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By Tracy Crews at 7:27 am, Aug 25, 2023

Spare
DATE



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 08/13/2023	TIME OF INSPECTION 23:08
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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	23:10	DRY	33321080A3	01/05/2024
Cal Check	0.079	23:10	SIM TEMPERATURE	SIM SERIAL NUMBER	SIM CERTIFICATE EXPIRATION
Air Blank	0.000	23:11	N/A	N/A	N/A
Cal Check	0.078	23:11	STANDARD VALUE	STANDARD SUPPLIER	
Air Blank	0.000	23:12	0.080	CMI INC	
Cal Check	0.079	23:12	CALIBRATION CHECK RESULT 1		
Air Blank	0.000	23:13	0.079		
Pass			CALIBRATION CHECK RESULT 2		
			0.078		
			CALIBRATION CHECK RESULT 3		
			0.079		
			MAXIMUM DEVIATION (MUST BE WITHIN 5%)	SPREAD (MUST BE .005 OR LESS)	
			2.5%	0.001	

DIAGNOSTIC TEST RESULTS		RFI TEST RESULTS		
		Test	g/210L	Time
Voltage/Current Test	Pass	Air Blank	RFI*	23:13
RAM Test	Pass	Air Blank	0.000	23:13
EEPROM Checksum Test	Pass	*RFI Detect		
Real Time Clock Test	Pass	Pass		
DSP Test	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	22	0	0	0	1	

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).

BREATH INSTRUMENT TESTED AND CERTIFIED

INSPECTING OFFICER

SIGNATURE <i>P.O. Jck</i>	PRINT NAME INF FRANCA, JORDAN
TYPE II PERMIT NUMBER 230118	EXPIRATION DATE 06/07/2025
	TELEPHONE NUMBER 816-382-5897



7 Eastgate Dr. • P.O. Box 790 • Jacksonville, IL 62651-0790
217-245-2183 • Fax: 217-243-7534 • www.ilmoproducts.com

Certificate of Analysis

Certificate ID: 14496
Part #: BAC10510880T
Cylinder Size: 105L
Lot Number: 33321088A3
Expiration: 1/5/2024

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

Component	Reported Concentration	Analytical Accuracy (U, k=2)	Analytical Method	Distributed by:
Ethanol	288 ppm	±4.88% BAC(628u)	NDIR	CMI Inc 316 East Ninth Street Owensboro, KY 42303 Phone 866-835-0690 www.alcoholtest.com
Nitrogen	Balance	±1.2 ppm	NDIR	

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).

Specialty Gas Lab Tech
[Signature]

01-04-2022
Issuance Date



ISO/IEC 17025:2017 Accredited Laboratory

The contents of this certificate were obtained using equipment and procedures capable of producing analytical results traceable to NIST, and apply only to the specific purpose. The information used in this tool does not constitute a warranty of the accuracy of the results or the reliability of the information provided for any particular purpose. The information used in this tool does not constitute a warranty of the accuracy of the results or the reliability of the information provided for any particular purpose.



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



PERMIT TYPE II JORDAN INFRANCA

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.

DATE: 6/7/2023
NUMBER: 230118
EXPIRES: 6/7/2025
MC 986-0771 (6-1-10)
M. De Maestri
DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
Diana S. Jordan
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES
LHA- (06-10)

STATE OF MISSOURI
DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM
INSTRUMENT OPERATOR CARD

The permit holder is authorized to operate an instrumental device and to perform the following functions in accordance with the provisions of the applicable sections of the Revised Statutes of Missouri:

Operator: INFRANCA, JORDAN
Permit No: 230118
Data Exported: 6/7/2025