



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

Post Office Box 36307

Oklahoma City, Oklahoma 73136-2307

Phone: (405) 425-2460 Fax: (405) 425-2490

www.bot.ok.gov

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

Joshua Smith
Director

ATTESTATION

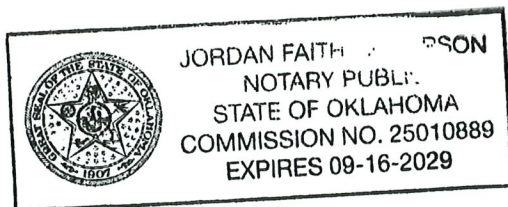
I, the undersigned Joshua Smith (Director/Records Custodian), attest under oath pursuant to 12 O.S. §2902 this record was made, at or near the time of the occurrence of the matters set forth by or from information transmitted by a person having knowledge of those matters; was kept in the course of the regularly conducted business activity of the Board; and was made pursuant to the regularly conducted activity. The duplicate record provided is listed below:

- 1) The attached "Service Overview" is a true and accurate copy of maintenance performed on the Intoxilyzer 8000, serial number 80-006155, in compliance with the agency's Maintenance Policy and Procedures.

Signed _____

Joshua Smith

Name of Position: Director/Records Custodian



State of Oklahoma

County of Oklahoma

Signed or attested before me on 10/01/2025 by

Joshua Smith.

Jordan Faith Thompson

(Signature of notarial officer)

Service Overview

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



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

BENCH CHECK DATE: 09/30/2021

SERIAL: 80-006155

DOCUMENTATION WITHIN SERVICE PACKET:

- BOT Certificate of Maintenance, Calibration and Operation
- Bench Check
- CMI Certificate of Calibration
- CMI Evaluation Form
- CMI Work Order
- BOT Dry Gas Certificate of Analysis
- Mock Subject Test
- BOT Certificate of Analysis on Certified Solutions (4)



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MEMORANDUM

DATE: February 11, 2022

TO: FILE

A scrivener's error was identified on BOT Form 4.0 Certificate of Maintenance, Calibration, and Operation as a result of multiple sessions of drafting. The form contained in this maintenance packet has been amended and updated to include the intended information. The agency apologizes for any inconvenience this may have caused.

Joshua Smith
State Director

Cc: Intoxilyzer 8000 maintenance folder



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Joshua Smith
Director

CERTIFICATE of MAINTENANCE, CALIBRATION, and OPERATION

This certifies the **Intoxilyzer 8000** referenced below, manufactured by CMI, Inc., a subsidiary of MPD, Inc. of Owensboro, Kentucky, is maintained by the Board of Tests for Alcohol and Drug Influence in accordance with 40 O.A.C. 30-1-3. The instrument reported below is hereby deemed to be in compliance with Board rules via linearity accuracy examination and operational/functional procedure evaluation also referred to as a "Bench Check". The Intoxilyzer 8000 appears on the National Highway Traffic Safety Administration's Conforming Products List of Evidential Breath Alcohol Measurement Devices (82 FR 50940 *et seq*) as an approved device. In accordance with 40 O.A.C. 25-1-2, this instrument is approved and certified for use in the State of Oklahoma as an automated evidential breath-alcohol measurement device by the Board of Tests pursuant to 47 O.S. § 759.

All analyses conducted by this instrument are considered precise, valid, and in accordance with 40 O.A.C. 30-1-3(b) Operating Procedure(s). A printed breath test operator affidavit containing the seal of the Board by this instrument confirms a calibration check successfully verified the instrument's calibration at the time of test. The printed breath test affidavit also serves as proof that safeguards in place to protect the breath samples, including but not limited to Ambient Air Interference, Radio Frequency Interference, Residual Mouth Alcohol, Deficient Samples, etc. were not triggered and the test is a true and accurate scientific measurement of the person's alcohol concentration.

