



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

**RECEIVED** REPORT #2  
 By Carol Day at 11:23 am, Aug 07, 2015

Complete this report in duplicate at the time of the regular monthly preventive maintenance repaired. Send one copy to Department of Health and Senior Services, and retain one copy in department file.

INSTRUMENT SERIAL NUMBER 80-005841	LOCATION OF INSTRUMENT KCMO POLICE DEPT.	DATE OF INSPECTION 08/05/2015	TIME OF INSPECTION 03:19
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CALIBRATION CHECK RESULTS			CALIBRATION CHECK SUMMARY		
Test	g/210L	Time	STANDARD TYPE DRY	STANDARD LOT # 05514080A1	STANDARD EXPIRATION DATE 04/01/2016
Air Blank	0.000	03:20	SIM TEMPERATURE N/A	SIM SERIAL NUMBER N/A	SIM CERTIFICATE EXPIRATION N/A
Cal Check	0.078	03:20	STANDARD VALUE 0.080	STANDARD SUPPLIER CMI	
Air Blank	0.000	03:21	CALIBRATION CHECK RESULT 1 0.078		
Cal Check	0.078	03:21	CALIBRATION CHECK RESULT 2 0.078		
Air Blank	0.000	03:21	CALIBRATION CHECK RESULT 3 0.078		
Cal Check	0.078	03:22	MAXIMUM DEVIATION (MUST BE WITHIN 5%) 2.5%	SPREAD (MUST BE .005 OR LESS) 0.000	
Air Blank	0.000	03:22	<b>Pass</b>		

DIAGNOSTIC TEST RESULTS		RFI TEST RESULTS		
Voltage/Current Test	Pass	Test	g/210L	Time
RAM Test	Pass	Air Blank	0.000	03:23
EEPROM Checksum Test	Pass	Subject Test	RFI*	03:23
Real Time Clock Test	Pass	Air Blank	0.000	03:24
DSP Test	Pass	*RFI Detect		
Analytical Stability Test	Pass	<b>Pass</b>		
Modem Test	Pass	<b>Pass</b>		
Temperature Regulation Test	Pass	<b>Pass</b>		

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	1	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 <i>Kori Smeiska</i>	PRINT NAME KORI SMEISKA	
TYPE II PERMIT NUMBER 250133	EXPIRATION DATE 06/08/2017	TELEPHONE NUMBER 8162345000



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

**PERMIT**  
TYPE II

**KORI SMEJISKA**



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 6/8/2015

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

*Bob Vorkley*

NUMBER 250133

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

EXPIRES 6/8/2017

LAB-1 (06-10)



Cyl 059



7 Eastgate Dr. • P.O. Box 790 • Jacksonvile, IL 62651-0790  
217-245-2188 • Fax: 217-245-7634 • www.lmoproducts.com

**Certificate of Analysis**

Certificate ID: 6358  
Part #: BAC105L080T  
Cylinder Size: 105L  
Lot Number: 05514080A1  
Expiration: 4/1/2016

0.080 BAC (For the calibration of instruments used to determine breath alcohol concentration)

Contents:	Concentration:	Accuracy:	Method:
105 Liters @ 1000 psig 70°F (21°C)	288 ppm	±0.002 or 2% BAC whichever is greater	NDIR
Components:	Ethanol Balance		

\*NIST Standard Reference Material  
Cylinder No. CCI4290 / Job No. 09160202  
Certified 212.8 mmol/mol Ethanol in Nitrogen  
for LMO Products Co., Jacksonville, IL

Store in dry area, away from sources of heat, ignition and direct sunlight. Do not allow storage area to exceed 52 °C (125 °F).

*Sarah M. Harty*  
Specialty Gas Lab Tech

Date 03/27/14

Distributed by:

CMI Inc.  
316 East Ninth Street  
Owensboro, KY 42303  
Phone 866-835-0690  
www.alcoholtest.com

