



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

RECEIVED
 By Carol Day at 4:05 pm, Aug 16, 2016

REPORT #2

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 80-005849	LOCATION OF INSTRUMENT GRAIN VALLEY POLICE	DATE OF INSPECTION 08/05/2016	TIME OF INSPECTION 21:27
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CALIBRATION CHECK RESULTS			CALIBRATION CHECK SUMMARY		
Test	g/210L	Time	STANDARD TYPE DRY	STANDARD LOT # AG502603	STANDARD EXPIRATION DATE 01/26/2017
Air Blank	0.000	21:30	SIM TEMPERATURE N/A	SIM SERIAL NUMBER N/A	SIM CERTIFICATE EXPIRATION N/A
Cal Check	0.079	21:30	STANDARD VALUE 0.080	STANDARD SUPPLIER INTOXIMETERS	
Air Blank	0.000	21:31	CALIBRATION CHECK RESULT 1 0.079		
Cal Check	0.079	21:31	CALIBRATION CHECK RESULT 2 0.079		
Air Blank	0.000	21:31	CALIBRATION CHECK RESULT 3 0.078		
Cal Check	0.078	21:32	MAXIMUM DEVIATION (MUST BE WITHIN 5%) 2.5%	SPREAD (MUST BE .005 OR LESS) 0.001	
Air Blank	0.000	21:32	Pass		

DIAGNOSTIC TEST RESULTS			RFI TEST RESULTS		
Voltage/Current Test	Pass		Test	g/210L	Time
RAM Test	Pass		Air Blank	0.000	21:33
EEPROM Checksum Test	Pass		Subject Test	RFI*	21:33
Real Time Clock Test	Pass		Air Blank	0.000	21:34
DSP Test	Pass		*RFI Detect		
Analytical Stability Test	Pass		Pass		
Modem Test	Pass				
Temperature Regulation Test	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	0	1	1	1	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 NAME STEVEN TRACY		
TYPE II PERMIT NUMBER 250175	EXPIRATION DATE 07/28/2017	TELEPHONE NUMBER 8168476250	



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

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**PERMIT
 TYPE II**

STEVEN K TRACY

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, 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 7/28/2015

NUMBER 250175

EXPIRES 7/28/2017

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

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 TRACY, STEVEN
 Permit No 250175
 Date Issued 7/28/2015 Date Expires 7/28/2017



Airgas USA LLC (LAB)
 3500 Bernard Street
 St. Louis, Mo. 63103
 Ph: (314) 533-3100
 Fax: (314) 533-7328

Certificate of Analysis

Customer Name
 Intoximeters, Inc.
 2081 Craig Road
 St. Louis, Mo 63146

Test Date: 27-Jan-2015

Lot # AG502603

<u>Exp. Date</u>	<u>Cyl. Type</u>	<u>Component</u>	<u>Certified Concentration</u>
26-Jan-2017	108	Ethanol Nitrogen	0.080 ± 0.002 BrAC (208 ppm) Balance

Certification Traceable to N.I.S.T. RGM Ethanol Standards:

<u>Serial No.</u>	<u>Concentration</u>	<u>Serial No.</u>	<u>Concentration</u>
EB0010581	391.8 ppm	EB0010603	392.5 ppm
EB0010570	259.8 ppm	EB0010559	258.9 ppm
EB0010285	209.0 ppm	EB0010595	208.9 ppm
EB0010561	103.7 ppm	EB0010562	104.9 ppm
EB0010681	52.22 ppm	EB0010579	52.94 ppm

Analytical Method: NDIR

Digitally signed by Quality Control
 Date: 2015.01.27 10:55:17 -06:00
 Reason: Dry gas standard certification of analysis
 Location: Airgas USA LLC (Lab)

Analyst: 
 Rod Marsala

ISO 17025:2005 A2LA accredited. Certificate Number 2989.01