- Maintenance was performed on the Intoxilyzer 8000, Serial No. 80-006155 on 09/30/2021 in accordance with 40 O.A.C. 30-1-3 and internal BOT maintenance policy and procedures.
- A dry gas canister appearing on the National Highway Traffic Safety Administration's Conforming Products List of Calibrating Units for Breath Alcohol Testers (77 FR 64588 *et seq*) and approved in accordance with 40 O.A.C. 25-1-3 and BOT maintenance policy was installed.
 - Manufacturer: ILMO Unit: 208 ppm / 105 L
 - Cylinder Lot No. - Canister No.: 19021080A2-018
 - BOT analysis average test result: 0.081
 - Cylinder expiration date: 09/05/2023
- In accordance with 40 O.A.C. 25-1-2.1, the approved reference standards and equipment were used:

Simulator Model			
Guth 2100	Guth 2100	Guth 2100	Guth 2100
Serial #			
DR3685	DR3753	DR3594	DR3754
Concentration			
.02	.04	.10	.20
LOT #			
20070	20060	20190	20160
Manufactured Date			
02/13/2020	02/10/2020	04/06/2020	03/18/2020
Expiration Date			
02/13/2022	02/10/2022	04/06/2022	03/18/2022
Solution Commission Date			
09/30/2021	09/30/2021	09/30/2021	09/30/2021

Completed by BOT Personnel:

 Christopher Pape
Signature/Name

Breath-Alcohol Testing Program Administrator
Title

Certified by:

 Joshua Smith
Signature Name

State Director
Title

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

CMI INTOXILYZER BENCH CHECK PROCEDURE REPORT

BENCH CHECK DATE 09/30/2021	TIME PROCEDURE BEGAN 11:14:5	INSTRUMENT LOCATION 80-006155
INSTRUMENT TYPE Intoxilyzer	INSTRUMENT MODEL I-8000	INSTRUMENT SERIAL NUMBER 80-006155

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	0.021	0.021	0.021
.04	0.040	0.039	0.040
.10	0.099	0.098	0.097
.20	0.199	0.196	0.196

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  23020	DATE 9/30/21
NAME PAPE, CHRISTOPHER	PERMIT # 0000023020

Certificate of Calibration

This is to certify the calibration of **Intoxilyzer**® serial number 80-006155, 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 Aug 12, 2021

Signed



Technician



316 East 9th Street
Owensboro, KY 42303
USA

Part No. 650517 Rev.A

CMI INC.
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: **christopher.pape@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: **80-006155** Instrument Model: **Intoxilyzer 8000**


4. Detailed Description of Problem:
3µm and 9µm values flipped. 3µm is 13300 and 9µm is 13275. Failed snap test with 9µm ** out. Green LED is also weak.

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:

Chris Pape	Breath Testing Admin
_____ Name (Please Print)	_____ Title
 Signature	5/12/2021 Date

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

Call: 405-425-2460 or email _____

☐ 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.



SERVICE WORK ORDER

DATE: 5/18/2021

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

406015

Bill To:
 Oklahoma Board Of Tests
 Blvd Adcu Annex Bldg #9
 3600 Martin Luther King
 Oklahoma City, OK 73136-3000
 USA
 Customer #: 731362
 Phone: 405-425-2424
 Fax: 405-425-2490 fax
Ship To:
 Oklahoma Board Of Tests DNU
 Po Box 36307
 3600 N MI King Blvd Bldg 9
 Oklahoma City OK 73111
 USA
 Phone: 405-425-2424

MODEL #: 0024800K

Serial Number: 80-006155

BILL CODE: Out of Warranty

EXTRA PARTS RCVD:

KB W/COVER,BH,BATTERY COVER,GAS SHELF W/REG GR6155

DESCRIPTION OF PROBLEM

3 AND 9 VALUES FLIPPED. 3 IS 13300 AND 9 IS 13275. FAILED SNAP TEST WITH 9** OUT. GREEN LED IS ALSO WEAK.

WORK PERFORMED:

- LED light was dim
- Replaced LED and front label
- Reset gains
- Calibrated and final tested
- Loaded software and forms

PARTS USED

Seq. No.	Part	Description	Quantity
50	470202	FILTER,FOAM,1.85x2.20	1.00 EA
60	210126	LED,BI-COLOR,RED/GRN,5MM DIA	1.00 EA
80	650517	CERTIFICATE OF CALIBRATION	2.00 EA
90	441169	COVER DUST,5/8in x 1/2in	1.00 EA
100	470145	CAP,PLASTIC,.25IDx.50LG,RED	3.00 EA
110	470154	CAP,PLSTC,.406IDx.438-.562,RED	1.00 EA
120	470218	SEAL,TAMPER EVIDENT,SERVICE	1.00 EA
130	450222	LABEL,FRONT,EMI	1.00 EA

LABOR / TESTING

Misc Code	Description	Hours
LABR	Service Repair Labor	
LCAL	Service - Calibration Adjust	0.50
LFT	Service - Cal / Final Test	1.00

