



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
STATE PUBLIC HEALTH LABORATORY
BREATH ALCOHOL PROGRAM
CMI INTOXILYZER 5000 MAINTENANCE REPORT

RECEIVED
By Carol Day at 9:44 am, Feb 10, 2014

REPORT #4

Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 35 days).
Complete this report whenever the instrument is serviced or repaired and whenever it is placed into service.
Retain the original and send a copy within 15 days to the Breath Alcohol Program, DHSS.

INTOXILYZER 5000 SN 66005161	NAME OF AGENCY Liberty Police Department	DATE OF INSPECTION 02/06/2014
LOCATION OF INSTRUMENT (STREET AND CITY) 101 E. Kansas St. 64068		TIME OF INSPECTION 8:37 am

CHECKLIST: Place a mark by each item if found to be satisfactory or is operating within established limits. (Write in observed values where determined.) Unmarked items must be corrected before using instrument.

- DVM TEST: (.350 ± .150) _____ .499
- DIAGNOSTIC CHECK (PRINTOUT ATTACHED) DATE AND TIME (FROM PRINTOUT) 02/06/2014 08:37
- CHARACTER DISPLAY TEST
- PRINT TEST (PRINTOUT ATTACHED)
- SIMULATOR SOLUTION SUPPLIER Guth Labs LOT # 13210 EXP. DATE 07/29/2015
- SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIMULATOR SN DR2766 EXP. DATE 07/30/2014
- CALIBRATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)
Run three tests using a standard solution. All three tests must be within ± 5% of the standard value and must have a spread of .005 or less. Mark the box corresponding to the standard solution being used. (PRINTOUT ATTACHED)
 - 0.100% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE
 - 0.080% STANDARD - MUST READ BETWEEN 0.076% AND 0.084% INCLUSIVE
 - 0.040% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE

TEST 1 ← .100	TEST 2 → .100	TEST 3 ← .099
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PERFORM RFI TEST (PRINTOUT ATTACHED)

INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:
(DO NOT INCLUDE SELF-ADMINISTERED TESTS)

REFUSALS	1	0-04	0	.05-.09	0	.10-.14	0	.15-.19	1	Over .19	0
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LIST ANY NEW PARTS AND DESCRIBE ANY ALTERATION OR MODIFICATION THAT WAS MADE TO RESTORE THE INSTRUMENT TO OPERATE SATISFACTORILY AND WITHIN ESTABLISHED LIMITS (USE OTHER SIDE IF NECESSARY).

Operating within DOHSS specifications

Guth Labs, lot no. 13210, MFG 07/29/2013, Exp. Date 07/29/2015 bottle # 1421

INSPECTING OFFICER	
SIGNATURE <i>Robert D. Bratcher</i>	PRINT FULL NAME Robert D. Bratcher
TYPE II SERIAL NUMBER/EXPIRATION DATE 230145 08/01/2015	TELEPHONE NUMBER (816) 439-4701

RETURN COMPLETED REPORT TO THE: Breath Alcohol Program, Missouri Department of Health and Senior Services
Southeast District Office
2875 James Blvd.
Poplar Bluff, MO 63901



GUTH LABORATORIES, INC.
580 NORTH 6TH STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-654-5670

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 13210 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on July 31, 2013, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1216% (w/vol) ethyl alcohol. The expiration date for this lot number is July 29, 2015 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.100 g/210L +/- 3%.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President
GUTH LABORATORIES, INC.

NIST Traceability:

Testing was conducted using Cerilliant Reference Standard lot number FN122211-02 whose values are traceable to NIST.

All balances are calibrated annually by an outside agency using NIST traceable weights. Calibration verification is done prior to each use utilizing NIST traceable weights.

THIS SIDE UP, THIS EDGE IN, FORM NUMBER 015010

LIBERTY POLICE DEPARTMENT
INTOXILYZER + ALCOHOL ANALYZER
NO MODEL 5000 SN 66-005161
02/06/2014

DIAGNOSTIC TEST 00:37

PROM CHECK E735.23 PASSED
RAM CHECK PASSED
TEMP CHECK PASSED
PROCESSOR CHECK
SYNC PULSE PASSED
SYNC SPEED PASSED
NEG STABILITY PASSED
POS STABILITY PASSED
REF RANGE PASSED

DIAGNOSTIC PASSED

PRINTER CHECK
ABCDEFGHIJKLMNOPQRSTUVWXYZ
0123456789

THIS SIDE UP, THIS EDGE IN, FORM NUMBER 015010

SN 66-005161 02/06/2014
E735.23 00:38

ABCDEFGHIJKLMN OPQRSTUVWXYZ0123
ABCDEFGHIJKLMN OPQRSTUVWXYZ0123456789
ABCDEFGHIJKLMN OPQRSTUVWXYZ012345678910#*abcde
ABCDEFGHIJKLMN
ABCDEFGHIJKLMN OP
ABCDEFGHIJKLMN OP
ABCDEFGHIJKLMN OPQRSTUVWXYZ012345678910#*abcde

SUBJECT'S NAME

DATE FIRST OBSERVED

INSTRUMENT LOCATION

Det. Bratton
OPERATOR

ADDITIONAL INFORMATION AND/OR REMARKS

INTOXILYZER INSTRUMENT PRINTER CARD



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SUBJECT'S NAME

DATE FIRST OBSERVED

INSTRUMENT LOCATION

Det. Bratton
OPERATOR

ADDITIONAL INFORMATION AND/OR REMARKS

INTOXILYZER INSTRUMENT PRINTER CARD



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THIS SIDE UP, THIS EDGE IN, FORM NUMBER 016010

LIBERTY POLICE DEPARTMENT
INTOXILYZER - ALCOHOL ANALYZER
NO MODEL 5000 SH 66-005161
02/06/2014

TEST	%BAC	TIME
AIR BLANK	.000	08:39
CAL. CHECK	.100	08:40
AIR BLANK	.000	08:40
CAL. CHECK	.100	08:40
AIR BLANK	.000	08:41
CAL. CHECK	.099	08:41
AIR BLANK	.000	08:41

NO RFI PRESENT

THIS SIDE UP, THIS EDGE IN, FORM NUMBER 016010

SN 66-005161
E735.23
INVALID TEST
INHIBITED - RFI

02/06/2014
08:44

SUBJECT'S NAME

TIME TEST INITIATED

INSTRUMENT LOCATION

John D. Bostler
OPERATOR

ADDITIONAL INFORMATION AND/OR REMARKS

INTOXILYZER INSTRUMENT PRINTER CARD



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SUBJECT'S NAME

TIME TEST INITIATED

INSTRUMENT LOCATION

John D. Bostler
OPERATOR

ADDITIONAL INFORMATION AND/OR REMARKS

INTOXILYZER INSTRUMENT PRINTER CARD



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STATE OF MISSOURI
DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM



PERMIT
TYPE II

ROBERT D BRATCHER

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

INTOXILYZER 5000, INTOXILYZER 8000

for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 308.111 through 308.119, RSMo.

DATE 8/1/2013

NUMBER 230145

EXPIRES 8/1/2015

MO:90.0271(B:10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

acting director

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-1(R0410)

STATE OF MISSOURI
DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM

INSTRUMENT OPERATOR CARD

The named cardholder is authorized to operate an evidential breath alcohol instrument for the determination of the alcoholic content in breath form of expired air in Missouri.

Operator BRATCHER, ROBERT
Permit No 230145
Date Issued 8/1/2013 Date Expires 8/1/2015