



**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 80-006165, in compliance with the agency's Maintenance Policy and Procedures.

Signed 

Name of Position: Director/Records Custodian

Date of Attestation: 09/06/2022

# 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



2/20

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

BENCH CHECK DATE: 09/06/2022

SERIAL: 80-006165

## DOCUMENTATION WITHIN SERVICE PACKET:

- BOT Certificate of Maintenance, Calibration and Operation
- Bench Check
- CMI Certificate of Calibration
- CMI Evaluation Form
- CMI Work Order
- BOT Dry Gas Certificate of Analysis
- Ilmo Specialty Gases Certificate of Analysis
- Mock Subject Test
- BOT Certificate of Analysis - Reference Solution (4)
- Guth Laboratories Certificate of Analysis (4)



# 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  
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## CERTIFICATE of MAINTENANCE, CALIBRATION, and OPERATION

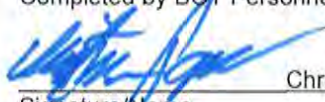
This certifies the **Intoxilyzer 8000** referenced below, manufactured by CMI, Inc., a subsidiary of MPD, Inc. of Owensboro, Kentucky, is maintained by the Board of Tests for Alcohol and Drug Influence in accordance with 40 O.A.C. 30-1-3. The instrument reported below is hereby deemed to be in compliance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

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

- Maintenance was performed on the Intoxilyzer 8000, Serial No. 80-006165 on 09/06/2022 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.: 15922080A3-004
  - BOT analysis average test result: 0.080
  - Cylinder expiration date: 08/05/2024
- 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 #			
DR2834	DR3694	DR2455	DR3470
Concentration			
.02	.04	.10	.20
LOT #			
21120	21070	22080	22050
Manufactured Date			
4/7/2021	3/1/2021	3/7/2022	2/7/2022
Expiration Date			
4/7/2023	3/1/2023	3/7/2022	2/7/2024
Solution Commission Date			
08/23/2022	08/23/2022	08/23/2022	09/06/2022

Completed by BOT Personnel:

  
\_\_\_\_\_  
Signature/Name Christopher Pape

Breath-Alcohol Testing Program Administrator  
Title

Certified by:  
  
\_\_\_\_\_  
Signature Name Joshua Smith

State Director  
Title

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

BENCH CHECK DATE <b>09/06/2022</b>	TIME PROCEDURE BEGAN <b>10:49:0</b>	INSTRUMENT LOCATION <b>80-006165</b>
INSTRUMENT TYPE <b>Intoxilyzer</b>	INSTRUMENT MODEL <b>I-8000</b>	INSTRUMENT SERIAL NUMBER <b>80-006165</b>

### 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	0.038	0.036	0.038
.10	0.097	0.097	0.100
.20	0.197	0.196	0.199

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 <b>9/6/2022</b>
NAME <b>PAPE, CHRISTOPHER</b>	PERMIT # <b>0000023020</b>

# Certificate of Calibration

This is to certify the calibration of **Intoxilyzer**® serial number 80-006165, 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. 3, 2022

Signed

Sam Richard

Technician



316 East 9<sup>th</sup> Street  
Owensboro, KY 42303  
USA

Part No. 650517 Rev.A

# CMI INC.

## Service Evaluation Form

**This form MUST be completed and enclosed with item to be serviced.**  
**\*\*\* Hazardous Material Warning! – DO NOT return gas cylinder with instrument! \*\*\***

Note: Please ship items in their original shipping container.

### Contact information:

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

### Your Billing Address

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

### Your Shipping Address

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

**Instrument Serial Number:** 80-006165

### Detailed Description of Problem:

Unit is having purge fail issues in the field. Unit has been sent to CMI 2 previous times with the same issue. Breath hose also has a leak. \*\*Breath hose on unit is not the same one as in the field, was swapped with bad hose since unit was coming in for service.\*\*

Note: For instruments not under warranty, an evaluation fee of \$83.<sup>00</sup> (infrared and I-200) or \$43.<sup>50</sup> (fuel cell), plus return shipping cost, will apply to all service items.

