



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
STATE PUBLIC HEALTH LABORATORY  
CMI INTOXILYZER 8000 MAINTENANCE REPORT

**RECEIVED**

By Tracy Crews at 12:14 pm, Aug 14, 2020

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 80-005842	LOCATION OF INSTRUMENT KANSAS CITY POLICE	DATE OF INSPECTION 08/07/2020	TIME OF INSPECTION 00:43
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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	00:45	DRY	00919080A1	03/05/2021
Cal Check	0.081	00:45	SIM TEMPERATURE	SIM SERIAL NUMBER	SIM CERTIFICATE EXPIRATION
Air Blank	0.000	00:46	N/A	N/A	N/A
Cal Check	0.080	00:46	STANDARD VALUE	STANDARD SUPPLIER	
Air Blank	0.000	00:47	0.080	CMI	
Cal Check	0.081	00:47	CALIBRATION CHECK RESULT 1		
Air Blank	0.000	00:48	0.081		
<b>Pass</b>			CALIBRATION CHECK RESULT 2		
			0.080		
			CALIBRATION CHECK RESULT 3		
			0.081		
			MAXIMUM DEVIATION (MUST BE WITHIN 5%)	SPREAD (MUST BE .005 OR LESS)	
			1.2%	0.001	

DIAGNOSTIC TEST RESULTS			RFI TEST RESULTS		
			Test	g/210L	Time
Voltage/Current Test	Pass		Air Blank	0.000	00:48
RAM Test	Pass		Subject Test	RFI*	00:48
EEPROM Checksum Test	Pass		Air Blank	0.000	00:49
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	2

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	EXPIRATION DATE 09/05/2020	TELEPHONE NUMBER 8163825881
TYPE II PERMIT NUMBER 280275			



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



**PERMIT**  
**TYPE II**  
**JEREMY A. WHITE**

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 506.111 through 506.119 RSMo.

DATE 9/5/2018 DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

NUMBER 280275

EXPIRES 9/5/2020 DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 690-0771 (6-10) LAB-4 (69-10)

STATE OF MISSOURI SENIOR SERVICES  
BREATH ALCOHOL PROGRAM

**INSTRUMENT OPERATOR CARD**

The named candidate is authorized to operate an evidential breath alcohol instrument for the determination of the alcoholic content of breath from an expired air sample.

Operator: **WHITE, JEREMY**  
Permit No: **280275**  
Date Issued: **8/6/2018**  
Date Expires: **8/5/2020**



7 Eastgate Dr. • P.O. Box 790 • Jacksonville, IL 62651-0790  
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**Certificate of Analysis**

Certificate ID: **11721**  
Part #: **BAC1051080T**  
Cylinder Size: **105L**  
Lot Number: **00919080A1**  
Expiration: **3/5/2021**

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

Contents:	Reported Concentration:	Analytical Accuracy (U, L±2):	Analytical Method:
105 Liters @ 1000 psig 70°F (21°C)	288 ppm	+7.6, -682 mc(g/288L)	NCTR
	Ethanol	±5.2 ppm	
	Nitrogen		

Distributed by:  
CMI, Inc.  
316 East Ninth Street  
Owensboro, KY 42303  
Phone 606-635-0690  
www.ilmocheek.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).

*[Signature]*  
Supply Gas Lab Tech

Date 01-24-19



ISO/IEC 17025:2005 Accredited Laboratory

The calibration results within this certificate were obtained using equipment with standards capable of producing analytical results traceable to NIST, and only valid in the tests certified on this certificate. ILMO Products Company makes no warranty or representation as to the suitability of the use of any information provided for any particular purpose. The information on this certificate is the sole discretion and risk of the user. Liability shall be limited to established requirements cost of this material or service.