

mt

RECEIVED

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 80-007512 | LOCATION OF INSTRUMENT KANSAS CITY POLICE | DATE OF INSPECTION 06/13/2023 | TIME OF INSPECTION 03:39 |
|---------------------------------------|--|----------------------------------|-----------------------------|

| CALIBRATION CHECK RESULTS | | | CALIBRATION CHECK SUMMARY | | |
|---------------------------|--------|-------|---------------------------------------|-------------------------------|----------------------------|
| Test | g/210L | Time | STANDARD TYPE | STANDARD LOT # | STANDARD EXPIRATION DATE |
| Air Blank | 0.000 | 03:42 | DRY | 33321080A3 | 01/05/2024 |
| Cal Check | 0.078 | 03:42 | SIM TEMPERATURE | SIM SERIAL NUMBER | SIM CERTIFICATE EXPIRATION |
| Air Blank | 0.000 | 03:43 | N/A | N/A | N/A |
| Cal Check | 0.078 | 03:43 | STANDARD VALUE | STANDARD SUPPLIER | |
| Air Blank | 0.000 | 03:43 | 0.080 | CMI INC | |
| Cal Check | 0.078 | 03:44 | CALIBRATION CHECK RESULT 1 | | |
| Air Blank | 0.000 | 03:44 | 0.078 | | |
| Cal Check | 0.078 | 03:44 | CALIBRATION CHECK RESULT 2 | | |
| Air Blank | 0.000 | 03:44 | 0.078 | | |
| Pass | | | CALIBRATION CHECK RESULT 3 | | |
| | | | 0.078 | | |
| | | | MAXIMUM DEVIATION (MUST BE WITHIN 5%) | SPREAD (MUST BE .005 OR LESS) | |
| | | | 2.5% | 0.000 | |

| DIAGNOSTIC TEST RESULTS | | | RFI TEST RESULTS | | |
|-----------------------------|--|------|------------------|--------|-------|
| | | | Test | g/210L | Time |
| Voltage/Current Test | | Pass | Air Blank | 0.000 | 03:45 |
| RAM Test | | Pass | Subject Test | RFI* | 03:45 |
| EEPROM Checksum Test | | Pass | Air Blank | 0.000 | 03:46 |
| 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 | |
| 2 | 7 | 2 | 2 | 3 | 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 |



7 Eastgate Dr., P.O. Box 790 • Jacksonville, IL 62651-0790
217-245-2183 • Fax: 217-243-7634 • www.ilmoindustrial.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)

| Component | Reported Concentration | Accuracy (U, K2) | Analytical Method |
|-----------|------------------------|---------------------|-------------------|
| Ethanol | 288 ppa | -7.8, 82 BAC(C218L) | NDIR |
| Nitrogen | balance | (5.2 ppa) | |

Distributed by:
CPI Inc.
316 East Ninth Street
Owensboro, KY 42305
Phone: 844-835-0690
www.cpiindustrial.com

Traceable to:
Certified Reference Material - 2624 µmol/mol
Ethanol in Nitrogen - Serial No. GN0015026 Lot No. J50319511

Signature
Specialty Gas Lab Tech
Issuance Date: 01-04-2022



The cylinder contains a gas which conforms with all applicable standards and is suitable for use in the production of analytical results traceable to NIST and applicable to the test specified on this certificate. I/O Products Company makes no warranty or representation as to the accuracy of the test results or the suitability of the gas for any particular purpose. This information was at the time of calibration and first fill of the unit. Ability will be limited to established requirements, cost of gas, materials or services.

ISC/IEC 17015:2017 Accredited Laboratory



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 308.111 through 308.119 RSMo.

Mike Morgan

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DATE 4/6/2023

NUMBER 230165

EXPIRES 4/6/2025

540 540-5771 (8-10)

David J. Anderson

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

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

INSTRUMENT OPERATOR CARD

The name of the operator of the instrument shall be printed on this card and shall be used for the determination of the alcoholic content of blood from a sample of expired air.

Operator: DAVIDSON, DOUGLAS
Permit No: 230165
Date Issued: 4/6/2023 Date Expires: 4/6/2025