



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

RECEIVED

By Carol Day at 1:16 pm, Mar 11, 2016

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 80-005854	LOCATION OF INSTRUMENT LIBERTY POLICE DEPT.	DATE OF INSPECTION 03/04/2016	TIME OF INSPECTION 14:41
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CALIBRATION CHECK RESULTS			CALIBRATION CHECK SUMMARY		
Test	g/210L	Time	STANDARD TYPE	STANDARD LOT #	STANDARD EXPIRATION DATE
Air Blank	0.000	14:44	DRY	AG423202	08/20/2016
Cal Check	0.102	14:44	SIM TEMPERATURE	SIM SERIAL NUMBER	SIM CERTIFICATE EXPIRATION
Air Blank	0.000	14:44	N/A	N/A	N/A
Cal Check	0.101	14:45	STANDARD VALUE	STANDARD SUPPLIER	
Air Blank	0.000	14:45	0.100	INTOXIMETERS	
Cal Check	0.102	14:46	CALIBRATION CHECK RESULT 1		
Air Blank	0.000	14:46	0.102		
Cal Check	0.102	14:46	CALIBRATION CHECK RESULT 2		
Air Blank	0.000	14:46	0.101		
			CALIBRATION CHECK RESULT 3		
			0.102		
			MAXIMUM DEVIATION (MUST BE WITHIN 5%)	SPREAD (MUST BE .005 OR LESS)	
			2.0%	0.001	

Pass

DIAGNOSTIC TEST RESULTS			RFI TEST RESULTS		
			Test	g/210L	Time
Voltage/Current Test	Pass				
RAM Test	Pass				
EEPROM Checksum Test	Pass		Air Blank	0.000	14:47
Real Time Clock Test	Pass		Subject Test	RFI*	14:47
DSP Test	Pass		Air Blank	0.000	14:48
Analytical Stability Test	Pass				
Modem Test	Pass		*RFI Detect		
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	
2	0	0	0	1	1	

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).

OPERATING WITHIN SPECIFICATIONS

INSPECTING OFFICER		
SIGNATURE 	PRINT NAME ROBERT D BRATCHER	
TYPE/PERMIT NUMBER 250178	EXPIRATION DATE 08/10/2017	TELEPHONE NUMBER 8164394701



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



PERMIT
TYPE II
ROBERT D BRATCHER

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 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 8/10/2015

NUMBER 250178

EXPIRES 8/10/2017

MO-580-0771 (6-10)


 DIRECTOR OF STATE PUBLIC HEALTH LABORATORY


 DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

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 BRATCHER, ROBERT
 Permit No. 250178
 Date Issued 8/10/2015 Date Expires 8/10/2017



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: 20-Aug-2014

Lot # AG423202

<u>Exp. Date</u>	<u>Cyl. Type</u>	<u>Component</u>	<u>Certified Concentration</u>
20-Aug-2016	108	Ethanol Nitrogen	0.100 ± 2% BrAC (260 ppm) Balance

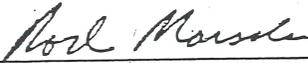
Certification Traceable to N.I.S.T. RGM Ethanol Standards:

<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: 2014.08.22 11:07:29 -05:00
Reason: Dry gas standard certification of analysis
Location: Airgas USA LLC (Lab)

Analyst: _____


Rod Marsala

ISO 17025:2005 A2LA accredited. Certificate Number 2989.01