



POLICE DEPARTMENT

LAKE HAVASU CITY

2360 McCULLOCH BOULEVARD NORTH
LAKE HAVASU CITY, ARIZONA 86403-5947

To Whom It May Concern:

I hereby attest that Michael T. Maloy, Jr. is a Certified Intoxilyzer Quality Assurance Specialist for the Lake Havasu City Police Department.

I certify that the attached documentation of Standard Quality Assurance Procedures and/or Standard Calibration Check Procedure are full, true and correct copy of the original.

Michael Maloy Jr. #281
Signature

STATE OF ARIZONA)
) ss
COUNTY OF MOHAVE)

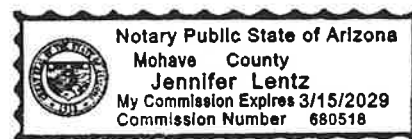
Subscribed and sworn to before me this 17 day of FEBRUARY

2020 by MICHAEL MALOY

Jennifer Lentz
NOTARY PUBLIC

02/17/2020
DATE

Commission expires: 03/15/2029



Area Code 928

Administration 855-4884
Business Office 855-1171
Investigations 855-5775
Patrol 855-0515

Fax #'s
Administration 680-5430
Business Office 680-5431
Investigations/Patrol 680-5432

Emergency 9-1-1
Non-Emergency Dispatch/ 855-4111
Havasu Silent Witness 854-TIPS

E-mail: police@lhcaz.gov

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EXHIBIT I-2
THIS REPORT PREPARED PURSUANT TO DUTY IMPOSED BY A.A.C. R13-10-104 (A)
ARIZONA DEPARTMENT OF PUBLIC SAFETY
INTOXILYZER MODEL 9000

PERIODIC MAINTENANCE AND STANDARD QUALITY ASSURANCE PROCEDURE

QA SPECIALIST M. MALOY #281 AGENCY LHCPD
DATE 02-15-2026 TIME 13:44 HRS
INTOXILYZER SERIAL # 90-003695

☒ 1. Ensure that gas tank is attached and contains a standard alcohol concentration 0.100 AC

DIAGNOSTIC TESTS

- ☒ 1. Clock time check
- ☒ 2. Date check

OPERATIONAL TESTS

- ☒ 1. Deficient Subject Test (Proper Sample Recognition)
Deficient Sample printed
- ☒ 2. Alcohol-free Subject Test (Proper Sample Recognition):
0. 000 AC
- ☒ 3. Mouth Alcohol Subject Test (Proper Sample Recognition):
Invalid Sample – Begin new deprivation period printed
- ☒ 4. Radio Frequency Interference Test (Error Recognition):
RFI Detect printed
- ☒ 5. Standard Calibration Check:
0. 099 AC
- ☒ 6. Air Blanks Completed
- ☒ 7. Timer Reset

Not a Successfully Completed Test Sequence will be printed

Instrument is operating properly and accurately. YES ☒ NO ☐

COMMENTS: P.S.I.: 1,000

SIGNATURE Michael Maloy Jr #281

DPS Form Exh I-2 (Rev 19-03)

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ARIZONA FORENSIC BREATH ALCOHOL ANALYTICAL REPORT

INSTRUMENT INFORMATION

Analytical Instrument: Intoxilyzer 9000
 Serial Number: 90-003695
 Software Version: 9439.01.00
 Analytical Report Number: 36950215260420

QAS: MALOY, MICHAEL
 QAS Permit #: 30178
 Agency: LAKE HAVASU PD
 Last 31-Day Check: 01/14/2026
 Last Annual Maintenance: 10/08/2025

SUBJECT INFORMATION

Name: 31-Day Check
 Test Date: 02/15/2026
 Driver's License #:
 Gender:
 Date of Birth:
 Age:

Weight:
 State of Issue:
 Driver's License Expiration:
 Deprivation Start Time: 13:25
 15 - Minute Deprivation: Yes

OPERATOR INFORMATION

Name: MALOY, MICHAEL
 Agency: LAKE HAVASU PD

Permit #: 30178

STANDARD INFORMATION

Standard Value: 0.100
 Standard Lot #: 302-403434231
 Expiration Date: 10/03/2027
 Bottle #: 040
 Last Changed By: MALOY, MICHAEL

Permit #: 30178

Test	g/210L	Time
Air Blank	0.000	13:44:51
Diagnostic Test	PASS	13:45:27
Air Blank	0.000	13:46:04
Calibration Chk	0.099	13:46:26
Air Blank	0.000	13:47:05
Subject Test 1	DEF*	13:50:56
Air Blank	0.000	13:51:38
Air Blank	0.000	13:52:18
Subject Test 2	0.000	13:52:50
Air Blank	0.000	13:53:45
Wait		13:57:48
Air Blank	0.000	13:58:25
Subject Test 3	INV**	13:59:33
Air Blank	RFI***	13:59:45

*Deficient Sample
 **Invalid Sample - Begin new deprivation period
 ***RFI Detect

RESULTSEXCEPTION MESSAGES

* Deficient Sample
 ** Invalid Sample - Begin new deprivation period
 *** RFI Detect

OPERATOR COMMENTS

Not a Successfully Completed Test Sequence

All air blank results must be 0.000.
 Consecutive subject test results must not differ by more than 0.020 g/210L.
 Standard check results must be $\pm 10\%$.