

RECEIVED

By Tracy Crews at 12:06 pm, Jun 23, 2020



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

RPD

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<br>80-005843 | LOCATION OF INSTRUMENT<br>KANSAS CITY P.D. | DATE OF INSPECTION<br>06/10/2020 | TIME OF INSPECTION<br>03:20 |
|---------------------------------------|--|----------------------------------|-----------------------------|

| CALIBRATION CHECK RESULTS |        |       | CALIBRATION CHECK SUMMARY             |                               |                            |
|---------------------------|--------|-------|---------------------------------------|-------------------------------|----------------------------|
| Test                      | g/210L | Time  | STANDARD TYPE                         | STANDARD LOT #                | STANDARD EXPIRATION DATE   |
| Air Blank                 | 0.000  | 03:22 | DRY                                   | 00919080A1                    | 03/05/2021                 |
| Cal Check                 | 0.079  | 03:22 | SIM TEMPERATURE                       | SIM SERIAL NUMBER             | SIM CERTIFICATE EXPIRATION |
| Air Blank                 | 0.000  | 03:23 | N/A                                   | N/A                           | N/A                        |
| Cal Check                 | 0.080  | 03:23 | STANDARD VALUE                        | STANDARD SUPPLIER             |                            |
| Air Blank                 | 0.000  | 03:24 | 0.080                                 | CMI                           |                            |
| Cal Check                 | 0.079  | 03:24 | CALIBRATION CHECK RESULT 1            |                               |                            |
| Air Blank                 | 0.000  | 03:24 | 0.079                                 |                               |                            |
| Cal Check                 | 0.079  | 03:24 | CALIBRATION CHECK RESULT 2            |                               |                            |
| Air Blank                 | 0.000  | 03:24 | 0.080                                 |                               |                            |
| Cal Check                 | 0.079  | 03:24 | CALIBRATION CHECK RESULT 3            |                               |                            |
| Air Blank                 | 0.000  | 03:24 | 0.079                                 |                               |                            |
| <b>Pass</b>               |        |       | MAXIMUM DEVIATION (MUST BE WITHIN 5%) | SPREAD (MUST BE .005 OR LESS) |                            |
|                           |        |       | 1.2%                                  | 0.001                         |                            |

| DIAGNOSTIC TEST RESULTS     |           |      | RFI TEST RESULTS |        |       |
|-----------------------------|-----------|------|------------------|--------|-------|
| Test                        | Pass/Fail | Time | Test             | g/210L | Time  |
| Voltage/Current Test        | Pass      |      | Air Blank        | 0.000  | 03:25 |
| RAM Test                    | Pass      |      | Subject Test     | RFI*   | 03:27 |
| EEPROM Checksum Test        | Pass      |      | Air Blank        | 0.000  | 03:27 |
| Real Time Clock Test        | Pass      |      | *RFI Detect      |        |       |
| DSP Test                    | Pass      |      | <b>Pass</b>      |        |       |
| 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   | 8       | 7       | 5       | 6       | 8        |  |  |

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 | TIME UPDATED

| INSPECTING OFFICER               |                               |                                |  |
|----------------------------------|-------------------------------|--------------------------------|--|
| SIGNATURE<br>pp [Signature] 4826 | PRINT NAME<br>R. KAIGHEN      |                                |  |
| TYPE II PERMIT NUMBER<br>290228  | EXPIRATION DATE<br>10/01/2021 | TELEPHONE NUMBER<br>8164828196 |  |



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

**PERMIT  
TYPE II**

**RYAN KAIGHEN**

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 10/1/2019  
NUMBER 290228  
EXPIRES 10/1/2021

MO 580-8771 (6-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

DOH-4 (66-10)

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

**INSTRUMENT OPERATOR CARD**

This named cardholder is authorized to operate an expiratory breath alcohol instrument for the determination of the alcoholic content in breath form of expired air.

Operator: KAIGHEN, RYAN  
Permit No. 290228  
Date Issued 10/1/2019 Date Expires 10/1/2021




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

**Certificate of Analysis**

Certificate ID: 11721  
Part #: BAC105L080T  
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: 105 Liters @ 1000 psig 70°F (21°C)

|            |          |                         |         |                               |                           |                 |   |
|------------|----------|-------------------------|---------|-------------------------------|---------------------------|-----------------|---|
| Component: | Ethanol  | Reported Concentration: | 208 ppm | Analytical Accuracy (U, k=2): | +/-0.002 BAC(G/218L) NDIR | Distributed by: | CMI Inc   |
|            | Nitrogen | Balance                 |         | [5.2 ppm]                     |                           |                 | 316 East Ninth Street<br>Owensboro, KY 42303<br>Phone 866-835-0690<br>www.alcoholtest.com |

\*NIST Traceable Reference Material  
Cylinder No. CCZ74523 / 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]*  
Specialty Gas Lab Tech  
Date 01-24-19



The calibration results within this certificate were obtained using equipment and standards capable of producing analytical results traceable to NIST, and apply only to the items contained 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 use is at the sole discretion and risk of the user. Liability shall be limited to established replacement cost of this material or service.

ISO/IEC 17025:2005 Accredited Laboratory