



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

Post Office Box 36307

Oklahoma City, Oklahoma 73136-2307  
Phone: (405) 425-2460 Fax: (405) 425-2490

[www.bot.ok.gov](http://www.bot.ok.gov)

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


Joshua Smith  
Director

ATTESTATION

I, the undersigned Joshua Smith (Director/Records Custodian), attest under oath pursuant to 12 O.S. §2902 (11)(a) this record was made, at or near the time of the occurrence of the matters set forth by or from information transmitted by a person having knowledge of those matters; was kept in the course of the regularly conducted business activity of the Board; and was made pursuant to the regularly conducted activity. The duplicate record provided is listed below:

- 1) The attached "Service Overview" is a true and accurate copy of maintenance performed on the Intoxilyzer 8000, serial number 80-006166, in compliance with the agency's Maintenance Policy and Procedures.

This packet consists of 16 pages.

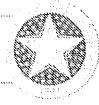
Signed 

Name of Position: Director/Records Custodian

Date of Attestation: 05/25/2022

# Service Overview

Board of Tests for Alcohol and Drug Influence  
Dokumentacja z 2019 roku, przygotowana przez Biuro Techniczne  
of the Board of Tests for Alcohol and Drug Influence



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

**BENCH CHECK DATE:** 08-26-2019

**SERIAL:** 80-006166

## **DOCUMENTATION WITHIN SERVICE PACKET:**

- BOT Certificate of Calibration and Operation
- CMI Certificate of Calibration 07-31-2019
- Bench Check
- Bench Check Technician's Report
- BOT Dry Gas Certificate of Analysis
- CMI Service Evaluation Form
- CMI Work Order
- Mock Subject Test
- BOT Certificates of Analysis on Certified Solutions (4)



Date:

Re: Request for Log of Test on Intoxilyzer 8000

Name:

Dear Sir:

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

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

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

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

Sincerely,



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

# Certificate of Calibration

This is to certify the calibration of **Intoxilyzer**® serial number 80-006166, 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 July 31, 2019 Signed [Signature]  
Technician



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

Part No. 650517 Rev.A



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

BENCH CHECK DATE 08/26/2019	TIME PROCEDURE BEGAN 08:32:5	INSTRUMENT LOCATION 80-006166
INSTRUMENT TYPE Intoxilyzer	INSTRUMENT MODEL I-8000	INSTRUMENT SERIAL NUMBER 80-006166

**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	0.017	0.017	0.018
.04	0.037	0.036	0.037
.10	0.096	0.096	0.097
.20	0.197	0.193	0.198

PASS

**CERTIFYING TECHNICIAN**

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

SIGNATURE 	DATE 08/26/2019
NAME SMITH, JOSHUA	PERMIT # 0000016837



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

# BENCH CHECK TECHNICIAN'S REPORT

Date: 08/26/19 Start Time: 08:32 End Time: 1035

## INSTRUMENT

Intoxilyzer Model 8000 Serial # 80-006166

## GAS CANISTER

LOT # 17919080A2 #006 EXP Date 08-05-2021

## REFERENCE

Simulator Model			
Guth 2100	Guth 2100	Guth 2100	Guth 2100
Serial #			
DR3591	DR3753	DR3594	DR3754
Concentration			
.02	.04	.10	.20
LOT #			
18020	17410	18070	17340
Manufactured Date			
01-09-2018	12-06-2017	02-26-2018	10-09-2017
Expiration Date			
01-09-2020	12-06-2019	02-26-2020	10-09-2019
Solution Commission Date			
<u>08-26-19</u>	<u>08-26-19</u>	<u>08-26-19</u>	<u>08-26-19</u>

## REASON FOR BENCH CHECK

- POST REPAIR  
  CYLINDER REPLACEMENT  
 TROUBLESHOOTING  
  ROUTINE MAINTENANCE

## COMMENTS


16837  
 Technician Signature / Permit #

Printed Name

Josh Smith



Certificate of Analysis - Dry Gas	
08-12-19	.080
Date of Analysis	Labelled target value (g/210L)
#006	.080
Cylinder #	Average test result
JOSEPH SMITH <i>[Signature]</i>	
BOT Technician Name and Signature	



8/16  
 ALPHA INSTRUMENT  
 Intoxilyzer - Alcohol Analyzer  
 Model 8000 SN 80-002591  
 08/12/2019 06:57

In accordance with BOT Policy and Procedure Statement BRT-2.1.0, Maintenance, the above referenced dry gas cylinder is suitable for use as an external reference with the Intoxilyzer 8000.  
 7 Eastgate Dr., P.O. Box 790 • Jacksonville, IL 62651-0790  
 217-245-2183 • Fax: 217-243-7634 • www.ilmoproducts.com

