



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
 STATE PUBLIC HEALTH LABORATORY
CMI INTOXILYZER 8000 MAINTENANCE REPORT

RECEIVED
 By Carol Day at 2:50 pm, Mar 31, 2014

Complete this report in duplicate at the time of the regular monthly preventive maintenance check, and whenever instrument is repaired. Send one copy to Department of Health and Senior Services, and retain one copy in department file.

INSTRUMENT SERIAL NUMBER 80-005835	LOCATION OF INSTRUMENT CMI INC - Duquesne PD	DATE OF INSPECTION 03/13/2014	TIME OF INSPECTION 12:02
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CALIBRATION CHECK RESULTS			CALIBRATION CHECK SUMMARY		
Test	g/210L	Time	STANDARD TYPE	STANDARD LOT #	STANDARD EXPIRATION DATE
-----	-----	-----	WET	13210	07/29/2015
Air Blank	0.000	12:06	SIM TEMPERATURE	SIM SERIAL NUMBER	SIM CERTIFICATE EXPIRATION
Cal Check	0.098	12:07	34.0	DR5372	03/07/2015
Air Blank	0.000	12:07	STANDARD VALUE	STANDARD SUPPLIER	
Cal Check	0.099	12:08	0.100	GUTH	
Air Blank	0.000	12:08	CALIBRATION CHECK RESULT 1		
Cal Check	0.099	12:09	0.098		
Air Blank	0.000	12:10	CALIBRATION CHECK RESULT 2		
Cal Check	0.099	12:09	0.099		
Air Blank	0.000	12:10	CALIBRATION CHECK RESULT 3		
			0.099		
			MAXIMUM DEVIATION (MUST BE WITHIN 5%)	SPREAD (MUST BE .005 OR LESS)	
			2.0%	0.001	

Pass

DIAGNOSTIC TEST RESULTS			RFI TEST RESULTS		
Voltage/Current Test	Pass		Test	g/210L	Time
RAM Test	Pass		-----	-----	-----
EEPROM Checksum Test	Pass		Air Blank	0.000	12:10
Real Time Clock Test	Pass		Subject Test	RFI*	12:11
DSP Test	Pass		Air Blank	0.000	12:11
Analytical Stability Test	Pass		*RFI Detect		
Modem Test	Pass				
Temperature Regulation Test	Pass				

Pass

Pass

NUMBER OF REFUSALS AND SUBJECT BREATH TESTS IN EACH RANGE SINCE LAST MAINTENANCE REPORT							
REFUSALS	00-04	05-09	10-14	15-19	OVER 19		
0	1	0	1	0	0	0	0

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).
 MAINT

INSPECTING OFFICER			
SIGNATURE 		PRINT NAME HOUDYSHELL/RONNY	
TYPE II PERMIT NUMBER 230325	EXPIRATION DATE 12/23/2015	TELEPHONE NUMBER 4177814823	



GUTH LABORATORIES, INC.

600 NORTH 87th STREET • HARRISBURG, PA 17111-4611 • TELEPHONE: 717-564-6470

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 $34^{\circ}\text{C} \pm 0.2^{\circ}\text{C}$, this solution will give a breath alcohol analysis instrument reading of 0.100 g/210L $\pm 3\%$.

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 Certified 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.



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

2

PERMIT
TYPE II
RONNY HOUDYSHELL

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

DATAMASTER, 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 306.111 through 306.119 RSMo.

DATE 12/23/2013

NUMBER 230325

EXPIRES 12/23/2015

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

acting director

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (R6-10)

LAB 620-0771 (6-10)

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 HOUDYSHELL, RONNY
Permit No 230325
Date Issued 12/23/2013 Date Expires 12/23/2015



Simulator Calibration Report

This calibration report is to certify the alcohol reference simulator listed below has been examined and tested using standards traceable to the National Institute of Standards and Technology (NIST) in accordance with the standards set by the Missouri Department of Health and Senior Services Rules and Regulations:
19CSR 25-30.051 (4).

Checked: 03/07/2014 Expires: 03/07/2015
MSC Tech: DDD
Temp: 34.01 Digital Therm. SN: 093752
Agency: Duquesne Police Department
DR5372



Technician Printed Name: Donald D. DeBoard

Technician Signature: Donald D. DeBoard

Date: 3-7-2014

Contact: Missouri Safety Center

Breath Alcohol Instrument Training Program

660-543-4834