Technician Name: Leanna Shelnut

SRV4060150001



Certificate of Analysis - Dry Gas

9/23/2021	0.080
Date of Analysis	Labelled target value (g/210L)
018	0.081
Cylinder #	Average test result
Christopher Pope	
BOT Technician Name and Signature	



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

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

9/15

ALPHA INSTRUMENT
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-002591
09/23/2021 11:29

Certificate of Analysis

Certificate ID: 14091 ✓
Part #: BAC105L080T
Cylinder Size: 105L
Lot Number: 19021080A2 ✓
Expiration: 9/5/2023 ✓

RCVD
9/16/21
CP

Test	g/210L	Time
Air Blank	0.000	11:30
Cal Check	0.081	11:30
Air Blank	0.000	11:31
Cal Check	0.081	11:31
Air Blank	0.000	11:31
Cal Check	0.081	11:32
Air Blank	0.000	11:32
Cal Check	0.081	11:33
Air Blank	0.000	11:33
Cal Check	0.081	11:33
Air Blank	0.000	11:34
Cal Check	0.081	11:34
Air Blank	0.000	11:35
Cal Check	0.081	11:35
Air Blank	0.000	11:36
Cal Check	0.082	11:36
Air Blank	0.000	11:36
Cal Check	0.081	11:37
Air Blank	0.000	11:37
Cal Check	0.081	11:38
Air Blank	0.000	11:38
Cal Check Stats		
Average	0.0811	
Std Dev	0.0003	
Rel Std Dev(%)	0.3899	

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)	NDIR
Nitrogen	Balance	[5.2 ppm]	

Distributed by:
CMI Inc.
316 East Ninth
Owensboro, K
Phone 866-835
www.alcoholte

[Signature]
Operator's Signature

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

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

[Signature]
Specialty Gas Lab Tech

08-12-2021
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 17025:2017 Accredited Laboratory

OFFICER'S AFFIDAVIT AND NOTICE OF REVOCATION/DISQUALIFICATION

10/15

Section 1

ARREST DATE 09/30/2021		ARREST TIME 1215		COUNTY # 55	CITY #	CITATION #	
ARREST LOCATION BOT				CITY		COUNTY OKLAHOMA	
SUBJECT NAME NORTH, GAYLON LEVERNE				DATE OF BIRTH 08/09/1961		SEX M	RACE W
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
VEHICLE MAKE MOCK				MODEL MOCK		TAG # MOCK	STATE OK
						CMV N	PLACARD N

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

(Describe driving behavior or circumstances):

MOCK SUBJECT TEST


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

POST REPAIR MAINTENANCE, INSTALLED NEW CYLINDER

THE PERSON WAS INFORMED OF THE IMPLIED CONSENT TEST REQUEST

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

Section 2

EQUIPMENT I-8000		SERIAL NUMBER 80-006155	SPECIALIST BOARD OF TESTS																																			
STANDARD Dry		TARGET VALUE 0.080	PERMIT NUMBER 23020																																			
MANUFACTURER ILMO		LOT # 19021080A2	DATE CYLINDER INSTALLED 09/30/2021	DATE CYLINDER EXPIRES 09/05/2023																																		
OBSERVATION START 1230	TEST DATE 09/30/2021	MOUTHPIECE G	<p>A 15-minute (or greater) deprivation/observation period was observed prior to and continuing to the time of test administration.</p> <p>I administered said Breath-Alcohol Test in compliance with the applicable operating procedure of the Board of Tests.</p> <p style="text-align: center;"><i>[Signature]</i> SIGNATURE OF OPERATOR</p>																																			
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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. You may appeal any Departmental action against your driver license as a result of this arrest by filing a petition in the District Court of the County in which you were arrested. Your petition must be filed within thirty (30) days of the date listed below. You may be eligible to participate in the Impaired Driver Accountability Program (IDAP) administered by the Department of Public Safety (DPS). Completion of IDAP may prevent a revocation as a result of this arrest from appearing on your driving record. Participation in IDAP may reduce the amount of fees you will be required to pay to the State. You must request IDAP within thirty (30) days of the date listed below. Mail the request for IDAP to the Department of Public Safety at P.O. Box 11415, Oklahoma City, OK 73136.

SERVING OF NOTICE: I personally hand delivered a copy of the above containing the Notice of Revocation and the Notice of Department Impaired Driving Accountability Program to the person named in Section 1 above.

