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By Tracy Crews at 7:48 am, Dec 27, 2022



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 12/26/2022	TIME OF INSPECTION 03:03
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CALIBRATION CHECK RESULTS

Test	g/210L	Time
Air Blank	0.000	03:11
Cal Check	0.098	03:11
Air Blank	0.000	03:12
Cal Check	0.098	03:13
Air Blank	0.000	03:13
Cal Check	0.099	03:14
Air Blank	0.000	03:14

**Pass**

CALIBRATION CHECK SUMMARY

STANDARD TYPE WET	STANDARD LOT # 21380	STANDARD EXPIRATION DATE 09/13/2023
SIM TEMPERATURE 34.0	SIM SERIAL NUMBER SD1434	SIM CERTIFICATE EXPIRATION 09/07/2023
STANDARD VALUE 0.100	STANDARD SUPPLIER GUTH	
CALIBRATION CHECK RESULT 1 0.098		
CALIBRATION CHECK RESULT 2 0.098		
CALIBRATION CHECK RESULT 3 0.099		
MAXIMUM DEVIATION (MUST BE WITHIN 5%) 2.0%	SPREAD (MUST BE .005 OR LESS) 0.001	

DIAGNOSTIC TEST RESULTS

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

**Pass**

RFI TEST RESULTS

Test	g/210L	Time
Air Blank	0.000	03:15
Subject Test	RFI*	03:15
Air Blank	0.000	03:16

\*RFI Detect

**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	0	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).

N

INSPECTING OFFICER

SIGNATURE 	PRINT NAME SHANNON L. CARR
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TYPE II PERMIT NUMBER 220219	EXPIRATION DATE 09/09/2024	TELEPHONE NUMBER 8168476250
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**GUTH LABORATORIES, INC.**  
500 NORTH 57TH STREET • HARRISBURG, PA 17111-0511 • TELEPHONE: 717.634.5070

**CERTIFICATE OF ANALYSIS**

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 21380 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on September 15, 2021, using a Perkin Elmer Gas Chromatograph Autocystem XL S/N: 610N9030209, and found to contain 0.1214% (w/vol) ethyl alcohol. The expiration date for this lot number is September 13, 2023 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.100 g/210L +/- 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 Certified Reference Standard lot number F903052002 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

**PERMIT**  
TYPE II



**SHANNON L. CARR**

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

**ALCO-SENSOR IV WITH PRINTER, 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 9/9/2022  
NUMBER 220219  
EXPIRES 9/9/2024  
MO 066-071 (6-10)

  
DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

  
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB 49816

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

**INSTRUMENT OPERATOR CARD**

The permittee is authorized to operate an environmental breath alcohol analyzer for the determination of the alcoholic content of blood from a sample of expired air.

Operator: **CARR, SHANNON**  
Permit No: **220219**  
Date Issued: **9/9/2022**  
Date Expires: **9/9/2024**