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

After repair, add "Certificate of Calibration" for:  S-D2, S-D5, and I-800 (\$19)

I-200, I-240, I-300, I-400, and I-600 (\$39)

### Authorized By:

<u>Chris Pape</u>	<u>Breath Testing Admin</u>	
Name (Please Print)	Title	
	<u>12/30/2021</u>	
Signature	Date	

Ship item to:

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



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

## SERVICE WORK ORDER

406615

DATE: 1/6/2022

**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  
 Blvd Adcu Annex Bldg #9  
 3600 Martin Luther King  
 Oklahoma City OK 73136-3000  
 USA  
 Phone: 405-425-2424

MODEL #: 0024800K

Serial Number: 80-006165

BILL CODE: Out of Warranty

**EXTRA PARTS RCVD:**

KB,BH,BATTERY,GAS SHELF W/REG

**DESCRIPTION OF PROBLEM**

UNIT IS HAVING FAIL ISSUES IN THE FIELD. UNIT HAS BEEN SENT TO CMI 2 PREVIOUS TIMES WITH THE SAME ISSUE. BH ALSO HAS A LEAK. \*\* BH ON UNIT IS NOT THE SAME ONE AS IN THE FIELD, WAS SWAPPED WITH BAD HOSE SINCE UNIT WAS COMING IN FOR SERVICE.\*\*

**WORK PERFORMED:**

Breath Hose leaked; Solenoid Leaked; Source end block leaked; Replaced all parts listed; Calibrated and Final Tested; Software 8133.15.00;

**PARTS USED**

Seq. No.	Part	Description	Quantity
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
111	021380FL	BLOCK ASSY,SOURCE,BASIC	1.00 EA
112	021357	SOLENOID ASSY,I8000	1.00 EA
115	021307FL	HOSE ASSY,BREATH,I8000	1.00 EA
120	470218	SEAL,TAMPER EVIDENT,SERVICE	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: Hayden Schweikardt

SRV4066150001





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

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

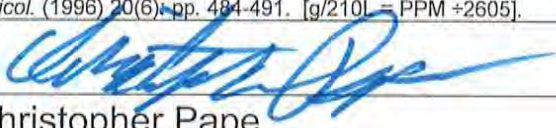
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www.bot.ok.gov

Joshua Smith  
Director

#### Certificate of Analysis – Dry Gas

ALPHA INSTRUMENT  
Intoxilyzer - Alcohol Analyzer  
Model 8000 SN 80-002591  
08/11/2022 13:07

Test	g/210L	Time
Air Blank	0.000	13:08
Cal Check	0.079	13:08
Air Blank	0.000	13:08
Cal Check	0.079	13:09
Air Blank	0.000	13:09
Cal Check	0.079	13:10
Air Blank	0.000	13:10
Cal Check	0.080	13:10
Air Blank	0.000	13:11
Cal Check	0.079	13:11
Air Blank	0.000	13:12
Cal Check	0.079	13:12
Air Blank	0.000	13:13
Cal Check	0.080	13:13
Air Blank	0.000	13:13
Cal Check	0.080	13:14
Air Blank	0.000	13:14
Cal Check	0.080	13:15
Air Blank	0.000	13:15
Cal Check	0.080	13:15
Air Blank	0.000	13:16
Cal Check Stats		
Average	0.0795	
Std Dev	0.0005	
Rel Std Dev (%)	0.6629	

<b>Known Breath-Alcohol Equivalent (g/210L) Ratio of Nitrogen and Ethanol Gas (208 ppm/105 L)</b> $0.08 \text{ g/210L} = 208 \text{ PPM} \div 2605^*$		
Manufacturer: <b>ILMO</b>	Manufacturer Cert. No.: <b>14879</b>	Cylinder Size: <b>105L</b>
Lot No.: <b>15922080A3</b>	Cylinder No.: <b>004</b>	Expiration Date: <b>08/05/2024</b>
The above 105 L cylinder has been analyzed via Infrared Spectroscopy utilizing the Intoxilyzer 8000 and was performed in accordance with the procedures prescribed by the State Director of Tests pursuant to 40 OAC 30-1-3. The above NIST traceable reference standard meets the requirements for use as a calibrating unit in accordance with 47 O.S. 759, 40 OAC 25-1-3, and appears on the current conforming products list of calibrating units for breath alcohol testers published by the U.S. Department of Transportation in the Federal Register [77 FR 64588 et seq]. * See Dubowski, K.M. and Essary N., <i>Journal of Anal. Toxicol.</i> (1996) 20(6), pp. 484-491. [g/210L = PPM ÷ 2605].		
Signature: 		Date: <b>08/11/2022</b>
Name: <b>Christopher Pape</b>		Permit No.: <b>23020</b>