Date served: **09/30/2021** 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: **09/30/2021** Place (location when signed): _____ Signature of arresting officer: _____

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

OTHER WITNESSES:

Section 5

1	NAME	TITLE	ADDRESS	PHONE
2	NAME	TITLE	ADDRESS	PHONE

No Temporary License Issued:
Test Below Legal Limit

OFFICER/DPS COPY
BOT Form AFF01 03/2020

OFFICER'S AFFIDAVIT AND NOTICE OF REVOCATION/DISQUALIFICATION

11/15

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

(Describe driving behavior or circumstances):

MOCK SUBJECT TEST


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

POST REPAIR MAINTENANCE, INSTALLED NEW CYLINDER

THE PERSON WAS INFORMED OF THE IMPLIED CONSENT TEST REQUEST

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

Section 2

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AGENCY BOARD OF TESTS																																						

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. You may appeal any Departmental action against your driver license as a result of this arrest by filing a petition in the District Court of the County in which you were arrested. Your petition must be filed within thirty (30) days of the date listed below.

You may be eligible to participate in the Impaired Driver Accountability Program (IDAP) administered by the Department of Public Safety (DPS). Completion of IDAP may prevent a revocation as a result of this arrest from appearing on your driving record. Participation in IDAP may reduce the amount of fees you will be required to pay to the State. You must request IDAP within thirty (30) days of the date listed below. Mail the request for IDAP to the Department of Public Safety at P.O. Box 11415, Oklahoma City, OK 73136.

SERVING OF NOTICE: I personally hand delivered a copy of the above containing the Notice of Revocation and the Notice of Department Impaired Driving Accountability Program to the person named in Section 1 above.

Date served: **09/30/2021** 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: **09/30/2021** Place (location when signed): _____ Signature of arresting officer: _____

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

No Temporary License Issued:
Test Below Legal Limit

ARRESTEE'S COPY
BOT Form AFF02 03/2020

Certificate of Analysis – Wet Bath	
8/11/2020	0.020
Date of Analysis	Labelled Value (g/210L)
20070	0.020
Lot Number	Average Result (g/210L)
christopher Pape	
BOT Technician Name and Signature	



GUTH LABORATORIES, INC.

154 NORTH 5th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

BRT Form 5.0

In accordance with BRT – 2.2.0, Maintenance, the above referenced simulator solution is suitable for use as an external reference in maintenance of the Intoxilyzer 8000.

CERTIFICATE OF ANALYSIS

ALPHA INSTRUMENT 2

Intoxilyzer – Alcohol Analyzer

Model 8000

08/11/2020

SN 80-004923

09:42

ACV'D
6/1/2020
CP

Certified Alcohol Reference Solution for Simulator


Test	g/210L	Time
Air Blank	0.000	09:42
Cal Check	0.020	09:43
Air Blank	0.000	09:43
Cal Check	0.020	09:44
Air Blank	0.000	09:45
Cal Check	0.020	09:45
Air Blank	0.000	09:46
Cal Check	0.020	09:47
Air Blank	0.000	09:47
Cal Check	0.021	09:48
Air Blank	0.000	09:48
Cal Check	0.020	09:49
Air Blank	0.000	09:49
Cal Check	0.020	09:50
Air Blank	0.000	09:51
Cal Check	0.020	09:51
Air Blank	0.000	09:52
Cal Check	0.020	09:53
Air Blank	0.000	09:53
Cal Check	0.019	09:54
Air Blank	0.000	09:54
Cal Check Stats		
Average	0.0200	
Std Dev	0.0004	
Rel Std Dev(%)	2.3569	

Random Samples of Lot Number 20070 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on February 17, 2020, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.0242% (w/vol) ethyl alcohol. The expiration date for this lot number is February 13, 2022 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.


Operator's 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.

Certificate of Analysis - Wet Bath	
7/22/2020	0.040
Date of Analysis	Labelled target value (g/210L)
20060	0.040
Lot Number	Average test result (g/210L)
Christopher Pauley	
BOT Technician Name and Signature	



GUTH LABORATORIES, INC.
 240 NORTH 6TH STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

BRT Form 6.0

In accordance with BRT -- 2.2.0, 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

RCV'D
6/1/20
CP

ALPHA UNIT SUB
Intoxilyzer - Alcohol Analyzer
Model 8000
07/22/2020

SN 80-003400
14:57

Random Samples of Lot Number 20060 of

Alcohol Reference Solution for Simulator were analyzed by gas chromatography on February 11, 2020, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.0483% (w/vol) ethyl alcohol. The expiration date for this lot number is February 10, 2022 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.040 g/210L +/- 3%.

