

**RECEIVED**

By Tracy Crews at 8:43 am, Apr 15, 2020



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

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 80-005846		LOCATION OF INSTRUMENT IPD BATVAN STATION 2		DATE OF INSPECTION 04/13/2020		TIME OF INSPECTION 22:18				
<b>CALIBRATION CHECK RESULTS</b>				<b>CALIBRATION CHECK SUMMARY</b>						
Test ----- Air Blank Cal Check Air Blank Cal Check Air Blank Cal Check Air Blank	g/210L ----- 0.000 0.081 0.000 0.081 0.000 0.081 0.000	Time ----- 22:20 22:20 22:20 22:21 22:21 22:22 22:22	STANDARD TYPE DRY		STANDARD LOT # AG928002		STANDARD EXPIRATION DATE 10/07/2021			
			SIM TEMPERATURE N/A		SIM SERIAL NUMBER N/A		SIM CERTIFICATE EXPIRATION N/A			
			STANDARD VALUE 0.080		STANDARD SUPPLIER INTOXIMETERS, INC					
			CALIBRATION CHECK RESULT 1				0.081			
			CALIBRATION CHECK RESULT 2				0.081			
			CALIBRATION CHECK RESULT 3				0.081			
			MAXIMUM DEVIATION (MUST BE WITHIN 5%) 1.2%				SPREAD (MUST BE .005 OR LESS) 0.000			
<b>Pass</b>										
<b>DIAGNOSTIC TEST RESULTS</b>				<b>RFI TEST RESULTS</b>						
Voltage/Current Test Pass RAM Test Pass EEPROM Checksum Test Pass Real Time Clock Test Pass DSP Test Pass Analytical Stability Test Pass Modem Test Pass Temperature Regulation Test Pass				Test ----- Air Blank 0.000 22:23 Subject Test RFI* 22:23 Air Blank 0.000 22:23 *RFI Detect						
<b>Pass</b>				<b>Pass</b>						
<b>NUMBER OF REFUSALS AND SUBJECT BREATH TESTS IN EACH RANGE SINCE LAST MAINTENANCE REPORT</b>										
REFUSALS	.00-.04	.05-.09	.10-.14	.15-.19	OVER .19					
0	0	0	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). INSTRUMENT PERFORMED WITHIN STATE STANDARDS.										
<b>INSPECTING OFFICER</b>										
SIGNATURE <i>Ron Baltzer #1460</i>				PRINT NAME RON BALTZER						
TYPE II PERMIT NUMBER 290150		EXPIRATION DATE 07/17/2021		TELEPHONE NUMBER 816-325-7300						



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

## Certificate of Analysis

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

Test Date: 7-Oct-2019

**Lot # AG928002 Model 108cadd**

<u>Exp. Date</u> 7-Oct-2021	<u>Cyl. Type</u> 108	<u>Component</u> Ethanol Nitrogen	<u>Certified Concentration</u> 0.080 ± 0.002 BrAC (208 ppm) Balance
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Certification Traceable to N.I.S.T. RGM and to CRM Ethanol Standards:

<u>RGM Serial No.</u>	<u>Concentration</u>	<u>RGM Serial No.</u>	<u>Concentration</u>
EB0010581	392.1 ppm	EB0010603	393.0 ppm
EB0010570	259.8 ppm	EB0010559	258.2 ppm
EB0010285	208.0 ppm	EB0010595	208.3 ppm
EB0010561	103.6 ppm	EB0010562	104.2 ppm
EB0010681	52.12 ppm	EB0010579	52.81 ppm

  

<u>CRM Serial No.</u>	<u>Concentration</u>	<u>CRM Serial No.</u>	<u>Concentration</u>
CC434668	800.0 ppm	0056649	390.1 ppm
CC234503	253.0 ppm	0056662	150.2 ppm

Analytical Method: NDIR

Digitally signed by Quality Control  
 Date: 2019.10.07 16:34:11 -05:00  
 Reason: Dry gas standard certification of analysis  
 Location: Airgas USA LLC (Lab)

Approved for Release: \_\_\_\_\_

*Rod Marsala*  
 \_\_\_\_\_  
 Rod Marsala

ISO 17025:2005 A2LA accredited. Certificate Number 3082.06  
 ISO 17034:2016 A2LA accredited. Certificate Number 3082.07



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



**PERMIT**  
**TYPE II**  
**RON BALTZER**

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 7/17/2019

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DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

NUMBER 290150

EXPIRES 7/17/2021

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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 **BALTZER, RON**  
Permit No **290150**  
Date Issued **7/17/2019** Date Expires **7/17/2021**