

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 Malny # 281 Signature

STATE OF ARIZONA)
) ss
COUNTY OF MOHAVE)

Subscribed and sworn to before me this 23 day of Febuary.

2022 by Ashley Rae Bonds

NOTARY PUBLIC

2-23-22

DATE

Commission expires: May 29, 2, 25

ASHLEY RAE BONDS
Notary Public
Commission Number 601035
Expires: May 29, 2025
Mohave County

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

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

90.
QA SPECIALIST M. MALOY #78 AGENCY LUCPO DATE 02-23-2022 TIME 1645
DATE 02-23-2022 TIME 1645
INTOXILYZER SERIAL# 90-003679
1. Ensure that gas tank is attached and contains a standard alcohol concentration O.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. 600 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. 09 8 AC 6. Air Blanks Completed 7. Timer Reset
Not a Successfully Completed Test Sequence will be printed
Instrument is operating properly and accurately. YESNO
COMMENTS: INSTRUMENT PLACES INTO SORVICE IN JAIL.
SIGNATURE Michael Malon #281
DPS Form Exh I-2 (Rev 19-03)

ARIZONA FORENSIC BREATH ALCOHOL ANALYTICAL REPORT

INSTRUMENT INFORMATION

Analytical Instrument: Intoxilyzer 9000

Serial Number: 90-003679 Software Version: 9439.01.00

Analytical Report Number: 36790223220004

QAS: MALOY, MICHAEL

QAS Permit #: 30178

Agency: LAKE HAVASU PD

Last 31-Day Check:

12/11/2021

Last Annual Maintenance: 11/15/2021

SUBJECT INFORMATION

Name: 31-Day Check

Test Date: 02/23/2022

Driver's License #:

Gender: Date of Birth:

Age:

Weight:

State of Issue:

Driver's License Expiration: Deprivation Start Time: 16:25

15 - Minute Deprivation: Yes

OPERATOR INFORMATION

Name: MALOY, MICHAEL

Agency: LAKE HAVASU PD

Test	g/210L	Time
Air Blank	0.000	16:45:47
Diagnostic Test	PASS	16:46:23
Air Blank	0.000	16:47:00
Calibration Chk	0.098	16:47:21
Air Blank	0.000	16:48:01
Subject Test 1	DEF*	16:51:21
Air Blank	0.000	16:52:10
Air Blank	0.000	16:52:50
Subject Test 2	0.000	16:53:12
Air Blank	0.000	16:53:53
Wait		16:57:57
Air Blank	0.000	16:58:34
Subject Test 3	INV**	16:58:56
Air Blank	RFI***	16:59:16

^{*}Deficient Sample

***RFI Detect

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

<u>RESULTS</u>			

EXCEPTION MESSAGES

- * Deficient Sample
- *** RFI Detect

OPERATOR COMMENTS

^{**}Invalid Sample - Begin new deprivation period **Invalid Sample - Begin new deprivation period