Intoxilyzer Model Serial #  
8000 80-006151

### GAS CANISTER

LOT # EXP Date  
34418080A3 #921 2-5-2021

### 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			
<u>01-17-19</u>	<u>01-17-19</u>	<u>01-17-19</u>	<u>01-17-19</u>

### REASON FOR BENCH CHECK

POST REPAIR  CYLINDER REPLACEMENT  
 TROUBLESHOOTING  ROUTINE MAINTENANCE

### COMMENTS

Reloaded forms.

16837  
Technician Signature / Permit #

Josh Smith  
Printed Name

**Certificate of Analysis – Dry Gas**

01-22-19	.080
Date of Analysis	Labelled target value (g/210L)
#021	.0814
Cylinder #	Average test result
Josh Smith	
BOT Technician Name and Signature	



BRT Form 5.0

0 • Jacksonville, IL 62651-0790  
1-7634 • www.ilmoproducts.com

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.

7/13  
ALPHA INSTRUMENT 2  
Intoxilyzer - Alcohol Analyzer  
Model 8000 SN 80-004923  
01/22/2019 10:50

Test	g/210L	Time
Air Blank	0.000	10:51
Cal Check	0.082	10:51
Air Blank	0.000	10:51
Cal Check	0.081	10:52
Air Blank	0.000	10:52
Cal Check	0.081	10:53
Air Blank	0.000	10:53
Cal Check	0.081	10:53
Air Blank	0.000	10:54
Cal Check	0.081	10:54
Air Blank	0.000	10:55
Cal Check	0.082	10:55
Air Blank	0.000	10:56
Cal Check	0.081	10:56
Air Blank	0.000	10:56
Cal Check	0.082	10:57
Air Blank	0.000	10:57
Cal Check	0.081	10:58
Air Blank	0.000	10:58
Cal Check	0.082	10:59
Air Blank	0.000	10:59
Cal Check Stats		
Average	0.0814	
Std Dev	0.0005	
Rel Std Dev(%)	0.6343	

**Certificate of Analysis**

Certificate ID: 11669  
Part #: BAC105L080T  
Cylinder Size: 105L  
Lot Number: 34418080A3 ✓  
Expiration: 2/5/2021 ✓

RECD  
01/16/19  
[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	Balance		

Distributed by:  
CMI Inc.  
316 East Ninth Street  
Owensboro, KY 4230  
Phone 866-835-0690  
[www.alcoholtest.com](http://www.alcoholtest.com)

[Signature] 16837  
Operator's Signature

\*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).

[Signature]  
Specialty Gas Lab Tech

01-03-19  
Date



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

# OFFICER'S AFFIDAVIT AND NOTICE OF REVOCATION/DISQUALIFICATION

8/13

Section 1

ARREST DATE <b>01/22/2019</b>		ARREST TIME <b>1500</b>		COUNTY # <b>55</b>		CITY # <b>45</b>		CITATION # <b>MOCK</b>	
ARREST LOCATION <b>MOCK</b>				CITY <b>MOCK</b>			COUNTY <b>MOCK</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>N</b>		MODEL <b>N</b>		TAG # <b>NN</b>		STATE <b>NN</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):

**ROUTINE 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 <b>I-8000</b>		SERIAL NUMBER <b>80-006151</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>34418080A3</b>		DATE CYLINDER INSTALLED <b>01/22/2019</b>	DATE CYLINDER EXPIRES <b>02/05/2021</b>																																		
OBSERVATION START <b>1515</b>	TEST DATE <b>01/22/2019</b>	MOUTHPIECE <b>G</b>	<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>_____ SIGNATURE OF OPERATOR</p> <p>NAME <b>SMITH, JOSHUA</b></p> <p>BADGE # <b>0000000435</b></p> <p>PERMIT # <b>0000016837</b></p> <p>AGENCY <b>BOARD OF TESTS</b></p>																																				
<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>16:13</td></tr> <tr><td>Subject Test</td><td>0.00</td><td>16:13</td></tr> <tr><td>Breath Volume</td><td>1.312 LITERS</td><td></td></tr> <tr><td>Air Blank</td><td>0.00</td><td>16:14</td></tr> <tr><td>Wait</td><td></td><td>16:15</td></tr> <tr><td>Air Blank</td><td>0.00</td><td>16:16</td></tr> <tr><td>Subject Test</td><td>0.00</td><td>16:16</td></tr> <tr><td>Breath Volume</td><td>2.003 LITERS</td><td></td></tr> <tr><td>Air Blank</td><td>0.00</td><td>16:17</td></tr> <tr><td>Cal Check</td><td>0.07</td><td>16:17</td></tr> <tr><td>Air Blank</td><td>0.00</td><td>16:17</td></tr> </tbody> </table>						Test	g/210L	Time	Air Blank	0.00	16:13	Subject Test	0.00	16:13	Breath Volume	1.312 LITERS		Air Blank	0.00	16:14	Wait		16:15	Air Blank	0.00	16:16	Subject Test	0.00	16:16	Breath Volume	2.003 LITERS		Air Blank	0.00	16:17	Cal Check	0.07	16:17	Air Blank
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			<div style="border: 1px solid black; padding: 5px; text-align: center;"> <p>Test Result BrAC g/210L <b>0.00</b></p> </div>																																				

**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

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: **01/22/2019** 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: **01/22/2019** 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>01/22/2019</b>		ARREST TIME <b>1500</b>		COUNTY # <b>55</b>		CITY # <b>45</b>		CITATION # <b>MOCK</b>	
ARREST LOCATION <b>MOCK</b>				CITY <b>MOCK</b>			COUNTY <b>MOCK</b>		
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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>N</b>		MODEL <b>N</b>		TAG # <b>NN</b>		STATE <b>NN</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):

**ROUTINE 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 <b>I-8000</b>		SERIAL NUMBER <b>80-006151</b>		SPECIALIST <b>BOARD OF TESTS</b>																																				
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OBSERVATION START <b>1515</b>	TEST DATE <b>01/22/2019</b>	MOUTHPIECE <b>G</b>		<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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NAME <b>SMITH, JOSHUA</b>		BADGE # <b>0000000435</b>		PERMIT # <b>0000016837</b>																																				
AGENCY <b>BOARD OF TESTS</b>																																								



Test Result  
BrAC g/210L  
**0.00**

**EFFECTIVE THIRTY (30) DAYS FROM DATE SERVED. Notice of Revocation** is given that your driver's license is revoked or denied for a

Section 3

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: **01/22/2019** 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: **01/22/2019** 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 07/2008



**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>Josh Smith</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.

ALPHA INSTRUMENT  
 Intoxilyzer - Alcohol Analyzer  
 Model 8000 SN 80-002591  
 09/26/2018 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]*  
 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.

590 NORTH 67th STREET • HARRISBURG, PA 17111-1811 • TELEPHONE: 717-664-5470

Certificate of Analysis – Wet Bath	
09-26-18	11/13 0.040
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	



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

*REC'D  
08/25/18  
[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.

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.

ALPHA INSTRUMENT  
 Intoxilyzer - Alcohol Analyzer  
 Model 8000 SN 80-002591  
 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	

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

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

**NIST Traceability:**

Testing was conducted using Cerilliant Reference Standard lot number **FN04271602** whose values are traceable to NIST.

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



**Certificate of Analysis – Wet Bath**

09-27-2018

.200

Date of Analysis

Labelled target value (g/210L)



13/13

17340

0.1968

Lot Number

Test result (g/210L)

Josh Smith

**GUTH LABORATORIES, INC.**

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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

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  
09/27/2018

SN 00-002591  
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

Ted L. Pauley  
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.