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

### Certificate of Analysis

**Certificate ID:** 14879 ✓  
**Part #:** BAC105L080T  
**Cylinder Size:** 105L  
**Lot Number:** 15922080A3 ✓  
**Expiration:** 8/5/2024 ✓

ACVD  
 7/29/2022  
 CP

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

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

Component:	Reported Concentration:	Analytical Accuracy (U, k=2):	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 42303  
 Phone 866-835-0690  
[www.alcoholtest.com](http://www.alcoholtest.com)

\*Traceable to:  
 NIST Research Gas Mixture - 212.6 µmol/mol  
 Ethanol in Nitrogen - Serial No. SA15944

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

*Christopher W. Smith*  
 Specialty Gas Lab Tech  
  
*[Signature]*

7-19-2022  
 Issuance Date



The calibration results within this certificate were obtained at the facility listed above using equipment and standards capable of producing analytical results traceable to NIST, and apply only to the items contained on this certificate. ILMO Products Company makes no warranty or representation as to the suitability of the use of any information provided for any particular purpose. The information use is at the sole discretion and risk of the user. Liability shall be limited to established replacement cost of this material or service. This certificate applies only to the items described and shall not be reproduced other than in full, without written approval from the issuing facility.

# OFFICER'S AFFIDAVIT AND NOTICE OF REVOCATION/DISQUALIFICATION

10/20

Section 1

ARREST DATE <b>09/06/2022</b>		ARREST TIME <b>1200</b>		COUNTY # <b>55</b>	CITY #	CITATION #		
ARREST LOCATION <b>BOT</b>				CITY		COUNTY <b>OKLAHOMA</b>		
SUBJECT NAME <b>BREATHTEST, DELTA</b>			DATE OF BIRTH <b>01/01/1985</b>		SEX <b>M</b>	HEIGHT <b>510</b>	WEIGHT <b>200</b>	
ADDRESS <b>3600 MLK</b>			CITY <b>OKLAHOMA CITY</b>		STATE <b>OK</b>	ZIP CODE <b>73111</b>		
DRIVER LICENSE # <b>B083463042</b>			EXPIRATION DATE <b>10/31/2022</b>		STATE <b>OK</b>	CLASS <b>D</b>	RESTRICTIONS ENDORSEMENTS	
VEHICLE MAKE <b>MOCK</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**

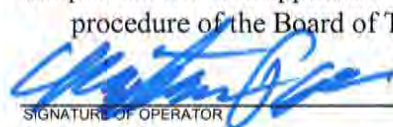

Describe person's condition (odor, actions, etc.):

**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 <b>I-8000</b>		SERIAL NUMBER <b>80-006165</b>	SPECIALIST <b>BOARD OF TESTS</b>																																					
STANDARD <b>Dry</b>		TARGET VALUE <b>0.080</b>	PERMIT NUMBER <b>23020</b>																																					
MANUFACTURER <b>ILMO</b>		LOT # <b>15922080A3</b>	DATE CYLINDER INSTALLED <b>09/06/2022</b>	DATE CYLINDER EXPIRES <b>08/05/2024</b>																																				
OBSERVATION START <b>1205</b>	TEST DATE <b>09/06/2022</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>12:23</td></tr> <tr><td>Subject Test</td><td>0.00</td><td>12:23</td></tr> <tr><td>  Breath Volume</td><td>2.113 LITERS</td><td></td></tr> <tr><td>Air Blank</td><td>0.00</td><td>12:24</td></tr> <tr><td>Wait</td><td></td><td>12:25</td></tr> <tr><td>Air Blank</td><td>0.00</td><td>12:26</td></tr> <tr><td>Subject Test</td><td>0.00</td><td>12:26</td></tr> <tr><td>  Breath Volume</td><td>2.074 LITERS</td><td></td></tr> <tr><td>Air Blank</td><td>0.00</td><td>12:27</td></tr> <tr><td>Cal Check</td><td>0.08</td><td>12:27</td></tr> <tr><td>Air Blank</td><td>0.00</td><td>12:28</td></tr> </tbody> </table>		Test	g/210L	Time	Air Blank	0.00	12:23	Subject Test	0.00	12:23	Breath Volume	2.113 LITERS		Air Blank	0.00	12:24	Wait		12:25	Air Blank	0.00	12:26	Subject Test	0.00	12:26	Breath Volume	2.074 LITERS		Air Blank	0.00	12:27	Cal Check	0.08	12:27	Air Blank	0.00	12:28	<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>		
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		NAME <b>PAPE, CHRISTOPHER</b>		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>Test Result</td></tr> <tr><td>BrAC g/210L</td></tr> <tr><td><b>0.00</b></td></tr> </table>	Test Result	BrAC g/210L	<b>0.00</b>																																	
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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.

