



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

RECEIVED

REPORT #2

By Carol Day at 10:51 am, Sep 09, 2015

Complete this report in duplicate at the time of the regular monthly preventive maintenance or when the instrument is 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 08/29/2015	TIME OF INSPECTION 00:12
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CALIBRATION CHECK RESULTS			CALIBRATION CHECK SUMMARY		
Test	g/210L	Time	STANDARD TYPE	STANDARD LOT #	STANDARD EXPIRATION DATE
Air Blank	0.000	00:13	DRY	05514080A1	04/01/2016
Cal Check	0.080	00:14	SIM TEMPERATURE	SIM SERIAL NUMBER	SIM CERTIFICATE EXPIRATION
Air Blank	0.000	00:14	N/A	N/A	N/A
Cal Check	0.079	00:14	STANDARD VALUE	STANDARD SUPPLIER	
Air Blank	0.000	00:15	0.080	CMI	
Cal Check	0.078	00:15	CALIBRATION CHECK RESULT 1		
Air Blank	0.000	00:16	0.080		
Pass			CALIBRATION CHECK RESULT 2		
			0.079		
			CALIBRATION CHECK RESULT 3		
			0.078		
			MAXIMUM DEVIATION (MUST BE WITHIN 5%)		SPREAD (MUST BE .005 OR LESS)
			2.5%		0.002

DIAGNOSTIC TEST RESULTS			RFI TEST RESULTS		
Voltage/Current Test	Pass		Test	g/210L	Time
RAM Test	Pass		Air Blank	0.000	00:16
EEPROM Checksum Test	Pass		Subject Test	RFI*	00:17
Real Time Clock Test	Pass		Air Blank	0.000	00:17
DSP Test	Pass		*RFI Detect		
Analytical Stability Test	Pass		Pass		
Internal Printer Test	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	50	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 #5200</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

2

PERMIT
TYPE II
KORI SMEISKA

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

NUMBER 250133

EXPIRES 6/8/2017

MO 569-0771 (6-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Paul Verkley

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-1 (66-10)



Cyl 059

ILMO
specialty gases

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217-245-2188 • Fax: 217-243-7654 • www.ilmoproducts.com

Certificate of Analysis

Certificate ID: 6358

Part #: BAC1051080T

Cylinder Size: 105L

Lot Number: 05514088A1

Expiration: 4/1/2016

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

Contents: 105 Liters @ 1000 psig 70°F (21°C)

Component	Concentration:	Accuracy:	Method:
Ethanol	288 ppm	±0.002 or 2%	NDIR
Nitrogen	Balance	BAC whatever is greater	

*NIST Standard Reference Material
Cylinder No. CCI4290 / Job No. 09160202
Certified 21.2g Ethanol in Nitrogen
for LIFO 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).

Paul Verkley
Specialty Gas Lab Tech

Date 03/24/14

Distributed by:

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

