

RECEIVED

By Tracy Crews at 1:39 pm, Jul 21, 2023



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 80-002092	LOCATION OF INSTRUMENT KCI POLICE DEPT.	DATE OF INSPECTION 07/18/2023	TIME OF INSPECTION 09:59
---------------------------------------	--	----------------------------------	-----------------------------

CALIBRATION CHECK RESULTS		
Test	g/210L	Time
Air Blank	0.000	10:02
Cal Check	0.080	10:02
Air Blank	0.000	10:02
Cal Check	0.080	10:03
Air Blank	0.000	10:03
Cal Check	0.079	10:03
Air Blank	0.000	10:04

Pass

CALIBRATION CHECK SUMMARY		
STANDARD TYPE DRY	STANDARD LOT # 25721080A2	STANDARD EXPIRATION DATE 11/05/2023
SIM TEMPERATURE N/A	SIM SERIAL NUMBER N/A	SIM CERTIFICATE EXPIRATION N/A
STANDARD VALUE 0.080	STANDARD SUPPLIER CMI	
CALIBRATION CHECK RESULT 1 0.080		
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

DIAGNOSTIC TEST RESULTS	
Voltage/Current Test	Pass
RAM Test	Pass
EEPROM Checksum Test	Pass
Real Time Clock Test	Pass
DSP Test	Pass
Analytical Stability Test	Pass
Modem Test	Pass
Temperature Regulation Test	Pass

Pass

RFI TEST RESULTS		
Test	g/210L	Time
Air Blank	0.000	10:04
Subject Test	RFI*	10:05
Air Blank	0.000	10:05
*RFI Detect		

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	

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).

<b>INSPECTING OFFICER</b>	
SIGNATURE <i>Alan H. Randolph Jr</i>	PRINT NAME ALAN H. RANDOLPH JR

TYPE II PERMIT NUMBER 22021	EXPIRATION DATE 01/24/2024	TELEPHONE NUMBER 816 243 4000
--------------------------------	-------------------------------	----------------------------------



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:** 14290  
**Part #:** BAC105L080T  
**Cylinder Size:** 105L  
**Lot Number:** 25721080A2  
**Expiration:** 11/5/2023

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

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

Component:	Reported Concentration:	Analytical Accuracy (U, k=2):	Analytical Method:	Distributed by:
Ethanol	208 ppm	+/-0.002 BAC(G/210L*) [5.2 ppm]	NDIR	CMI Inc. 316 East Ninth Street Owensboro, KY 42303 Phone 866-835-0690 <a href="http://www.alcoholtest.com">www.alcoholtest.com</a>
Nitrogen	Balance			

\*Traceable to:  
Certified Reference Material - 262.4 µmol/mol  
Ethanol in Nitrogen - Serial No. GN0015026 Lot No. 050319E11

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

Specialty Gas Lab Tech

10-18-2021  
Issuance Date



The calibration results within this certificate were obtained using equipment and standards capable of producing analytical results traceable to NIST, and apply only to the items contained on this certificate. ILMO Products Company makes no warranty or representation as to the suitability of the use of any information provided for any particular purpose. The information use is at the sole discretion and risk of the user. Liability shall be limited to established replacement cost of this material or service.

ISO/IEC 17025:2017 Accredited Laboratory



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

2

PERMIT  
TYPE II

ALAN H RANDOLPH JR.

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

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 1/24/2022

NUMBER 220021

EXPIRES 1/24/2024

*Laura P. Wray*

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

*Donald A. Kawing*

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 680-0771 (6-10)

LAB-4 (R6-10)

 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 RANDOLPH JR., ALAN  
Permit No 220021  
Date issued 1/24/2022 Date Expires 1/24/2024