Section 3

**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: \_\_\_\_\_ 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: \_\_\_\_\_ Place (location when signed): \_\_\_\_\_ Signature of arresting officer: \_\_\_\_\_

NAME <b>PAPE, CHRISTOPHER</b>		AGENCY <b>BOARD OF TESTS</b>	
BADGE <b>0000000484</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

# OFFICER'S AFFIDAVIT AND NOTICE OF REVOCATION/DISQUALIFICATION

11/20

Section 1

ARREST DATE 09/06/2022		ARREST TIME 1200		COUNTY # 55	CITY #	CITATION #	
ARREST LOCATION BOT				CITY		COUNTY OKLAHOMA	
SUBJECT NAME BREATHTEST, DELTA				DATE OF BIRTH 01/01/1985		SEX M	HEIGHT 510
ADDRESS 3600 MLK		CITY OKLAHOMA CITY			STATE OK	ZIP CODE 73111	
DRIVER LICENSE # B083463042			EXPIRATION DATE 10/31/2022		STATE OK	CLASS D	RESTRICTIONS ENDORSEMENTS
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

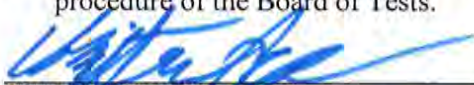

Describe person's condition (odor, actions, etc.):

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 80-006165	SPECIALIST BOARD OF TESTS																																					
STANDARD Dry		TARGET VALUE 0.080	PERMIT NUMBER 23020																																					
MANUFACTURER ILMO		LOT # 15922080A3	DATE CYLINDER INSTALLED 09/06/2022	DATE CYLINDER EXPIRES 08/05/2024																																				
OBSERVATION START 1205	TEST DATE 09/06/2022	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>12:23</td></tr> <tr><td>Subject Test</td><td>0.00</td><td>12:23</td></tr> <tr><td>Breath Volume</td><td>2.113 LITERS</td><td></td></tr> <tr><td>Air Blank</td><td>0.00</td><td>12:24</td></tr> <tr><td>Wait</td><td></td><td>12:25</td></tr> <tr><td>Air Blank</td><td>0.00</td><td>12:26</td></tr> <tr><td>Subject Test</td><td>0.00</td><td>12:26</td></tr> <tr><td>Breath Volume</td><td>2.074 LITERS</td><td></td></tr> <tr><td>Air Blank</td><td>0.00</td><td>12:27</td></tr> <tr><td>Cal Check</td><td>0.08</td><td>12:27</td></tr> <tr><td>Air Blank</td><td>0.00</td><td>12:28</td></tr> </tbody> </table>		Test	g/210L	Time	Air Blank	0.00	12:23	Subject Test	0.00	12:23	Breath Volume	2.113 LITERS		Air Blank	0.00	12:24	Wait		12:25	Air Blank	0.00	12:26	Subject Test	0.00	12:26	Breath Volume	2.074 LITERS		Air Blank	0.00	12:27	Cal Check	0.08	12:27	Air Blank	0.00	12:28	I administered said Breath-Alcohol Test in compliance with the applicable operating procedure of the Board of Tests.   SIGNATURE OF OPERATOR		
		Test	g/210L	Time																																				
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NAME PAPE, CHRISTOPHER			  Test Result BrAC g/210L <b>0.00</b>																																					
BADGE # 0000000484		PERMIT # 0000023020																																						
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: \_\_\_\_\_ 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: \_\_\_\_\_ Place (location when signed): \_\_\_\_\_ Signature of arresting officer: \_\_\_\_\_

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



12/20

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

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

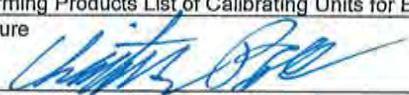
Post Office Box 36307  
Oklahoma City, Oklahoma 73136-2307  
Phone: (405) 425-2460 Fax: (405) 425-2490  
www.bot.ok.gov

