

**Operator**

**Permit Number 50205**

This is to certify that

**Kristen Marie Oleksik**

has met the requirements for issuance of this permit for the operation of the **Intoxilyzer 8000**

First Issued: 1/12/2018

Issued: 1/12/2018

Expires: 1/12/2023



*F. L. Miller*

Director, Arizona Department of Public Safety

**Intoxilyzer 9000 Operator Permit**

Permit number **40745** certifies

**KRISTEN MARIE OLEKSIK**

has met the AZ DPS requirements for issuance of this permit for the operation of the Intoxilyzer 9000

First Issued: 20210330

Issued: 20210330

Expires: 20260330

