



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

RECEIVED
 By Carol Day at 3:42 pm, Apr 28, 2014

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 <u>66005190</u>	NAME OF AGENCY <u>Dexter Police Dept.</u>	DATE OF INSPECTION <u>04-24-2014</u>
LOCATION OF INSTRUMENT (STREET AND CITY) <u>305 Cooper Dexter, Mo. 63841</u>		TIME OF INSPECTION <u>2013</u>

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) .391
- DIAGNOSTIC CHECK (PRINTOUT ATTACHED) DATE AND TIME (FROM PRINTOUT) 4-24-2013 2013 hr.
- CHARACTER DISPLAY TEST PASSED
- PRINT TEST (PRINTOUT ATTACHED) PASSED
- SIMULATOR SOLUTION SUPPLIER Repla LOT # 12002 EXP. DATE 8-29-2014
- SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34°C SIMULATOR SN SD3328 EXP. DATE 3-11-2015
- 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 • <u>.096</u>	TEST 2 • <u>.097</u>	TEST 3 • <u>.095</u>
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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 <u>0</u>	0-.04 <u>2</u>	.05-.09 <u>1</u>	.10-.14 <u>2</u>	.15-.19 <u>1</u>	Over .19 <u>0</u>
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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).

INSPECTING OFFICER

SIGNATURE 	PRINT FULL NAME <u>Cpl. John Moore</u>
TYPE II PERMIT NUMBER/EXPIRATION DATE <u>220256 9-11-2014</u>	TELEPHONE NUMBER <u>(573) 624-5512</u>

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

CERTIFICATE OF ANALYSIS

MANUFACTURER AND SUPPLIER: RepCo Marketing, Inc.
LOT NUMBER: 12002
EXPIRATION DATE: August 29, 2014 at 11:59 p.m.

RepCo Marketing, Inc. certifies the following:

RepCo Marketing, Inc. manufactured, tested and supplied Lot Number 12002 of Alcohol Certified Solution for simulators. Random samples of said lot number were analyzed by an independent laboratory utilizing a gas chromatograph and found to contain .1209 gms/dl +/- .003 gms/dl wt/vol ethanol (95% Confidence).

The alcohol and distilled water used in the solution were found to be free of any interfering substance.

This solution will produce a vapor alcohol value of .100 +/- 3% gms/210L Breath when heated to 34 Degrees Celsius +/- 0.2 Degrees Celsius in a simulator (95% Confidence).

The date of manufacture for this lot number is August 30, 2012
The expiration date for this lot number is August 29, 2014 at 11:59 p.m.

This document is a true representation of the original Certificate of Analysis.



Cecil B. Garner, President
RepCo Marketing, Inc.

DEXTER POLICE DEPT.
INTOXILYZER - ALCOHOL ANALYZER
NO MODEL 5000 SN 66-005190
04/24/2014

DEXTER PD
INTOXILYZER - ALCOHOL ANALYZER
NO MODEL 5000 SN 66-005190
04/24/2014

DIAGNOSTIC TEST 20:13

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
ABCDEFGHIJKLMN O PQRSTU VWXYZ
0123456789

TEST %BAC TIME
AIR BLANK .000 21:31
CAL. CHECK .096 21:31
AIR BLANK .000 21:32
CAL. CHECK .097 21:32
AIR BLANK .000 21:32
CAL. CHECK .095 21:33
AIR BLANK .000 21:33

NO RFI PRESENT

SUBJECT'S NAME

Dexter PD

TIME FIRST OBSERVED

INSTRUMENT LOCATION

[Signature] 918

OPERATOR

ADDITIONAL INFORMATION AND/OR REMARKS

SUBJECT'S NAME

Dexter PD

TIME FIRST OBSERVED

INSTRUMENT LOCATION

[Signature] 918

OPERATOR

ADDITIONAL INFORMATION AND/OR REMARKS



SN 66-005190
E735.23

04/24/2014
20:21

ABCDEFGHIJKLMN OPQRSTU VWXYZ0123
ABCDEFGHIJKLMN OPQRSTU VWXYZ0123456789
ABCDEFGHIJKLMN OPQRSTU VWXYZ0123456789!@#
ABCDEFGHIJKLMN
ABCDEFGHIJKLMN OP
ABCDEFGHIJKLMN OPQRSTU
ABCDEFGHIJKLMN OPQRSTU VWXYZ0123456789!@#

SN 66-005190
E735.23

04/24/2014
21:34

INVALID TEST
INHIBITED - RFI

SUBJECT'S NAME

Dexter PD

TIME FIRST OBSERVED

INSTRUMENT LOCATION

[Signature] 918

OPERATOR

ADDITIONAL INFORMATION AND/OR REMARKS

SUBJECT'S NAME

Dexter PD

TIME FIRST OBSERVED

INSTRUMENT LOCATION

[Signature] 918

OPERATOR

ADDITIONAL INFORMATION AND/OR REMARKS

INTOXILYZER[®] INSTRUMENT PRINTER CARD



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STATE OF MISSOURI
DEPARTMENT OF HEALTH



P E R M I T
TYPE II



JOHN W MOORE

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

INTOXILYZER 5000

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

Date 09/11/2012

Number 220256

Expires 09/11/2014

Director of State Public Health Laboratory

Director, Department of Health