

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 Malon 9 # 28/ Signature # 28/

STATE OF ARIZONA	)	
COUNTY OF MOHAVE	) ss )	
Subscribed and sworn to before	fore me this day of _APRIL	
2022 by M	IICHAEL MALON	
Carla Dora	afe	
NOTARY PUBLIC	8	
4-21-22		

DATE

Commission expires:



#### Area Code 928

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

E-mail: police@lhcaz.gov

## ARIZONA FORENSIC BREATH ALCOHOL ANALYTICAL REPORT

#### INSTRUMENT INFORMATION

Analytical Instrument: Intoxilyzer 9000

Serial Number: 90-003679 Software Version: 9439.01.00

Analytical Report Number: 36790421220044

QAS: MALOY, MICHAEL

QAS Permit #: 30178

Agency: LAKE HAVASU PD

Last 31-Day Check:

03/23/2022

Last Annual Maintenance: 11/15/2021

SUBJECT INFORMATION

Name: 31-Day Check Test Date: 04/21/2022

Driver's License #:

Gender: Date of Birth:

Age:

Test.

Weight:

State of Issue:

Driver's License Expiration: Deprivation Start Time: 15:15

15 - Minute Deprivation: Yes

**OPERATOR INFORMATION** 

Name: MALOY, MICHAEL Agency: LAKE HAVASU PD

Permit #: 30178

STANDARD INFORMATION

Standard Value: 0.100

Standard Lot #: 23621100A4 Expiration Date: 11/05/2023

Bottle #: 003

Last Changed By: SLOWINSKI, JOSEPH

Permit #: 10002

1050	9/2102	11110
Air Blank	0.000	15:38:15
Diagnostic Test	PASS	15:38:50
Air Blank	0.000	15:39:26
Calibration Chk	0.101	15:39:48
Air Blank	0.000	15:40:27
Subject Test 1	DEF*	15:43:40
Air Blank	0.000	15:44:21
Air Blank	0.000	15:45:01
Subject Test 2	0.000	15:45:41
Air Blank	0.000	15:46:33
Wait		15:50:37
Air Blank	0.000	15:51:14
Subject Test 3	INV**	15:51:55
Air Blank	RFI***	15:52:11

a/210L

Time

\*\*\*RFI Detect

RESULTS		

#### **EXCEPTION MESSAGES**

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

#### **OPERATOR COMMENTS**

<sup>\*</sup>Deficient Sample

<sup>\*\*</sup>Invalid Sample - Begin new deprivation period

## 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 MAINTENTANCE AND STANDARD QUALITY ASSURANCE PROCEDURE

QA SPECIALIST M. MALOY #781 AGENCY LUCPD
DATE 04-21- 2022 TIME 1538
INTOXILYZER SERIAL# 90-003679
INTOXILYZER SERIAL# 10-00361
1. Ensure that gas tank is attached and contains a standard alcohol concentration 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
Not a Successfully Completed Test Sequence will be printed
Instrument is operating properly and accurately. YES_V_NO
COMMENTS:
SIGNATUREMichaelMalny Jr #281
DPS Form Exh I-2 (Rev 19-03)