Joshua Smith  
Director

## Certificate of Analysis – Reference Solution

ALPHA INSTRUMENT 2  
Intoxilyzer - Alcohol Analyzer  
Model 8000 SN 80-004923  
03/08/2022 11:33

Test	g/210L	Time
Air Blank	0.000	11:34
Cal Check	0.022	11:34
Air Blank	0.000	11:35
Cal Check	0.021	11:36
Air Blank	0.000	11:36
Cal Check	0.021	11:37
Air Blank	0.000	11:37
Cal Check	0.021	11:38
Air Blank	0.000	11:38
Cal Check	0.021	11:39
Air Blank	0.000	11:40
Cal Check	0.021	11:40
Air Blank	0.000	11:41
Cal Check	0.020	11:42
Air Blank	0.000	11:42
Cal Check	0.021	11:43
Air Blank	0.000	11:43
Cal Check	0.021	11:44
Air Blank	0.000	11:45
Cal Check	0.020	11:45
Air Blank	0.000	11:46
Cal Check Stats		
Average	0.0209	
Std Dev	0.0005	
Rel Std Dev(%)	2.7158	

NIST Traceable Breath-Alcohol Equivalent (g/210L +/- 3%) Ratio of ethanol and water free of test interfering substances.		
Manufacturer: <b>Guth</b>	Manufactured Date: <b>04/07/2021</b>	Concentration: <b>0.02</b>
Lot No.: <b>21120</b>	Expiration Date: <b>04/07/2023</b>	Equipment Model: <b>Guth 2100</b>
The above solution has been analyzed via Infrared Spectroscopy utilizing the Intoxilyzer 8000 and was performed in accordance with the procedures prescribed by the State Director of Tests pursuant to 40 OAC 30-1-3. The above NIST traceable reference solution meets the requirements for use pursuant to 40 OAC 25-1-2.1. Approved breath-alcohol measurement equipment and reference solutions. Equipment used appears on the current or supplemented Conforming Products List of Calibrating Units for Breath Alcohol Testers (72 FR 34747), published by the National Highway Traffic Safety Administration.		
Signature 	Date: <b>03/08/2022</b>	
Name <b>Christopher Pape</b>	Permit No.: <b>23020</b>	



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

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

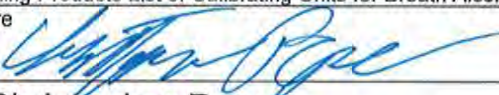
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Joshua Smith  
Director

#### Certificate of Analysis – Reference Solution

ALPHA INSTRUMENT 2  
Intoxilyzer - Alcohol Analyzer  
Model 8000 SN 80-004923  
03/08/2022 11:53

Test	g/210L	Time
Air Blank	0.000	11:53
Cal Check	0.041	11:54
Air Blank	0.000	11:54
Cal Check	0.041	11:55
Air Blank	0.000	11:56
Cal Check	0.042	11:56
Air Blank	0.000	11:57
Cal Check	0.042	11:58
Air Blank	0.000	11:58
Cal Check	0.042	11:59
Air Blank	0.000	11:59
Cal Check	0.041	12:00
Air Blank	0.000	12:01
Cal Check	0.041	12:01
Air Blank	0.000	12:02
Cal Check	0.041	12:02
Air Blank	0.000	12:03
Cal Check	0.041	12:04
Air Blank	0.000	12:04
Cal Check	0.042	12:05
Air Blank	0.000	12:05
Cal Check Stats		
Average	0.0414	
Std Dev	0.0005	
Rel Std Dev(%)	1.2473	

NIST Traceable Breath-Alcohol Equivalent (g/210L +/- 3%) Ratio of ethanol and water free of test interfering substances.		
Manufacturer: <b>Guth</b>	Manufactured Date: <b>03/01/2021</b>	Concentration: <b>0.04</b>
Lot No.: <b>21070</b>	Expiration Date: <b>03/01/2023</b>	Equipment Model: <b>Guth 2100</b>
The above solution has been analyzed via Infrared Spectroscopy utilizing the Intoxilyzer 8000 and was performed in accordance with the procedures prescribed by the State Director of Tests pursuant to 40 OAC 30-1-3. The above NIST traceable reference solution meets the requirements for use pursuant to 40 OAC 25-1-2.1. Approved breath-alcohol measurement equipment and reference solutions. Equipment used appears on the current or supplemented Conforming Products List of Calibrating Units for Breath Alcohol Testers (72 FR 34747), published by the National Highway Traffic Safety Administration.		
Signature 	Date: <b>03/08/2022</b>	
Name <b>Christopher Pape</b>	Permit No.: <b>23020</b>	



