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By Carol Day at 12:29 pm, Apr 13, 2016



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 80-005841	LOCATION OF INSTRUMENT KCMO POLICE DEPT.	DATE OF INSPECTION 03/31/2016	TIME OF INSPECTION 13:23
CALIBRATION CHECK RESULTS			CALIBRATION CHECK SUMMARY
Test	g/210L	Time	STANDARD TYPE DRY
-----	-----	-----	STANDARD LOT # 05514080A1
Air Blank	0.000	13:25	STANDARD EXPIRATION DATE 04/01/2016
Cal Check	0.079	13:26	SIM TEMPERATURE N/A
Air Blank	0.000	13:26	SIM SERIAL NUMBER N/A
Cal Check	0.080	13:26	SIM CERTIFICATE EXPIRATION N/A
Air Blank	0.000	13:27	STANDARD VALUE 0.080
Cal Check	0.079	13:27	STANDARD SUPPLIER CMI
Air Blank	0.000	13:28	CALIBRATION CHECK RESULT 1 0.079
			CALIBRATION CHECK RESULT 2 0.080
			CALIBRATION CHECK RESULT 3 0.079
			MAXIMUM DEVIATION (MUST BE WITHIN 5%) 1.2%
			SPREAD (MUST BE .005 OR LESS) 0.001

Pass

DIAGNOSTIC TEST RESULTS			RFI TEST RESULTS		
Voltage/Current Test	Pass		Test	g/210L	Time
RAM Test	Pass		-----	-----	-----
EEPROM Checksum Test	Pass		Air Blank	0.000	13:28
Real Time Clock Test	Pass		Subject Test	RFI*	13:29
DSP Test	Pass		Air Blank	0.000	13:29
Analytical Stability Test	Pass		*RFI Detect		
Modem Test	Pass				
Temperature Regulation Test	Pass				

Pass**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	0	0	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 	PRINT NAME OFFICER TIM FILLPOT		
TYPE II PERMIT NUMBER 250125	EXPIRATION DATE 06/18/2017	TELEPHONE NUMBER 8164828195	



7 Eastgate Dr. • P.O. Box 790 • Jacksonville, IL 62651-0790
217-245-2183 • Fax: 217-243-7634 • www.ilmoproducts.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: 105 Liters @ 1000 psig 70°F (21°C)

Component:	Concentration:	Accuracy:	Method:
Ethanol	288 ppm	+/- 0.002 or 2%	NDIR
Nitrogen	Balance	BAC whichever is greater	

*NIST Standard Reference Material
Cylinder No. CCI4290 / Job No. 09160202
Certified 212.8 µmol/mol Ethanol in Nitrogen
for ILMO 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).

Jacob Matley
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

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PERMIT TYPE II

TIMOTHY L FILLPOT

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 250125

EXPIRES 6/8/2017

Wanda

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Shel Vosterly

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

LAB-4 (16-10)

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

INSTRUMENT OPERATOR CARD

The named cardholder is authorized to operate an evidential breath alcohol instrument for the determination of the alcoholic content in breath form of expired air in Missouri.

Operator FILLPOT, TIMOTHY
Permit No 250125
Date Issued 6/8/2015 Date Expires 6/8/2017

547 UAN