

RECEIVED

By Tracy Crews at 8:13 am, Aug 27, 2020

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 08/20/2020	TIME OF INSPECTION 08:29
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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	08:34	DRY	14020080A2	07/05/2022
Cal Check	0.081	08:35	SIM TEMPERATURE	SIM SERIAL NUMBER	SIM CERTIFICATE EXPIRATION
Air Blank	0.000	08:35	N/A	N/A	N/A
Cal Check	0.081	08:36	STANDARD VALUE	STANDARD SUPPLIER	
Air Blank	0.000	08:36	0.080	CMI	
Cal Check	0.082	08:36	CALIBRATION CHECK RESULT 1		
Air Blank	0.000	08:37	0.081		
Pass			CALIBRATION CHECK RESULT 2		
			0.081		
			CALIBRATION CHECK RESULT 3		
			0.082		
			MAXIMUM DEVIATION (MUST BE WITHIN 5%)	SPREAD (MUST BE .005 OR LESS)	
			2.5%	0.001	

DIAGNOSTIC TEST RESULTS		RFI TEST RESULTS		
Test	Pass	Test	g/210L	Time
Voltage/Current Test	Pass	Air Blank	0.000	08:38
RAM Test	Pass	Subject Test	RFI*	08:38
EEPROM Checksum Test	Pass	Air Blank	0.000	08:38
Real Time Clock Test	Pass	*RFI Detect		
DSP Test	Pass			
Analytical Stability Test	Pass			
Modem Test	Pass			
Temperature Regulation Test	Pass			
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
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

INSPECTING OFFICER

SIGNATURE

PRINT NAME

JEREMY WHITE

TYPE & PERMIT NUMBER

280275

EXPIRATION DATE

09/05/2020

TELEPHONE NUMBER

8164828141



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

Certificate of Analysis

Certificate ID: 13821
Part #: BAC195L080T
Cylinder Size: 105L
Lot Number: 14020080A2
Expiration: 7/5/2022

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

Contents: 105 Liters @ 1000 psig 70°F (21°C)
Reported Analytical Accuracy Analytical
Component Concentration: (U, K=2): Method:
Ethanol 208 ppm 1/4-8.882 gac(g/200L) NDIR
Nitrogen Balance (312 ppm)

Distributed by:
CMI Inc.
316 East Ninth Street
Owensboro, KY 42303
Phone 866-833-0690
www.alcoholtest.com

Traceable to:
Certified Reference Material - 2624 (umol/mol
Nitrogen in Nitrogen - Serial No. GND015026 Lot No. 050319E11

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

Single Gas Lab Test

06-15-2020
Issuance Date



Subsequent ratings which this certificate were obtained using equipment and standards capable of producing analytical results traceable to NIST, and apply only to the items
listed on the certificate. ILMO Products assumes no responsibility for the use of any information provided for any particular
purpose. The information is for informational purposes only. Liability shall be limited to the extent of the original purchase price of the instrument or service.

ISO/IEC 17025:2017 Accredited Laboratory



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

PERMIT TYPE II

NATHAN I MAGERS

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 5/29/2019

NUMBER 290118

EXPIRES 5/29/2021

MO 590-0771 (04-19)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB- (06-10)

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

INSTRUMENT OPERATOR CARD

The named operator is authorized to operate an evidential breath alcohol
analyzer for the determination of the alcoholic content in breath form of expired air.

Operator: **MAGERS, NATHAN**
Permit No. **290118**
Date Issued **5/29/2019** Date Expires **5/29/2021**