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

Ted L. Pauley

Ted L. Pauley, President
GUTH LABORATORIES, INC.

Christopher Pauley
Operator's Signature

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

06/16/20	.100
Date of Analysis	Labelled target value (g/210L)
20190	.098
Lot Number	Average test result (g/210L)
BOT Technician Name and Signature	



LABORATORIES, INC.

BRT Form 6.0 RISE, PA 17111-4511 • TELEPHONE: 717-564-5470

In accordance with BRT – 2.2.0, Maintenance, the above referenced simulator solution is suitable for use as an external reference in maintenance of the Intoxilyzer 8000.

CERTIFICATE OF ANALYSIS

ALPHA INSTRUMENT

Intoxilyzer – Alcohol Analyzer

Model 8000

06/16/2020

SN 80-002591

16:18

Certified Alcohol Reference Solution for Simulator

Test	g/210L	Time
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Air Blank	0.000	16:18
Cal Check	0.099	16:19
Air Blank	0.000	16:20
Cal Check	0.098	16:20
Air Blank	0.000	16:21
Cal Check	0.097	16:22
Air Blank	0.000	16:22
Cal Check	0.098	16:23
Air Blank	0.000	16:24
Cal Check	0.098	16:24
Air Blank	0.000	16:25
Cal Check	0.098	16:26
Air Blank	0.000	16:26
Cal Check	0.098	16:27
Air Blank	0.000	16:27
Cal Check	0.097	16:28
Air Blank	0.000	16:29
Cal Check	0.098	16:29
Air Blank	0.000	16:30
Cal Check	0.098	16:31
Air Blank	0.000	16:31
Cal Check Stats		
Average	0.0979	
Std Dev	0.0005	
Rel Std Dev(2)	0.5798	

Random Samples of Lot Number 20190 of

Alcohol Reference Solution for Simulator were analyzed by gas chromatography on April 8, 2020, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1206% (w/vol) ethyl alcohol. The expiration date for this lot number is April 6, 2022 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.

Operator's Signature

Ted L. Pauley, President
GUTH LABORATORIES, INC.

NIST Traceability:

Testing was conducted using Cerilliant Reference Standard lot number FN02271802 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.

Rec'd
06/11/2020
CJP

Certificate of Analysis – Wet Bath	
Date of Analysis	07/07/2020
Labelled test value (g/210L)	0.200
Lot Number	20160
Analyst Name and Signature	Christopher Page
GUTH LABORATORIES, INC. 530 NORTH 67TH STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-584-5470	
BRT Form 6.0	

In accordance with BRT – 2.2.0, Maintenance, the above referenced simulator solution is suitable for use as an external reference in maintenance of the intoxilyzer 8000.

CERTIFICATE OF ANALYSIS

Rec'd
05/20/20
CP

Certified Alcohol Reference Solution for Simulator

LPMT UNIT SUB
Intoxilyzer – Alcohol Analyzer
Model 8000
7/07/2020
SN 80-003400
15:25

Random Samples of Lot Number **20160** of

Alcohol Reference Solution for Simulator were analyzed by gas chromatography on March 20, 2020, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.2427% (w/vol) ethyl alcohol**. The expiration date for this lot number is **March 18, 2022** 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.

test	g/210L	Time
1st Blank	0.000	15:26
1st Check	0.196	15:26
1st Blank	0.000	15:27
1st Check	0.196	15:28
1st Blank	0.000	15:28
1st Check	0.197	15:29
1st Blank	0.000	15:29
1st Check	0.196	15:30
1st Blank	0.000	15:31
1st Check	0.198	15:31
1st Blank	0.000	15:32
1st Check	0.198	15:33
1st Blank	0.000	15:33
1st Check	0.197	15:34
1st Blank	0.000	15:35
1st Check	0.198	15:35
1st Blank	0.000	15:36
1st Check	0.198	15:37
1st Blank	0.000	15:37
1st Check	0.197	15:38
1st Blank	0.000	15:38
1st Check Stats		
Average	0.1971	
Std Dev	0.0008	
Rel Std Dev(%)	0.4442	

Operator's Signature

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

NIST Traceability:

Testing was conducted using Cerilliant Reference Standard lot number **EN08101505** 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.