Test	g/210L	Time
Air Blank	0.000	06:58
Cal Check	0.079	06:58
Air Blank	0.000	06:59
Cal Check	0.080	06:59
Air Blank	0.000	06:59
Cal Check	0.079	07:00
Air Blank	0.000	07:00
Cal Check	0.080	07:01
Air Blank	0.000	07:01
Cal Check	0.080	07:01
Air Blank	0.000	07:02
Cal Check	0.080	07:02
Air Blank	0.000	07:03
Cal Check	0.080	07:03
Air Blank	0.000	07:04
Cal Check	0.080	07:04
Air Blank	0.000	07:04
Cal Check	0.079	07:05
Air Blank	0.000	07:05
Cal Check	0.080	07:06
Air Blank	0.000	07:06
Cal Check Stats		
Average	0.0797	
Std Dev	0.0004	
Rel Std Dev(%)	0.6060	

## Certificate of Analysis

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

*REC'D 08/01/19*  
*[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			

Distributed by:  
 CMI Inc.  
 316 East Ninth Str  
 Owensboro, KY 4  
 Phone 866-835-06  
[www.alcoholtest.c](http://www.alcoholtest.c)

*[Signature]*  
 Operator's Signature  
 16837

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

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

*[Signature]*  
 Specialty Gas Lab Tech

07-15-19  
 Issuance Date



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





# Service Evaluation Form

This form **MUST** be completed and enclosed with instrument to be serviced.

Note: Please ship items in their original shipping container.

Contact information: Customer Number 731362 (contact Customer Service)  
 Name OKLAHOMA BOARD OF TESTS Phone: (405) 425-2483  
 Fax: (405) 425-2490 Email: JOSHUA.SMITH@BOT.OK.GOV

Bill to Address:

BOARD OF TESTS  
PO BOX 36307  
OKLAHOMA CITY OK 73136-2307

Ship to Address:

BOARD OF TESTS  
3600 N. MARTIN LUTHER KING AVE.  
OKLAHOMA CITY, OK 73111

Instrument Serial Number: 80-006166

Detailed Description of Problem:

PURGE FAILS. NO LEAKS DETECTED. SOURCE APPEARS TO BE UNSTABLE

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

Note: An evaluation fee (\$83 (infrared) or \$43.<sup>50</sup> (fuel cell)) will apply to estimates which are not repaired.

I Authorize Repairs Up To:  All  \$250  \$500  \$750  Other \$ \_\_\_\_\_  
 Purchase Order Number \_\_\_\_\_

After repair, add "Certificate of Calibration" for:  S-D2, S-D5, I-300 (\$19)  
 I-200/200D, I-240, I-400/400PA (\$39)

Authorized By:

JOSH SMITH BREATH TESTING ADMIN  
 Name (Please Print) Title  
[Signature] 02-13-2019  
 Signature Date

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

No, please send estimate before repairs are made. An estimate will be faxed before performing any repairs and may cause delays in service.

V KK



10/16

SERVICE WORK ORDER

DATE: 3/11/2019

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

403404

**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 #:** 002480OK

**Serial Number:** 80-006166

**BILL CODE:** Out of Warranty

**EXTRA PARTS RCVD:**

BT, SHELF

**DESCRIPTION OF PROBLEM**

PURGE FAILS

**WORK PERFORMED:**

DVM's erratic, source unstable. Gas pressure not reading. Replaced source and reset preamp gains. Replaced gas pressure sensor.

**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
120	470218	SEAL,TAMPER EVIDENT,SERVICE	1.00 EA
130	020982	SOURCE ASSY	1.00 EA
140	210156	SENSOR, PRESSURE, 1000PSI	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: Gary Watts

SRV4034040001



# OFFICER'S AFFIDAVIT AND NOTICE OF REVOCATION/DISQUALIFICATION

11/16

Section 1

ARREST DATE <b>08/26/2019</b>		ARREST TIME <b>0900</b>		COUNTY # <b>55</b>	CITY # <b>98</b>	CITATION # <b>NONE</b>		
ARREST LOCATION <b>NOEN</b>					CITY <b>NONE</b>		COUNTY <b>OKLAHOMA</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>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, POST REPAIR MAINTENANCE**

