



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

**RECEIVED**  
By Carol Day at 8:31 am, Mar 11, 2015

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 80-005839	LOCATION OF INSTRUMENT KCMO POLICE DEPT	DATE OF INSPECTION 03/04/2015	TIME OF INSPECTION 19:28
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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	19:29	DRY	05514080A1	04/01/2016
Cal Check	0.081	19:30	SIM TEMPERATURE	SIM SERIAL NUMBER	SIM CERTIFICATE EXPIRATION
Air Blank	0.000	19:30	N/A	N/A	N/A
Cal Check	0.081	19:30	STANDARD VALUE	STANDARD SUPPLIER	
Air Blank	0.000	19:31	0.080	CMI	
Cal Check	0.081	19:31	CALIBRATION CHECK RESULT 1		
Air Blank	0.000	19:31	0.081		
Cal Check	0.081	19:31	CALIBRATION CHECK RESULT 2		
Air Blank	0.000	19:32	0.081		
<b>Pass</b>			CALIBRATION CHECK RESULT 3		
			0.081		
			MAXIMUM DEVIATION (MUST BE WITHIN 5%)	SPREAD (MUST BE .005 OR LESS)	
			1.2%	0.000	

DIAGNOSTIC TEST RESULTS			RFI TEST RESULTS		
Test	Pass	Time	Test	g/210L	Time
Voltage/Current Test	Pass		Air Blank	0.000	19:32
RAM Test	Pass		Subject Test	RFI*	19:33
EEPROM Checksum Test	Pass		Air Blank	0.000	19:33
Real Time Clock Test	Pass		*RFI Detect		
DSP Test	Pass		<b>Pass</b>		
Analytical Stability 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	
1	1	0	1	1	3	

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).

INSTRUMENT TESTED AND CERTIFIED WITHIN MISSOURI DOHSS GUIDELINES

INSPECTING OFFICER		
SIGNATURE <i>Tim Fillpot #4162</i>	PRINT NAME TIM FILLPOT	
TYPE II PERMIT NUMBER 230158	EXPIRATION DATE 08/14/2015	TELEPHONE NUMBER 8164828195



7 Enterprise Dr. • P.O. Box 790 • Jacksonville, IL 62651-0790  
217-245-3183 • Fax: 217-243-7634 • www.ilmoindustrial.com

### Certificate of Analysis

Certificate ID: 6358  
Part #: BAC165L980T  
Cylinder Size: 165L  
Lot Number: 05514989A1  
Expiration: 4/1/2016

0.080 SAC (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	± 0.003 or 1% BAC whichever is greater	NDIR
Nitrogen	Balance		

NIIST Standard Reference Material  
Cylinder No. CCI-4390 / Job No. 09160202  
Certified 2125 ppm Ethanol in Nitrogen  
for ILMO Products Co., Jacksonville, IL

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

*David Murphy*  
Specialty Gas Lab Tech

03/24/14  
Date

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

ISO/IEC 17025:2005 Accredited Laboratory



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

**PERMIT**  
TYPE II



**TIMOTHY L FILLPOT**

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

**INTOXILYZER 5000, 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 308.111 through 308.119 RSMo.

DATE 8/14/2013

NUMBER 230158

EXPIRES 8/14/2015

MO 560-9771 (6-10)

*Timothy L. Fillpot*  
DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

*Shad Voth*  
acting director  
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (6-10)

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

**INSTRUMENT OPERATOR CARD**

The instrument cardholder is authorized to operate an Intoxilizer breath alcohol analyzer for the determination of the alcoholic content of breath from an expired air sample.

Operator: FILLPOT, TIMOTHY  
Permit No: 230158  
Date Issued: 8/14/2013  
Date Expires: 8/14/2015