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

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Joshua Smith  
Director

**Certificate of Analysis – Reference Solution**

ALPHA INSTRUMENT

Intoxilyzer – Alcohol Analyzer


Model 8000

SN 80-002591

06/27/2022

11:40

Test	g/210L	Time
Air Blank	0.000	11:40
Cal Check	0.100	11:41
Air Blank	0.000	11:41
Cal Check	0.100	11:42
Air Blank	0.000	11:43
Cal Check	0.100	11:43
Air Blank	0.000	11:44
Cal Check	0.100	11:45
Air Blank	0.000	11:45
Cal Check	0.100	11:46
Air Blank	0.000	11:47
Cal Check	0.101	11:47
Air Blank	0.000	11:48
Cal Check	0.101	11:49
Air Blank	0.000	11:49
Cal Check	0.101	11:50
Air Blank	0.000	11:50
Cal Check	0.100	11:51
Air Blank	0.000	11:52
Cal Check	0.100	11:52
Air Blank	0.000	11:53
Cal Check Stats		
Average	0.1003	
Std Dev	0.0004	
Rel Std Dev (%)	0.4815	

NIST Traceable Breath-Alcohol Equivalent (g/210L +/- 3%) Ratio of ethanol and water free of test interfering substances.		
Manufacturer: <b>Guth</b>	Manufactured Date: <b>03/07/2022</b>	Concentration: <b>0.10</b>
Lot No.: <b>22080</b>	Expiration Date: <b>03/07/2024</b>	Equipment Model: <b>Guth 2100</b>
The above solution has been analyzed via Infrared Spectroscopy utilizing the Intoxilyzer 8000 and was performed in accordance with the procedures prescribed by the State Director of Tests pursuant to 40 OAC 30-1-3. The above NIST traceable reference solution meets the requirements for use pursuant to 40 OAC 25-1-2.1. Approved breath-alcohol measurement equipment and reference solutions. Equipment used appears on the current or supplemented Conforming Products List of Calibrating Units for Breath Alcohol Testers (72 FR 34747), published by the National Highway Traffic Safety Administration.		
Signature 	Date: <b>06/27/2022</b>	
Name <b>Christopher Pape</b>	Permit No.: <b>23020</b>	



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

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Joshua Smith  
Director

**Certificate of Analysis – Reference Solution**


ALPHA INSTRUMENT

Intoxilyzer - Alcohol Analyzer

Model 8000 SN 80-002591

06/27/2022 11:11

Test	g/210L	Time
Air Blank	0.000	11:11
Cal Check	0.199	11:12
Air Blank	0.000	11:12
Cal Check	0.200	11:13
Air Blank	0.000	11:14
Cal Check	0.200	11:14
Air Blank	0.000	11:15
Cal Check	0.200	11:16
Air Blank	0.000	11:16
Cal Check	0.201	11:17
Air Blank	0.000	11:17
Cal Check	0.200	11:18
Air Blank	0.000	11:19
Cal Check	0.201	11:19
Air Blank	0.000	11:20
Cal Check	0.200	11:21
Air Blank	0.000	11:21
Cal Check	0.200	11:22
Air Blank	0.000	11:23
Cal Check	0.201	11:23
Air Blank	0.000	11:24
Cal Check Stats		
Average	0.2002	
Std Dev	0.0006	
Rel Std Dev(%)	0.3159	

