



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 80-005847	LOCATION OF INSTRUMENT IPD DETENTION	DATE OF INSPECTION 01/10/2020	TIME OF INSPECTION 14:30
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CALIBRATION CHECK RESULTS			CALIBRATION CHECK SUMMARY		
Test	g/210L	Time	STANDARD TYPE	STANDARD LOT #	STANDARD EXPIRATION DATE
-----	-----	-----	DRY	AG928002	10/07/2021
Air Blank	0.000	14:35	SIM TEMPERATURE	SIM SERIAL NUMBER	SIM CERTIFICATE EXPIRATION
Cal Check	0.080	14:36	N/A	N/A	N/A
Air Blank	0.000	14:36	STANDARD VALUE	STANDARD SUPPLIER	
Cal Check	0.080	14:37	0.080	AIRGAS	
Air Blank	0.000	14:37	CALIBRATION CHECK RESULT 1		
Cal Check	0.079	14:37	0.080		
Air Blank	0.000	14:38	CALIBRATION CHECK RESULT 2		
Pass			0.080		
			CALIBRATION CHECK RESULT 3		
			0.079		
			MAXIMUM DEVIATION (MUST BE WITHIN 5%)	SPREAD (MUST BE .005 OR LESS)	
			1.2%	0.001	

DIAGNOSTIC TEST RESULTS			RFI TEST RESULTS		
			Test	g/210L	Time
Voltage/Current Test	Pass		-----	-----	-----
RAM Test	Pass		Air Blank	0.000	14:38
EEPROM Checksum Test	Pass		Subject Test	RFI*	14:39
Real Time Clock Test	Pass		Air Blank	0.000	14:39
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	13	3	2	1	4		

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 WITHIN STATE STANDARDS.

INSPECTING OFFICER			
SIGNATURE <i>Ron Baltzer</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 108cacd

<u>Exp. Date</u>	<u>Cyl. Type</u>	<u>Component</u>	<u>Certified Concentration</u>
7-Oct-2021	108	Ethanol Nitrogen	0.080 ± 0.002 BrAC (208 ppm) Balance

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

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

2

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


 DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

NUMBER 290150

EXPIRES 7/17/2021


 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





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 80-005835	LOCATION OF INSTRUMENT IPD BAT VAN STATION1	DATE OF INSPECTION 01/10/2020	TIME OF INSPECTION 15:44
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CALIBRATION CHECK RESULTS			CALIBRATION CHECK SUMMARY		
Test	g/210L	Time	STANDARD TYPE DRY	STANDARD LOT # AG928002	STANDARD EXPIRATION DATE 10/07/2021
Air Blank	0.000	15:46	SIM TEMPERATURE N/A	SIM SERIAL NUMBER N/A	SIM CERTIFICATE EXPIRATION N/A
Cal Check	0.079	15:47	STANDARD VALUE 0.080	STANDARD SUPPLIER AIRGAS	
Air Blank	0.000	15:47	CALIBRATION CHECK RESULT 1 0.079		
Cal Check	0.080	15:48	CALIBRATION CHECK RESULT 2 0.080		
Air Blank	0.000	15:48	CALIBRATION CHECK RESULT 3 0.080		
Cal Check	0.080	15:48	MAXIMUM DEVIATION (MUST BE WITHIN 5%) 1.2%		
Air Blank	0.000	15:49	SPREAD (MUST BE .005 OR LESS) 0.001		
Pass					

DIAGNOSTIC TEST RESULTS			RFI TEST RESULTS		
Voltage/Current Test	Pass		Test	g/210L	Time
RAM Test	Pass		Air Blank	0.000	15:49
EEPROM Checksum Test	Pass		Subject Test	RFI*	15:50
Real Time Clock Test	Pass		Air Blank	0.000	15:50
DSP Test	Pass		*RFI Detect		
Analytical Stability Test	Pass		Pass		
Modem Test	Pass				
Temperature Regulation Test	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
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

INSPECTING OFFICER

SIGNATURE 	PRINT NAME RON BALTZER
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TYPE II PERMIT NUMBER 290150	EXPIRATION DATE 07/17/2021	TELEPHONE NUMBER 816-325-7300
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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 108cacc

<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> EB0010581 EB0010570 EB0010285 EB0010561 EB0010681	<u>Concentration</u> 392.1 ppm 259.8 ppm 208.0 ppm 103.6 ppm 52.12 ppm	<u>RGM Serial No.</u> EB0010603 EB0010559 EB0010595 EB0010562 EB0010579	<u>Concentration</u> 393.0 ppm 258.2 ppm 208.3 ppm 104.2 ppm 52.81 ppm
<u>CRM Serial No.</u> CC434668 CC234503	<u>Concentration</u> 800.0 ppm 253.0 ppm	<u>CRM Serial No.</u> 0056649 0056662	<u>Concentration</u> 390.1 ppm 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

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



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 DEPARTMENT OF HEALTH AND SENIOR SERVICES
 BREATH ALCOHOL PROGRAM

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DATE 7/17/2019

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NUMBER 290150

EXPIRES 7/17/2021

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 680-0771 (6-10)

LAB-4 (R6-10)

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

INSTRUMENT OPERATOR CARD

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



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

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INSTRUMENT SERIAL NUMBER 80-005846	LOCATION OF INSTRUMENT IPD BATVAN STATION 2	DATE OF INSPECTION 01/10/2020	TIME OF INSPECTION 15:50
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CALIBRATION CHECK RESULTS			CALIBRATION CHECK SUMMARY		
Test	g/210L	Time	STANDARD TYPE DRY	STANDARD LOT # AG928002	STANDARD EXPIRATION DATE 10/07/2021
Air Blank	0.000	15:52	SIM TEMPERATURE N/A	SIM SERIAL NUMBER N/A	SIM CERTIFICATE EXPIRATION N/A
Cal Check	0.080	15:52	STANDARD VALUE 0.080	STANDARD SUPPLIER AIRGAS	
Air Blank	0.000	15:53	CALIBRATION CHECK RESULT 1 0.080		
Cal Check	0.081	15:53	CALIBRATION CHECK RESULT 2 0.081		
Air Blank	0.000	15:54	CALIBRATION CHECK RESULT 3 0.081		
Cal Check	0.081	15:54	MAXIMUM DEVIATION (MUST BE WITHIN 5%) 1.2%		
Air Blank	0.000	15:54	SPREAD (MUST BE .005 OR LESS) 0.001		

Pass

DIAGNOSTIC TEST RESULTS			RFI TEST RESULTS		
Voltage/Current Test	Pass		Test	g/210L	Time
RAM Test	Pass		-----		
EEPROM Checksum Test	Pass		Air Blank	0.000	15:55
Real Time Clock Test	Pass		Subject Test	RFI*	15:55
DSP Test	Pass		Air Blank	0.000	15:56
Analytical Stability Test	Pass		*RFI Detect		
Modem Test	Pass		Pass		
Temperature Regulation Test	Pass		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
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

INSPECTING OFFICER

SIGNATURE 	PRINT NAME RON BALTZER
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TYPE II PERMIT NUMBER 290150	EXPIRATION DATE 07/17/2021	TELEPHONE NUMBER 816-325-7300
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2081 Craig Road
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Test Date: 7-Oct-2019

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

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Digitally signed by Quality Control
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NUMBER 290150

EXPIRES 7/17/2021

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 **STATE OF MISSOURI**
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 BREATH ALCOHOL PROGRAM

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