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>80-006166</b>	SPECIALIST <b>BOARD OF TESTS</b>																																			
STANDARD <b>Dry</b>		TARGET VALUE <b>0.080</b>	PERMIT NUMBER <b>16837</b>																																			
MANUFACTURER <b>ILMO</b>		LOT # <b>17919080A2</b>	DATE CYLINDER INSTALLED <b>08/26/2019</b>	DATE CYLINDER EXPIRES <b>08/05/2021</b>																																		
OBSERVATION START <b>1000</b>	TEST DATE <b>08/26/2019</b>	MOUTHPIECE <b>G</b>	A 15-minute (or greater) deprivation/observation period was observed prior to and continuing to the time of test administration.  I administered said Breath-Alcohol Test in compliance with the applicable operating procedure of the Board of Tests.  SIGNATURE OF OPERATOR _____  NAME <b>SMITH, JOSHUA</b> BADGE # <b>0000000435</b> PERMIT # <b>0000016837</b> AGENCY <b>BOARD OF TESTS</b>																																			
RESULT TABLE <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Test</th> <th style="text-align: left;">g/210L</th> <th style="text-align: left;">Time</th> </tr> </thead> <tbody> <tr><td>Air Blank</td><td>0.00</td><td>10:31</td></tr> <tr><td>Subject Test</td><td>0.00</td><td>10:31</td></tr> <tr><td style="padding-left: 20px;">Breath Volume</td><td>2.210 LITERS</td><td></td></tr> <tr><td>Air Blank</td><td>0.00</td><td>10:32</td></tr> <tr><td>Wait</td><td></td><td>10:34</td></tr> <tr><td>Air Blank</td><td>0.00</td><td>10:34</td></tr> <tr><td>Subject Test</td><td>0.00</td><td>10:34</td></tr> <tr><td style="padding-left: 20px;">Breath Volume</td><td>2.468 LITERS</td><td></td></tr> <tr><td>Air Blank</td><td>0.00</td><td>10:35</td></tr> <tr><td>Cal Check</td><td>0.07</td><td>10:35</td></tr> <tr><td>Air Blank</td><td>0.00</td><td>10:36</td></tr> </tbody> </table>						Test	g/210L	Time	Air Blank	0.00	10:31	Subject Test	0.00	10:31	Breath Volume	2.210 LITERS		Air Blank	0.00	10:32	Wait		10:34	Air Blank	0.00	10:34	Subject Test	0.00	10:34	Breath Volume	2.468 LITERS		Air Blank	0.00	10:35	Cal Check	0.07	10:35
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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. To appeal the driver's license revocation/disqualification, the Department of Public Safety must receive your written request for an administrative hearing on the Department approved form, within fifteen (15) days from the date you received notice of revocation or disqualification. The approved hearing request form is available at <https://www.ok.gov/dps/documents/ReqHearing.pdf>. Submit your hearing request form in person at 3600 N. MLK Ave. or by mail to Legal Division, Department of Public Safety, P.O. Box 11415, OKC, OK 73136. It shall be a misdemeanor punishable by imprisonment for not less than seven (7) days nor more than six (6) months, or by a fine of not more than Five Hundred Dollars (\$500.00), or by both such fine and imprisonment, for any person to apply for a renewal or a replacement license to operate a motor vehicle while the person's license, permit, or other evidence of driving privilege is in the custody of a law enforcement officer or the Department.

Section 3

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

Date served: **08/26/2019** Signature of officer: \_\_\_\_\_ Badge #: \_\_\_\_\_

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

Section 4

Date: **08/26/2019** 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

#	NAME	TITLE	ADDRESS	PHONE
1				
2				

No Temporary License Issued:  
Test Below Legal Limit

# OFFICER'S AFFIDAVIT AND NOTICE OF REVOCATION/DISQUALIFICATION

12/16

Section 1

ARREST DATE 08/26/2019		ARREST TIME 0900		COUNTY # 55	CITY # 98	CITATION # NONE		
ARREST LOCATION NOEN					CITY NONE		COUNTY OKLAHOMA	
SUBJECT NAME MOCK, SUBJECT TEST				DATE OF BIRTH 08/09/1961	SEX M	RACE W	HEIGHT 510	WEIGHT 165
ADDRESS 3600 MARTIN LUTHER KING A			CITY OKLAHOMA CITY		STATE OK	ZIP CODE 73133		
DRIVER LICENSE # T083454871		EXPIRATION DATE 06/30/2019	STATE OK	CLASS A	RESTRICTIONS	ENDORSEMENTS M		
VEHICLE MAKE 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, POST REPAIR MAINTENANCE

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

NONE

**THE PERSON WAS INFORMED OF THE IMPLIED CONSENT TEST REQUEST**

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

Section 2

EQUIPMENT I-8000		SERIAL NUMBER 80-006166	SPECIALIST BOARD OF TESTS																																					
STANDARD Dry		TARGET VALUE 0.080	PERMIT NUMBER 16837																																					
MANUFACTURER ILMO		LOT # 17919080A2	DATE CYLINDER INSTALLED 08/26/2019	DATE CYLINDER EXPIRES 08/05/2021																																				
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SIGNATURE OF OPERATOR			<div style="border: 1px solid black; padding: 5px;"> <p>Test Result BrAC g/210L <b>0.00</b></p> </div>																																					
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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. To appeal the driver's license revocation/disqualification, the Department of Public Safety must receive your written request for an administrative hearing on the Department approved form, within fifteen (15) days from the date you received notice of revocation or disqualification.

