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By Tracy Crews at 7:35 am, Apr 25, 2024



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 04/13/2024	TIME OF INSPECTION 15:36
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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	15:38	DRY	14323080A4	06/05/2025
Cal Check	0.081	15:38	SIM TEMPERATURE	SIM SERIAL NUMBER	SIM CERTIFICATE EXPIRATION
Air Blank	0.000	15:39	N/A	N/A	N/A
Cal Check	0.080	15:39	STANDARD VALUE	STANDARD SUPPLIER	
Air Blank	0.000	15:40	0.080	CMI INC	
Cal Check	0.080	15:40	CALIBRATION CHECK RESULT 1		
Air Blank	0.000	15:40	0.081		
Cal Check	0.080	15:40	CALIBRATION CHECK RESULT 2		
Air Blank	0.000	15:40	0.080		
Pass			CALIBRATION CHECK RESULT 3		
			0.080		
			MAXIMUM DEVIATION (MUST BE WITHIN 5%)	SPREAD (MUST BE .005 OR LESS)	
			1.2%	0.001	

DIAGNOSTIC TEST RESULTS			RFI TEST RESULTS		
Test	Result	Time	Test	g/210L	Time
Voltage/Current Test	Pass		Air Blank	0.000	15:41
RAM Test	Pass		Subject Test	RFI*	15:42
EEPROM Checksum Test	Pass		Air Blank	0.000	15:42
Real Time Clock Test	Pass		*RFI Detect		
DSP Test	Pass		Pass		
Analytical Stability Test	Pass				
Modem Test	Pass				
Temperature Regulation Test	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	
1	11	0	0	0	3	

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 & CERTIFIED

INSPECTING OFFICER

SIGNATURE 	PRINT NAME WADE ROBINSON
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TYPE II PERMIT NUMBER 230228	EXPIRATION DATE 10/23/2025	TELEPHONE NUMBER 8164828141
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STATE OF MISSOURI
DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM



PERMIT
TYPE II
WADE ROBINSON

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 10/23/2023 *M. de M...*
DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

NUMBER 230228 *David J. Robinson*
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

EXPIRES 10/23/2025 L&P-RS-10

MO 090-0771 (6-10)

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

The named candidate is authorized to operate an individual breath alcohol instrument for the determination of the alcoholic content of breath from or expired air in Missouri.

Operator: WADE ROBINSON Date Expires: 10/23/2025
Permit No: 230228 Date Issued: 10/23/2023

Certificate of Analysis

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



Certificate ID: 15762
Part #: BAC105L080T
Cylinder Size: 105L
Lot Number: 14323080A4
Expiration: 6/5/2025

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

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

Component	Reported Concentration: (U, kcal)	Analytical Accuracy	Analytical Method:	Distributed by:
Ethanol	208 ppm	+/- 0.002 BAC(720L) [5.2 ppm]	NDIR	CHI Inc. 316 East Ninth Street Owensboro, KY 42303 Phone 866-835-0690 www.alcoholtest.com
Nitrogen	Balance			

*Traceable to:
Certified Reference Material - 261.0 µmol/mol
Ethanol in Nitrogen - Serial No. ND7017 Lot No. 0807262

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

Specifying Gas Lab Test *Robinson*
Insurance Date 04-01-2023



The calibration records with the certificate are available to the facility. Field alcohol testing equipment and methods require proficiency testing and regular calibration. The calibration records with the certificate are available to the facility. The information on the label of the unit, including the date of the last calibration, is provided for your reference. The information on the label of the unit, including the date of the last calibration, is provided for your reference. The information on the label of the unit, including the date of the last calibration, is provided for your reference. The information on the label of the unit, including the date of the last calibration, is provided for your reference.