



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

RECEIVED
By Tracy Crews at 8:03 am, Jul 22, 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 80-005843	LOCATION OF INSTRUMENT KANSAS CITY P.D.	DATE OF INSPECTION 07/10/2020	TIME OF INSPECTION 15:38
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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	15:40	DRY	00919080A1	03/05/2021
Cal Check	0.079	15:40	SIM TEMPERATURE	SIM SERIAL NUMBER	SIM CERTIFICATE EXPIRATION
Air Blank	0.000	15:41	N/A	N/A	N/A
Cal Check	0.079	15:41	STANDARD VALUE	STANDARD SUPPLIER	
Air Blank	0.000	15:42	0.080	CMI	
Cal Check	0.079	15:42	CALIBRATION CHECK RESULT 1		
Air Blank	0.000	15:42	0.079		
Cal Check	0.079	15:42	CALIBRATION CHECK RESULT 2		
Air Blank	0.000	15:43	0.079		
Pass			CALIBRATION CHECK RESULT 3		
			0.079		
			MAXIMUM DEVIATION (MUST BE WITHIN 5%)	SPREAD (MUST BE .005 OR LESS)	
			1.2%	0.000	

DIAGNOSTIC TEST RESULTS			RFI TEST RESULTS		
			Test	g/210L	Time
Voltage/Current Test	Pass		Air Blank	0.000	15:43
RAM Test	Pass		Subject Test	RFI*	15:43
EEPROM Checksum Test	Pass		Air Blank	0.000	15:44
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	7	0	4	3	9		

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 DOUGLAS DAVIDSON
TYPE II PERMIT NUMBER 290087	TELEPHONE NUMBER 8162345000
EXPIRATION DATE 04/22/2021	



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

2

PERMIT
TYPE II

DOUGLAS DAVIDSON

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 4/22/2019

NUMBER 290087

EXPIRES 4/22/2021

NO. 565-0771 (6-10)

W. S. ...

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

B. ...

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

L-84 (06-10)



7 Eastgate Dr. • P.O. Box 790 • Jackson, 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	Reported Concentration	Analytical Accuracy (U, k=2)	Analytical Method
Ethanol	288 ppm	+/- 0.002 BAC (g/230L)	NDIR
Nitrogen	Balance	[5.2 ppm]	

Distributed by:
CMI Inc.
316 East Ninth Street
Owensboro, KY 42303
Phone 866-8335-0690
www.alcoholtest.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).

John ...
Specialty Gas Lab Tech

01-24-19
Date



FJIA
Calibration and Testing
Accreditation 161895

The calibration results within this certificate were obtained using equipment and methods 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 stability of the use of any instrument or any particular reagent. The information set is 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

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

INSTRUMENT OPERATOR CARD

The holder of this card is authorized to operate an exhalator breath alcohol instrument for the determination of the alcoholic content of breath from an expired air sample.

Operator: **DAVIDSON, DOUGLAS**
Permit No: **290087**
Date Issued: **4/22/2019** Date Expires: **4/22/2021**