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By Tracy Crews at 8:22 am, Jun 23, 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 80-007511	LOCATION OF INSTRUMENT KANSAS CITY POLICE	DATE OF INSPECTION 06/13/2023	TIME OF INSPECTION 04:40
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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	04:42	DRY	33321080A3	01/05/2024
Cal Check	0.079	04:42	SIM TEMPERATURE	SIM SERIAL NUMBER	SIM CERTIFICATE EXPIRATION
Air Blank	0.000	04:42	N/A	N/A	N/A
Cal Check	0.079	04:43	STANDARD VALUE	STANDARD SUPPLIER	
Air Blank	0.000	04:43	0.080	CMI INC	
Cal Check	0.079	04:44	CALIBRATION CHECK RESULT 1		
Air Blank	0.000	04:44	0.079		
Cal Check	0.079	04:44	CALIBRATION CHECK RESULT 2		
Air Blank	0.000	04:44	0.079		
Pass			CALIBRATION CHECK RESULT 3		
			0.079		
			MAXIMUM DEVIATION (MUST BE WITHIN 5%)	SPREAD (MUST BE .005 OR LESS)	
			1.2%	0.000	

DIAGNOSTIC TEST RESULTS			RFI TEST RESULTS		
			Test	g/210L	Time
Voltage/Current Test		Pass	Air Blank	0.000	04:45
RAM Test		Pass	Subject Test	RFI*	04:45
EEPROM Checksum Test		Pass	Air Blank	0.000	04:45
Real Time Clock Test		Pass	*RFI Detect		
DSP Test		Pass	Pass		
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	
0	29	0	0	0	2	

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).
TESTED AND CERTIFIED

INSPECTING OFFICER		
SIGNATURE 	PRINT NAME DOUGLAS DAVIDSON	
TYPE II PERMIT NUMBER 230065	EXPIRATION DATE 04/06/2025	TELEPHONE NUMBER 8162345000

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

**PERMIT
TYPE II**

DOUGLAS D. DAVIDSON

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.

Mike Morrison

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Douglas D. Davidson

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LS-108-01

DATE 4/6/2023

NUMBER 230065

EXPIRES 4/6/2025

MO 565-3711 (8-10)



7 Eastgate Dr. • P.O. Box 790 • Jacksonville, IL 62551-0790
217-245-2183 • Fax: 217-245-7634 • www.ilmo-products.com

Certificate of Analysis

Certificate ID: 14496
Part #: BAC105L080T
Cylinder Size: 105L
Lot Number: 33321080A3
Expiration: 1/5/2024

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

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

Analytical Accuracy (U, k=2): ±0.002 acq(0.25at.) 102K
Reported Concentration: 105 ppb
Components: Balance
Method: 102K
Distributed by: CMI Inc. 316 East Ninth Street Owensboro, KY 42303 Phone: 866-835-0690 www.cmi-helix.com

Traceable to: Certified Reference Material - 262.4 µmol/mol Ethanol in Nitrogen - Serial No. GN0015026 Lot No. 050319E11
Score in dry area, away from sources of heat, ignition and direct sunlight. Do not allow storage area to exceed 52 °C (125 °F).

John Hines
Specialty Gas Lab Tech

01-04-2022
Issuance Date



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ISO/IEC 17025:2017 Accredited Laboratory