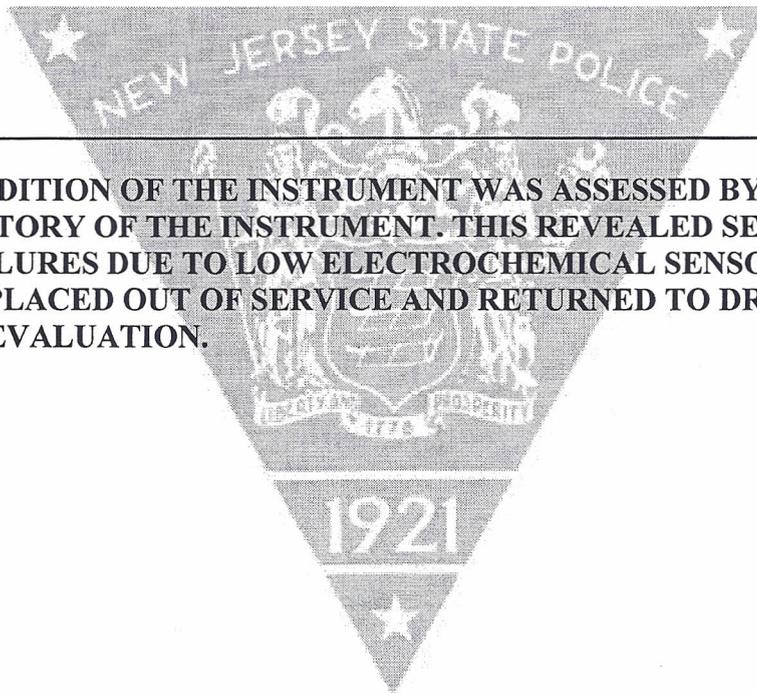


STATE OF NEW JERSEY
DEPARTMENT OF LAW AND PUBLIC SAFETY
DIVISION OF STATE POLICE
BREATH TESTING INSTRUMENTATION SERVICE REPORT

1. Department: CEDAR GROVE POLICE DEPARTMENT 525 POMPTON AVE. CEDAR GROVE NJ 07009		2. Contact: SGT. F. PUMPHREY	4. Date: 04-24-2013
		3. Phone Number: 973-239-4143	5. County: ESSEX
6. Alcotest Instrument Serial Number: <p style="text-align: center;">ARXC-0091</p>	7. Simulator Component Serial Number: <p style="text-align: center;">N/A</p>	8. Temperature Probe Component Serial Number: <p style="text-align: center;">N/A</p>	

9. Reason for Service:
FUEL CELL REPLACEMENT



10. Comments:
OPERATIONAL CONDITION OF THE INSTRUMENT WAS ASSESSED BY REVIEWING THE PERFORMANCE HISTORY OF THE INSTRUMENT. THIS REVEALED SEVERAL REPEATED CONTROL TEST FAILURES DUE TO LOW ELECTROCHEMICAL SENSOR (EC) RESULTS. INSTRUMENT WAS PLACED OUT OF SERVICE AND RETURNED TO DRAEGER SAFETY DIAGNOSTICS FOR EVALUATION.

11. The above Instrument/Component has been found to be in satisfactory working condition; no further action required.
12. The above Instrument/Component is placed out of service pending further evaluation.
13. The above Instrument/Component is placed back in service.

"I have been certified by the Attorney General as a Breath Test Coordinator/Instructor pursuant to N.J.A.C. 13:51, et. seq. In my official capacity as a Breath Test Coordinator/Instructor I perform inspections of evidential breath test devices and related components of evidential breath test systems. I have inspected the evidential breath test device listed on this report in my official capacity. The results of my inspection are recorded on this form. I certify that the forgoing statements made by me are true and accurate to the best of my knowledge. I am aware that if any of the forgoing statements made by me are willingly false, I am subject to punishment."

TPR I. M. ARROYO #6291
 Name & Badge Number (Print)

Ipc I. M. Arroyo 6291 4/24/13
 Signature Date