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By Tracy Crews at 10:58 am, May 18, 2020

BAT



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 80-005837	LOCATION OF INSTRUMENT KANSAS CITY PD	DATE OF INSPECTION 05/06/2020	TIME OF INSPECTION 02:46
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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	02:47	DRY	00919080A1	03/05/2021
Cal Check	0.082	02:47	SIM TEMPERATURE	SIM SERIAL NUMBER	SIM CERTIFICATE EXPIRATION
Air Blank	0.000	02:48	N/A	N/A	N/A
Cal Check	0.082	02:48	STANDARD VALUE	STANDARD SUPPLIER	
Air Blank	0.000	02:49	0.080	CMI	
Cal Check	0.082	02:49	CALIBRATION CHECK RESULT 1		
Air Blank	0.000	02:49	0.082		
Cal Check	0.082	02:49	CALIBRATION CHECK RESULT 2		
Air Blank	0.000	02:49	0.082		
<b>Pass</b>			CALIBRATION CHECK RESULT 3		
			0.082		
			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	02:50
RAM Test	Pass		Subject Test	RFI*	02:50
EEPROM Checksum Test	Pass		Air Blank	0.000	02:51
Real Time Clock Test	Pass		*RFI Detect		
DSP Test	Pass		<b>Pass</b>		
Analytical Stability Test	Pass				
Modem Test	Pass				
Temperature Regulation Test	Pass				
<b>Pass</b>					

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).  
TESTED AND CERTIFIED.

<b>INSPECTING OFFICER</b>		
SIGNATURE <i>P.O. [Signature]</i>	PRINT NAME SHAWN DAVIS	
TYPE II PERMIT NUMBER 290088	EXPIRATION DATE 04/22/2021	TELEPHONE NUMBER 816-234-5000



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

2

PERMIT  
TYPE II

SHAWN DAVIS

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 4/22/2019

NUMBER 290088

EXPIRES 4/22/2021

MO 550-0771 (5-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

*Shawn Davis*

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES  
LAB-4 (06-10)

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

**INSTRUMENT OPERATOR CARD**

This permit is valid only for the operator of the specific instrument for which it is issued. An exchange of results associated with this instrument is not permitted. This instrument must be used in accordance with the manufacturer's instructions for use.

Operator: **DAVIS, SHAWN**  
Permit No: **290088**  
Date Issued: **4/22/2019** Date Expires: **4/22/2021**




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

Certificate of Analysis

Certificate ID: 11721

Part #: BAC1051080T

Cylinder Size: 105L

Lot Number: 08919080A1

Expiration: 3/5/2021

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

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

Analytical

Component	Reported Concentration: (U, [c2])	Analytical Accuracy	Analytical Method
Ethanol	208 ppm	+/-0.003 BAC (G/210L)	NDIR
Nitrogen	Balance	(5.2 psig)	

Distributed by:

CMI, Inc.  
316 East Ninth Street  
Owensboro, KY 42303  
Phone 866-835-0690  
www.alcoholtest.com

\*NIST Traceable Reference Material  
Cylinder No. CC274523 / Job No. 09160306  
Certified 362.2 µmol/mol Ethanol in Nitrogen

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

*Shawn Davis*  
Specialty Gas Lab Tech

01-24-19

Date



The effluent results shown on this certificate were obtained using equipment and standards capable of producing analytical results traceable to NIST and apply only to the tests conducted on this cylinder. ILMO Products and Services is not responsible for the use of any information provided for any particular purpose. The information is for informational purposes only and does not constitute a warranty or any other representation of the material or service.

ISO/IEC 17025:2005 Accredited Laboratory