



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

RECEIVED 23-14
 By Carol Day at 12:22 pm, Nov 24, 2014
 REPORT #4

Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 30 days) and 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 66005190	NAME OF AGENCY Dexter P.D.	DATE OF INSPECTION 11-18-14
LOCATION OF INSTRUMENT (STREET AND CITY) 305 Cooper Dexter MO 63841		TIME OF INSPECTION 0950

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) **.270** **PASSED**

DIAGNOSTIC CHECK (PRINTOUT ATTACHED) DATE AND TIME (FROM PRINTOUT) **11-18-14 1003**

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 **SD3328** 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 • .098	TEST 2 • .097	TEST 3 • .097
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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 0	0-.04 0	.05-.09 0	.10-.14 1	.15-.19 0	Over .19 2
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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 [Signature]	PRINT FULL NAME L. Joshua Benton
TYPE II PERMIT NUMBER/EXPIRATION DATE 240330 9-3-16	TELEPHONE NUMBER 572-624-5512

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 +/- .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.



INTOXILYZER[®] INSTRUMENT PRINTER CARD
© 1986 by CMI INC.

ADDITIONAL INFORMATION AND/OR REMARKS

OPERATOR

[Signature]

TIME FIRST OBSERVED

0950

INSTRUMENT LOCATION

Dext. PD

SUBJECT'S NAME

MAINTENANCE



INTOXILYZER[®] INSTRUMENT PRINTER CARD
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ADDITIONAL INFORMATION AND/OR REMARKS

OPERATOR

[Signature]

TIME FIRST OBSERVED

0950

INSTRUMENT LOCATION

Dext. PD

SUBJECT'S NAME

MAINTENANCE

NO RFI PRESENT

TEST	2800	10:13
AIR BLANK	000	10:13
CAL. CHECK	098	10:14
AIR BLANK	000	10:14
CAL. CHECK	097	10:14
AIR BLANK	000	10:15
CAL. CHECK	097	10:15
AIR BLANK	000	10:15
CAL. CHECK	098	10:15

DEXTER PD
INTOXILYZER - ALCOHOL ANALYZER
NO MODEL 5000 SN 66-005190
11/18/2014

SN 66-005190
E735.23
INVALID TEST
INHIBITED - RFI

11/18/2014
10:05



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

2

**PERMIT
 TYPE II**

JOSHUA T BENTON

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

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 306.111 through 306.119 RSMo.

DATE 9/3/2014
 NUMBER 240330
 EXPIRES 9/3/2016


 DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
 Garl Vesterby
 ,acting director
 DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

LAB-4 (R6-10)

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 BENTON, JOSHUA
 Permit No 240330
 Date issued 9/3/2014 Date Expires 9/3/2016