NIST Traceable Breath-Alcohol Equivalent (g/210L +/- 3%) Ratio of ethanol and water free of test interfering substances.		
Manufacturer: <b>Guth</b>	Manufactured Date: <b>02/07/2022</b>	Concentration: <b>0.20</b>
Lot No.: <b>22050</b>	Expiration Date: <b>02/07/2024</b>	Equipment Model: <b>Guth 2100</b>
The above solution has been analyzed via Infrared Spectroscopy utilizing the Intoxilyzer 8000 and was performed in accordance with the procedures prescribed by the State Director of Tests pursuant to 40 OAC 30-1-3. The above NIST traceable reference solution meets the requirements for use pursuant to 40 OAC 25-1-2.1. Approved breath-alcohol measurement equipment and reference solutions. Equipment used appears on the current or supplemented Conforming Products List of Calibrating Units for Breath Alcohol Testers (72 FR 34747), published by the National Highway Traffic Safety Administration.		
Signature 	Date: <b>06/27/2022</b>	
Name <b>Christopher Pape</b>	Permit No.: <b>23020</b>	

**GUTH LABORATORIES, INC.**

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

**CERTIFICATE OF ANALYSIS**

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 21120 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on April 16, 2021, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.0237% (w/vol) ethyl alcohol. The expiration date for this lot number is April 7, 2023 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.020 g/210L +/- 3%.

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

Ted L. Pauley, President  
GUTH LABORATORIES, INC.

***NIST Traceability:***

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

RCV'D  
8/26/21  
CP



**GUTH LABORATORIES, INC.**

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

**CERTIFICATE OF ANALYSIS**ACV'D  
8/26/21  
CP

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **21070** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **March 2, 2021**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.0488%** (w/vol) ethyl alcohol. The expiration date for this lot number is **March 1, 2023** at 11:59 PM.

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

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

Ted L. Pauley, President  
GUTH LABORATORIES, INC.

***NIST Traceability:***

*Testing was conducted using Cerilliant Reference Standard lot number FN08211802 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 17111-4511 • TELEPHONE: 717-564-5470

**CERTIFICATE OF ANALYSIS**RCVD  
5/9/2022  
CP

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **22080** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **March 9, 2022**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.1214%** (w/vol) ethyl alcohol. The expiration date for this lot number is **March 7, 2024** at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of **0.100 g/210L +/- 3%**.

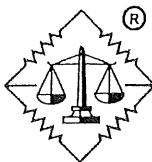
The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President  
GUTH LABORATORIES, INC.

*NIST Traceability:*

Testing was conducted using Cerilliant Reference Standard lot number **FN03052002** 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 17111-4511 • TELEPHONE: 717-564-5470

**CERTIFICATE OF ANALYSIS**RCVD  
5/9/2022  
CP

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **22050** ✓ of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **February 9, 2022**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.2437%** (w/vol) ethyl alcohol. The expiration date for this lot number is **February 7, 2024** at 11:59 PM. ✓

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

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

Ted L. Pauley, President  
GUTH LABORATORIES, INC.

*NIST Traceability:*

Testing was conducted using Cerilliant Reference Standard lot number **FN06231703** whose values are traceable to NIST.

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

Location Returned From Midwest City PD	Unit Serial # 80-006165	Date: 20/20 10/12/21
---	----------------------------	-------------------------

Inventory Process

Old Cylinder #: 07220080A2-003

Unit checked in to BOT   
  Unlink Gas Canister from Unit   
  Old cylinder disposed in inventory  
 New Unit Checked out   
  Remove old cylinder from unit (After Lab Evaluation)   
  Old cylinder archived

Check in Procedure

Connect unit to ethernet connection 172.019.004. 138  
 Download any stored records  
 Change unit location to Serial number  
 Update Unit Date and time  
 Previous time: \_\_\_\_\_  
 New Time: \_\_\_\_\_  
 Execute a new Forms load on the unit

Notes from the Field

Routine Swap     Issues in the Field

Unit is having purge fail issues in the field. Unit has been sent to CMI 2 previous times in the past with the same issue.

Lab Evaluation

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

DVM

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

Peripheral Tests

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

Atmospheric Sensor

Pressure \_\_\_\_\_      Correction Factor \_\_\_\_\_      Resistance \_\_\_\_\_      Value \_\_\_\_\_      Tank Sensor Value?  Yes /  No

Sent to CMI (If needed)	Reason Sent
Date Sent 12/30/21	Unit is having purge fail issues in the field. Unit has been sent to CMI 2 previous times with the same issue. Breath hose also has a leak. **Breath hose on unit is not the same one as in the field, was swapped with bad hose since unit was coming in for service.**
Invoice Sent 5/24/22	
Date Returned _____	

Repairs needed:

Breath hose swapped w/ 4884's leaking breath hose.

Repairs Made:

See CMI work order

Ready for Bench Check?

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