



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

INTOX EC/IR II MAINTENANCE REPORT

REPORT #3

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.

INTOX EC/IR II SN
12825

NAME OF AGENCY
MARYLAND HEIGHTS POLICE

DATE OF INSPECTION
02/29/2016

LOCATION OF INSTRUMENT (STREET AND CITY)
11911 DORSETT RD. MARYLAND HEIGHTS

TIME OF INSPECTION
23:56 CST

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

BLANK CHECK

CO2 CHECK

FC 1 TEMP

FLOW CHECK

SRC TEMP

FCB CHECK

DET TEMP

CRC COMP CHECK

ET TEMP

CRC CAL CHECK

STD 2 TEMP

PRINT TEST

ETH CHECK

BREATH ANALYZER ACCURACY STANDARDS

SIMULATOR SOLUTION

COMPRESSED ETHANOL-GAS MIXTURE

STANDARD SUPPLIER

GUTH LABORATORIES

LOT# 15050

EXP. DATE 03/09/2017

SIMULATOR TEMP (34°C ±0.2°C)

SIMULATOR S/N

SIMULATOR EXP DATE

34°C +/- .2°

DR3412

10/13/2016

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)

0.10% 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 @ 0.098 g/210L

TEST 2 @ 0.098 g/210L

TEST 3 @ 0.098 g/210L

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

REFUSALS	1	0-.04	0	.05-.09	0	.10-.14	0	.15-.19	2	OVER .19	1
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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).

UNIT AND SIMULATOR MEET DHSS SPECIFICATIONS, JRS

INSPECTING OFFICER

SIGNATURE

James Schnurr

PRINT FULL NAME

Schnurr, James

TYPE OF PERMIT NUMBER

260118

EXPIRATION DATE

02/25/2018

TELEPHONE NUMBER

(314) 298-8700

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

**GUTH LABORATORIES, INC.**

690 NORTH 87th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-4470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 15050 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on March 11, 2015, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1218% (w/vol) ethyl alcohol. The expiration date for this lot number is March 9, 2017 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.100 g/210L +/- 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 Cerilliant Reference Standard lot number FN08051301 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



PERMIT
TYPE II

JAMES R SCHNURR

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 EC/IR II

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 308.111 through 308.119 RSMo.

DATE: 2/25/2016

NUMBER 260118

EXPIRES 2/25/2018

MO.680-0771 (6-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES
LAB-4 (RS-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 SOHNURR, JAMES
Permit No 260118
Date Issued 2/25/2016 Date Expires 2/25/2018