



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 80-005838	LOCATION OF INSTRUMENT KCMO POLICE DEPT.	DATE OF INSPECTION 10/07/2020	TIME OF INSPECTION 01:56
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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	01:58	DRY	14020080A2	07/05/2022
Cal Check	0.080	01:58	SIM TEMPERATURE	SIM SERIAL NUMBER	SIM CERTIFICATE EXPIRATION
Air Blank	0.000	01:58	N/A	N/A	N/A
Cal Check	0.080	01:59	STANDARD VALUE	STANDARD SUPPLIER	
Air Blank	0.000	01:59	0.080	CMI	
Cal Check	0.079	02:00	CALIBRATION CHECK RESULT 1		
Air Blank	0.000	02:00	0.080		
Cal Check	0.079	02:00	CALIBRATION CHECK RESULT 2		
Air Blank	0.000	02:00	0.080		
Pass			CALIBRATION CHECK RESULT 3		
			0.079		
			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	02:01
RAM Test	Pass		Subject Test	RFI*	02:02
EEPROM Checksum Test	Pass		Air Blank	0.000	02:03
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	
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

INSPECTING OFFICER		
SIGNATURE 	PRINT NAME NATHAN MAGERS	
TYPE II PERMIT NUMBER 290118	EXPIRATION DATE 05/29/2021	TELEPHONE NUMBER 8162345000



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

Certificate of Analysis

certificate ID: 13021
art #: BAC105L080T
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)

Component	Reported Concentration:	Accuracy (U, K±2):	Analytical Method:	Distributed by:
oxygen	208 ppm	+/-0.003 BAC(G/23k)	NDIR	CMI Inc. 316 East Ninth Street Owensboro, KY 42303 Phone 866-835-0690 www.alcoholtest.com
nitrogen	Balance	[5.2 ppm]		

acceptable to:
Certified Reference Material - 262.4 µmol/mol
hand 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).

[Signature]
Quality Gas Lab Tech
06-15-2020
Issuance Date

ISO/IEC 17025:2017 Accredited Laboratory

calibration meters within this certificate were obtained using equipment and standards capable of producing analytical results traceable to NIST and only on the basis stated on this certificate. ILMOP Products Company makes no warranty or representation as to the suitability of the use of any information provided for any particular use. The information is at the sole discretion and risk of the user. Liability shall be limited to established replacement cost of this material or service.



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 306.111 through 306.119 RSMo.

DATE 5/29/2021
NUMBER 290118
EXPIRES 5/29/2021
MO 800-9771 (6-10)
DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES
LMS-108-10

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

The named certificatee is authorized to operate an evidential breath alcohol instrument for the determination of the alcoholic content in breath form of samples in Missouri.
Operator: **MAGERS, NATHAN**
Permit No: **290118**
Date Issued: **5/29/2021**
Date Expires: **5/29/2021**