



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

received 8/20/14-cd

REPORT #4

CMI INTOXILYZER 5000 MAINTENANCE REPORT

REVIEWED

By Carol Day at 12:37 pm, Aug 28, 2014

Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 35 days) 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. *Expires ALBI 01-12-2014*

INTOXILYZER 5000 SN <i>66005190</i>	NAME OF AGENCY <i>Dexter P.O.</i>	DATE OF INSPECTION <i>8-8-14</i>
LOCATION OF INSTRUMENT (STREET AND CITY) <i>305 Cooper Dexter mo 63841</i>		TIME OF INSPECTION <i>7250</i>

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) *.294*

DIAGNOSTIC CHECK (PRINTOUT ATTACHED) DATE AND TIME (FROM PRINTOUT) *8-8-14 2055*

CHARACTER DISPLAY TEST

PRINT TEST (PRINTOUT ATTACHED)

SIMULATOR SOLUTION SUPPLIER *Repro* LOT # *13002* EXP. DATE *6-19-15*

SIMULATOR TEMPERATURE (34°C ± 0.2°C) *34.0°C* SIMULATOR SN *S03328* EXP. DATE *3-11-15*

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 • <i>.095</i>	TEST 2 • <i>.095</i>	TEST 3 • <i>.095</i>
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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 <i>0</i>	0-.04 <i>0</i>	.05-.09 <i>1</i>	.10-.14 <i>0</i>	.15-.19 <i>0</i>	Over .19 <i>3</i>
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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 <i>[Signature]</i> 914	PRINT FULL NAME <i>Sgt. Joshua T. Benton 914</i>
TYPE II PERMIT NUMBER/EXPIRATION DATE <i>200243 09-11-14</i>	TELEPHONE NUMBER <i>573-624-5512</i>

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: 13002

EXPIRATION DATE: June 19, 2015 at 11:59 p.m.

RepCo Marketing, Inc. certifies the following:

RepCo Marketing, Inc. manufactured, tested and supplied Lot Number 13002 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 .1217 gms/dl +/-0.003 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 June 20, 2013
The expiration date for this lot number is June 19, 2015 at
11:59 p.m.

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



Cecil B. Garner, President
RepCo Marketing, Inc.

THIS SIDE UP. THIS EDGE IN. FORM NUMBER 015010

SN 66-005190
E735.23

08/08/2014
22:56

ABCDEFGHIJKLMN OPQRSTU VWXYZ0123
ABCDEFGHIJKLMN OPQRSTU VWXYZ0123456789
ABCDEFGHIJKLMN OPQRSTU VWXYZ0123456789!@#%&'abcde
ABCDEFGHIJKLMN O
ABCDEFGHIJKLMN OPQR
ABCDEFGHIJKLMN OPQRSTU
ABCDEFGHIJKLMN OPQRSTU VWXYZ0123456789!@#%&'abcde

THIS SIDE UP. THIS EDGE IN. FORM NUMBER 015010

SN 66-005190
E735.23

08/08/2014
23:03

INVALID TEST
INHIBITED - RFI

Maintenance

SUBJECT'S NAME

2250

TIME FIRST OBSERVED

Dexta P.D.

INSTRUMENT LOCATION

[Signature]

OPERATOR

ADDITIONAL INFORMATION AND/OR REMARKS

Maintenance

SUBJECT'S NAME

2250

TIME FIRST OBSERVED

Dexta P.D.

INSTRUMENT LOCATION

[Signature]

OPERATOR

ADDITIONAL INFORMATION AND/OR REMARKS

THIS SIDE UP. THIS EDGE IN. FORM NUMBER 015010

DEXTER PD
INTOXILYZER - ALCOHOL ANALYZER
NO MODEL 5000 SN 66-005190
08/08/2014

DIAGNOSTIC TEST 22:55

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
ABCDEFGHIJKLMNPOQRSTUVWXYZ
0123456789

THIS SIDE UP. THIS EDGE IN. FORM NUMBER 015010

DEXTER PD
INTOXILYZER - ALCOHOL ANALYZER
NO MODEL 5000 SN 66-005190
08/08/2014

TEST	%BAC	TIME
AIR BLANK	.000	22:59
CAL. CHECK	.095	23:00
AIR BLANK	.000	23:00
CAL. CHECK	.095	23:00
AIR BLANK	.000	23:01
CAL. CHECK	.095	23:01
AIR BLANK	.000	23:01

NO RFI PRESENT

Maintenance

SUBJECT'S NAME

2050

TIME FIRST OBSERVED

Dexter P.O.

INSTRUMENT LOCATION

[Signature]
914

OPERATOR

ADDITIONAL INFORMATION AND/OR REMARKS

Maintenance Report

SUBJECT'S NAME

2050

TIME FIRST OBSERVED

Dexter P.O.

INSTRUMENT LOCATION

[Signature]
914

OPERATOR

ADDITIONAL INFORMATION AND/OR REMARKS