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

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

Date served: 08/26/2019 Signature of officer: \_\_\_\_\_ Badge #: \_\_\_\_\_

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

Date: 08/26/2019 Place (location when signed): \_\_\_\_\_ Signature of arresting officer: \_\_\_\_\_

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

No Temporary License Issued:  
Test Below Legal Limit

ARRESTEE'S COPY  
BOT Form AFF02 01/2019





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

Certificate of Analysis – Wet Bath	
09-26-2018	0.0200
Date of Analysis	Labelled target value (g/210L)
18020	0.0204
Sample 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

RECV'D  
08/25/18  
[Signature]

Random Samples of Lot Number 18020 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **January 11, 2018**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.0238%** (w/vol) ethyl alcohol. The expiration date for this lot number is **January 9, 2020** at 11:59 PM.

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

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

Test	g/210L	Time
ir Blank	0.000	15:36
al Check	0.020	15:37
ir Blank	0.000	15:37
al Check	0.020	15:38
ir Blank	0.000	15:39
al Check	0.020	15:39
ir Blank	0.000	15:40
al Check	0.020	15:41
ir Blank	0.000	15:41
al Check	0.020	15:42
ir Blank	0.000	15:42
al Check	0.020	15:43
ir Blank	0.000	15:44
al Check	0.021	15:44
ir Blank	0.000	15:45
al Check	0.021	15:46
ir Blank	0.000	15:46
al Check	0.021	15:47
ir Blank	0.000	15:47
al Check	0.021	15:48
ir Blank	0.000	15:49
al Check	0.021	15:49
Check Stats		
Average	0.0204	
Std Dev	0.0005	
1 Std Dev(%)	2.5312	

[Signature] 16837  
Operator's Signature

[Signature]  
Ted L. Pauley, President  
GUTH LABORATORIES, INC.

**NIST Traceability:**

Testing was conducted using Cerilliant Reference Standard lot number FN08031603 whose values are traceable to NIST.

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



# GUTH LABORATORIES, INC.

590 NORTH 67th STREET • HARRISBURG, PA 17111-2641 • TELEPHONE: 717-564-6470

Certificate of Analysis – Wet Bath	
09-26-18	.040
Date of Analysis	Labeled target value (g/210L)
17410	0.0396
Lot Number	Average test result (g/210L)
Josh Smith	<i>[Signature]</i>
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  
*[Signature]*

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	

*[Signature]*  
Operator's Signature  
16837


*[Signature]*  
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)
	



**GUTH LABORATORIES, INC.**

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

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 **18070** of

Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **February 28, 2018**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.1219%** (w/vol) ethyl alcohol. The expiration date for this lot number is **February 26, 2020** at 11:59 PM.

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

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

Test	g/210L	Time
ir Blank	0.000	08:28
al Check	0.100	08:29
ir Blank	0.000	08:29
al Check	0.100	08:30
ir Blank	0.000	08:31
al Check	0.099	08:31
ir Blank	0.000	08:32
al Check	0.100	08:33
ir Blank	0.000	08:33
al Check	0.100	08:34
ir Blank	0.000	08:34
al Check	0.100	08:35
ir Blank	0.000	08:36
al Check	0.099	08:36
ir Blank	0.000	08:37
al Check	0.099	08:38
ir Blank	0.000	08:38
al Check	0.099	08:39
ir Blank	0.000	08:39
al Check	0.100	08:40
ir Blank	0.000	08:41
al Check Stats		
Average	0.0996	
Std Dev	0.0005	
Rel Std Dev(%)	0.5184	

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

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

*Ted L. Pauley*

Ted L. Pauley, President  
GUTH LABORATORIES, INC.


*[Signature]* 16837  
Operator's Signature

**NIST Traceability:**

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

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

Certificate of Analysis - Wet Bath

09-27-2018	.200
Date of Analysis	Labelled target value (g/210L)
17340	0.1968
Lot Number	Test result (g/210L)
	



GUTH LABORATORIES, INC.

500 NORTH 67th STREET • HARRISBURG, PA 17111-4611 • TELEPHONE: 717-564-5470

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

REC'D  
08/25/18  
QR

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.

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

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

Ted L. Pauley, President  
GUTH LABORATORIES, INC.

  
Operator's Signature

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.