

**RECEIVED**

By Tracy Crews at 3:36 pm, Oct 29, 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 80-005841	LOCATION OF INSTRUMENT KCMO POLICE DEPT.	DATE OF INSPECTION 10/07/2020	TIME OF INSPECTION 01:59
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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	02:04	DRY	14020080A2	07/05/2022
Cal Check	0.079	02:04	SIM TEMPERATURE	SIM SERIAL NUMBER	SIM CERTIFICATE EXPIRATION
Air Blank	0.000	02:05	N/A	N/A	N/A
Cal Check	0.079	02:05	STANDARD VALUE	STANDARD SUPPLIER	
Air Blank	0.000	02:06	0.080	CMI	
Cal Check	0.078	02:06	CALIBRATION CHECK RESULT 1		
Air Blank	0.000	02:06	0.079		
Cal Check	0.078	02:06	CALIBRATION CHECK RESULT 2		
Air Blank	0.000	02:06	0.079		
<b>Pass</b>			CALIBRATION CHECK RESULT 3		
			0.078		
			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	0.000	02:07
RAM Test	Pass		Subject Test	RFI*	02:07
EEPROM Checksum Test	Pass		Air Blank	0.000	02:08
Real Time Clock Test	Pass		*RFI Detect		
DSP Test	Pass				
Analytical Stability Test	Pass				
Modem Test	Pass				
Temperature Regulation Test	Pass				
<b>Pass</b>			<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

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
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TYPE II PERMIT NUMBER 290118	EXPIRATION DATE 05/29/2021	TELEPHONE NUMBER 8162345000
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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: 13021  
 Lot #: BAC105L080T  
 Cylinder Size: 105L  
 Lot Number: 14020080A2  
 Expiration: 7/5/2022

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

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

Component	Reported Concentration:	Analytical Accuracy (U, k=2):	Analytical Method:	Distributed by:
oxygen	208 ppm Balance	±7.0-0.002 BAC (G/2A0L) (5.2 ppm)	NDIR	CMI Inc. 316 East Ninth Street Owensboro, KY 42303 Phone 866-835-0690 www.alcoholtest.com

Stable to:  
 Certified Reference Material - 262.4 µmol/mol  
 90% in Nitrogen - Serial No. GN0015026 Lot No. 050319E1

Gas Lab Tech  
 Issuance Date: 06-15-2020

Information: This certificate was obtained using equipment and materials capable of producing analytical results traceable to NIST, and apply only to the items described herein. The information is provided for informational purposes only and does not constitute a representation of the quality of the gas. Liability shall be limited to established replacement costs of gas material 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 306.111 through 306.119 RSMo.

DATE: 5/29/2019  
 NUMBER: 290118  
 EXPIRES: 5/29/2021

*[Signature]*  
 DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

*[Signature]*  
 DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 58-077 (7/14)  
 LB-4 (R4-10)

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

**INSTRUMENT OPERATOR CARD**

This permit cardholder is authorized to operate an individual breath alcohol analyzer for the determination of the alcoholic content in breath form of expirator air in Missouri.

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