

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

INTOX DMT MAINTENANCE REPORT

REPORT #1

Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 30 days) or
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.

RECEIVED
By Carol Day at 7:47 am, Nov 05, 2015

| | | |
|---|---|----------------------------------|
| INTOX DMT SN 500131 | NAME OF AGENCY Missouri State Highway Patrol | DATE OF INSPECTION 11/03/2015 |
| LOCATION OF INSTRUMENT (STREET AND CITY) Laclede Co. SO 240 N. Adams Ave., Lebanon | | TIME OF INSPECTION 11:32:28 |

CHECKLIST: Place a mark in the box 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.

DIAGNOSTIC RECORD

| | |
|--|---|
| DATE AND TIME <u>11/03/2015 11:32:30</u> | <input checked="" type="checkbox"/> DETECTOR |
| <input checked="" type="checkbox"/> PROGRAM | <input checked="" type="checkbox"/> FILTER 1 |
| <input checked="" type="checkbox"/> SAMPLE CHAMBER <u>48.8°C</u> | <input checked="" type="checkbox"/> FILTER 2 |
| <input checked="" type="checkbox"/> BREATH TUBE <u>47.1°C</u> | <input checked="" type="checkbox"/> FILTER 3 |
| <input checked="" type="checkbox"/> PUMP | <input checked="" type="checkbox"/> INTERNAL STANDARD |

BREATH ANALYZER ACCURACY STANDARDS

SIMULATOR STANDARD COMPRESSED ETHANOL-GAS MIXTURE

STANDARD SUPPLIER ILMO LOT # 25814080A3 EXP. DATE 10/05/2016

SIMULATOR TEMP (34°C ± 0.2°C) _____ SIMULATOR SN _____ SIMULATOR EXP DATE _____

CALIBRATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)
Run three tests using a standard. 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 being used.

0.10% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE

0.08% STANDARD - MUST READ BETWEEN 0.076% AND 0.084% INCLUSIVE

0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE

TEST 1: 0.079 TEST 2: 0.079 TEST 3: 0.079

PERFORM R.F.I. TEST

INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:

| | | | | | |
|-------------|---------|----------|----------|----------|------------|
| REFUSALS: 0 | 0-04: 1 | 05-09: 4 | 10-14: 0 | 15-19: 0 | OVER 19: 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)

INSPECTING OFFICER

| | | |
|--------------------------------------|---------------------------------|----------------------------------|
| SIGNATURE | PRINT FULL NAME JAMES CONWAY | |
| TYPE IDENTIFICATION NUMBER 240153 | EXPIRATION DATE 04/22/2016 | TELEPHONE NUMBER 573-368-2345 |

RETURN COMPLETED REPORT TO THE Breath Alcohol Program, MO Department of Health and Senior Services
Southeast District Office
2975 James Blvd. Poplar Bluff, MO 63901



7 Eastgate Dr. • P.O. Box 790 • Jacksonville, IL 62651-0790
217-245-2183 • Fax: 217-243-7634 • www.ilmo-products.com

Certificate of Analysis

Certificate ID: 7199
Part #: BAC108L080T
Cylinder Size: 108L
Lot Number: 25814080A3
Expiration: 10/5/2016

0.080 BAC (For the calibration of instruments used to determine breath alcohol concentration)

Contents: 108 Liters @ 1200 psig 70°F (21°C)

| Component: | Concentration: | Accuracy: | Method: |
|------------|----------------|--|---------|
| Ethanol | 200 ppm | ± 0.003 or 1% BAC whichever is greater | NDIR |
| Nitrogen | Balance | | |

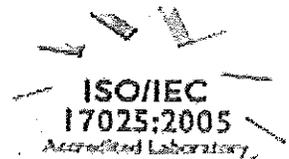
*NIST Standard Reference Material
Cylinder No. CC14290 / Job No. 09160202
Certified 212.8 µmol/mol Ethanol in Nitrogen
for ILMO Products Co., Jacksonville, IL

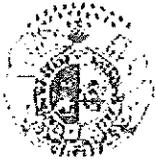
Store in dry area, away from sources of heat, ignition
and direct sunlight. Do not allow storage area to
exceed 52 °C (125 °F).

Jacob Fillette
Specialty Gas Lab Tech

09/25/14
Date

Distributed by: CMI Inc.
316 East Ninth Street
Owensboro, KY 42303
Phone 866-835-0690
www.alcoholtest.com





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



PERMIT
TYPE II
JAMES E CONWAY

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

INTOX DMT

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 4/22/2014

[Signature]
 DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

NUMBER 240153

[Signature]
 DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

EXPIRES 4/22/2016

MS-15 (2/11/10)

MS-158 (14)

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

INSTRUMENT OPERATOR CARD

The holder of this permit is authorized to operate an Intox EC/CO/ET-5000 instrument for the determination of the alcoholic content of breath from an operator in Missouri.



Operator: CONWAY, JAMES
 Permit No: 240153
 Date Issued: 4/22/2014 Date Expires: 4/22/2016