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By Tracy Crews at 8:22 am, Mar 03, 2025



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

INTOX DMT MAINTENANCE REPORT

REPORT #1

Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 35 days).
Complete this report whenever the instrument is serviced or repaired and whenever it is placed into service.
Retain the original and send a copy within 15 days to the Breath Alcohol Program, DHSS.

INTOX DMT SN 500274	NAME OF AGENCY Macon Police Department	DATE OF INSPECTION 02/17/2025
LOCATION OF INSTRUMENT (STREET AND CITY) 301 East Bourke Street, Macon, M.O., 63552		TIME OF INSPECTION 02:38:24

CHECKLIST: Place a mark in the box by each item if found to be satisfactory or is operating within established limits. (Write in observed values where determined). Unmarked items must be corrected before using instrument.

DIAGNOSTIC RECORD

DATE AND TIME <u>02/17/2025 02:38:27</u>	<input checked="" type="checkbox"/> DETECTOR
<input checked="" type="checkbox"/> PROGRAM	<input checked="" type="checkbox"/> FILTER 1
<input checked="" type="checkbox"/> SAMPLE CHAMBER <u>48.9°C</u>	<input checked="" type="checkbox"/> FILTER 2
<input checked="" type="checkbox"/> BREATH TUBE <u>48.1°C</u>	<input checked="" type="checkbox"/> FILTER 3
<input checked="" type="checkbox"/> PUMP	<input checked="" type="checkbox"/> INTERNAL STANDARD

BREATH ANALYZER ACCURACY STANDARDS

SIMULATOR STANDARD COMPRESSED ETHANOL-GAS MIXTURE

STANDARD SUPPLIER GUTH LOT # 23390 EXP. DATE 10/17/2025

SIMULATOR TEMP (34°C ± 0.2°C) 34.0 SIM. SN SD2668 SIM. NIST EXP DATE 09/20/2025

CALIBRATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)
Run three tests using a standard. All three tests must be within ±5% of the standard value and must have a spread of .005 or less. Mark the box corresponding to the standard being used.

0.10% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE

0.08% STANDARD - MUST READ BETWEEN 0.076% AND 0.084% INCLUSIVE

0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE

TEST 1: 0.103 TEST 2: 0.103 TEST 3: 0.103

PERFORM R.F.I. TEST

INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:

REFUSALS: 0 0-.04: 0 .05-.09: 1 .10-.14: 0 .15-.19: 0 OVER .19: 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)

INSPECTING OFFICER

SIGNATURE 	PRINT FULL NAME ANDRE A WILLIAMS	
TYPE II PERMIF NUMBER 230224	EXPIRATION DATE 10/19/2025	TELEPHONE NUMBER 660-385-2195

RETURN COMPLETED REPORT TO THE Breath Alcohol Program, Missouri Department of Health and Senior Services by mail, fax, or email

NIST Traceability:
Testing was conducted using Certified Reference Standard lot number FN03072301 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.

Ted L. Pauley
Ted L. Pauley, President
GUTH LABORATORIES, INC.

Certified Alcohol Reference Solution for Simulator
Random Samples of Lot Number 23390 of
Alcohol Reference Solution for Simulator were analyzed by
gas chromatography on October 18, 2023, using a Perkin Elmer Gas
Chromatograph Autosystem XL S/N: 610N9030209, and found to contain
0.1207% (w/vol) ethyl alcohol. The expiration date for this lot
number is October 17, 2025 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.

CERTIFICATE OF ANALYSIS

GUTH LABORATORIES, INC.
690 NORTH 67th STREET • HARRISBURG, PA 17111-4611 • TELEPHONE: 717-564-5470





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



PERMIT
TYPE II

ANDRE A. WILLIAMS

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

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 10/19/2023

NUMBER 230224

EXPIRES 10/19/2025

Mike Mason

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

David J. Nielsen

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES