



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 80-005849	LOCATION OF INSTRUMENT GRAIN VALLEY POLICE	DATE OF INSPECTION 09/15/2020	TIME OF INSPECTION 09:23
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CALIBRATION CHECK RESULTS			CALIBRATION CHECK SUMMARY		
Test	g/210L	Time	STANDARD TYPE WET	STANDARD LOT # 20190	STANDARD EXPIRATION DATE 04/06/2022
Air Blank	0.000	09:29	SIM TEMPERATURE 34.0	SIM SERIAL NUMBER MP2113	SIM CERTIFICATE EXPIRATION 01/08/2021
Cal Check	0.100	09:30	STANDARD VALUE 0.100	STANDARD SUPPLIER INTOXIMETERS	
Air Blank	0.000	09:31	CALIBRATION CHECK RESULT 1 0.100		
Cal Check	0.101	09:31	CALIBRATION CHECK RESULT 2 0.101		
Air Blank	0.000	09:32	CALIBRATION CHECK RESULT 3 0.101		
Cal Check	0.101	09:33	MAXIMUM DEVIATION (MUST BE WITHIN 5%) 1.0%	SPREAD (MUST BE .005 OR LESS) 0.001	
Air Blank	0.000	09:33			

**Pass**

DIAGNOSTIC TEST RESULTS		RFI TEST RESULTS		
Voltage/Current Test	Pass	Test	g/210L	Time
RAM Test	Pass	Air Blank	RFI*	09:33
EEPROM Checksum Test	Pass	Air Blank	0.000	09:34
Real Time Clock Test	Pass	*RFI Detect		
DSP Test	Pass			
Analytical Stability Test	Pass			
Modem Test	Pass			
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
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).

**INSPECTING OFFICER**

SIGNATURE	PRINT NAME DONALD D DEBOARD
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TYPE II PERMIT NUMBER 290120	EXPIRATION DATE 06/13/2021	TELEPHONE NUMBER 6605438004
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# GUTH LABORATORIES, INC.

690 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

## CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **20190** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **April 8, 2020**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.1206%** (w/vol) ethyl alcohol. The expiration date for this lot number is **April 6, 2022** at 11:59 PM.

When used in a calibrated Simulator, operating at  $34^{\circ}\text{C} \pm .2^{\circ}\text{C}$ , this solution will give a breath alcohol analysis instrument reading of **0.100 g/210L  $\pm$  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 FN02271802 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

2

**PERMIT  
 TYPE II**

**DONALD D DEBOARD**

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 DMT, INTOXILYZER 8000, INTOX EC/IR II, ASIV W/PRINTER**

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 6/13/2019

NUMBER 290122

EXPIRES 6/13/2021

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES



**SERVICE WORK ORDER**

DATE: 8/20/2020

316 E 9th Street / Owensboro KY 42303 / USA  
Phone: 866-835-0690 Fax: 270-685-6268

**405264**

**Bill To:**  
Missouri Safety Center  
Central MO State University  
Humphreys Bldg Ste 200  
ATTN: ACCOUNTS PAYABLE  
Warrensburg, MO 64093  
USA  
Customer #: 640934  
Phone: 660-543-4830  
Fax: 660-543-4482

**Ship To:**  
MATT BOND  
MSC- MARSHALL BLDG  
415 EAST CLARK STREET  
WARRENSBURG MO 64093  
USA  
Phone: 660-543-4597

**MODEL #:** 002480MO2

**Serial Number:** 80-005849

**BILL CODE:** Out of Warranty

**EXTRA PARTS RCVD:**

BT, PC, GAS BOX

**DESCRIPTION OF PROBLEM**

NEEDS NEW MISSOURI SOFTWARE, MODEM UNRESPONSIVE.

**WORK PERFORMED:**

installed latest software; replaced parts listed; calibrated/ final tested; tested new modem/ ok;

**PARTS USED**

Seq. No.	Part	Description	Quantity
50	021354	CABLE ASSY,PHONE	1.00 EA
60	471201	O-RING,BUNA-N,-008,3/16inx5/16	1.00 EA
70	015088	PAPER,ROLL,THERMAL,58MM X 25MM	1.00 EA
80	650517	CERTIFICATE OF CALIBRATION	2.00 EA
90	441169	COVER DUST,5/8in x 1/2in	1.00 EA
100	470145	CAP,PLASTIC,.25IDx.50LG,RED	3.00 EA
110	470154	CAP,PLSTC,.406IDx.438-.562,RED	1.00 EA
120	470218	SEAL,TAMPER EVIDENT,SERVICE	1.00 EA
130	470202	FILTER,FOAM,1.85x2.20	1.00 EA
140	014141	MODEM,INT,56K,SERIAL DATA,5V	1.00 EA
150	03815123	PRM,I8000,MISSOURI	0.00 EA

**LABOR / TESTING**

Misc Code	Description	Hours
LABR	Service Repair Labor	
LCAL	Service - Calibration Adjust	0.50
LFT	Service - Cal / Final Test	1.00

Technician Name: Dewayne Varvel

SRV4052640001





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## Thank you for choosing CMI, Inc.

We wouldn't be here if it weren't for you...  
And we know it.

Hopefully, our commitment to giving you a quality product was a key factor in your decision to purchase your Intoxilyzer. This is not where the quality ends; however, it is just where it begins. We pride ourselves on continuing to provide quality service and support through the life of this Intoxilyzer and all of your future Intoxilyzer purchases.

The ongoing quality service and support CMI provides can be accessed by dialing one number:

**1-866-835-0690**

If you have question about billing, shipping or other CMI products, Dialing 1-866-835-0690 can put you in touch with CMI Customer Service.

Dialing 1-866-835-0690 can also get answers to questions about setting up your instrument, installing software or servicing your instrument - just ask for one of our qualified service technicians.

CMI is an employee owned company and each one of us wants you to be a satisfied customer. We stand behind every one of our products. Our quality manufacturing, service and support is what sets us apart from the rest. Call us and you'll experience the difference.





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## Statement of Warranty

### Repair Product Warranty

Out of warranty product repairs are warranted for 90 days from the date of repair. This includes labor and those parts, which are replaced. If additional repair is required within the 90 day period, there will be a charge for any parts that were not originally replaced. Repairs made during the 90 day period that are unrelated to the original repair are not covered under the warranty.

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There are no warranties expressed or implied, either oral or written, other than those contained in this warranty. In no event shall CMI be liable for any loss of profits or any indirect or consequential damages arising out of any such defect in material or workmanship.



*Breath Alcohol Testing Is Our Business*

316 East 9th Street  
Owensboro, KY 42303  
1-866-835-0690  
www.alcoholtest.com

