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By Tracy Crews at 8:45 am, Sep 16, 2020



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

BAT

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 80-005844	LOCATION OF INSTRUMENT KCMO POLICE DEPT.	DATE OF INSPECTION 09/03/2020	TIME OF INSPECTION 18:56
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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	18:58	DRY	14020080A2	07/05/2022
Cal Check	0.078	18:58	SIM TEMPERATURE	SIM SERIAL NUMBER	SIM CERTIFICATE EXPIRATION
Air Blank	0.000	18:59	N/A	N/A	N/A
Cal Check	0.079	18:59	STANDARD VALUE	STANDARD SUPPLIER	01402008
Air Blank	0.000	18:59	0.080	CMI	
Cal Check	0.079	19:00	CALIBRATION CHECK RESULT 1		
Air Blank	0.000	19:00	0.078		
<b>Pass</b>			CALIBRATION CHECK RESULT 2		
			0.079		
			CALIBRATION CHECK RESULT 3		
		0.079			
			MAXIMUM DEVIATION (MUST BE WITHIN 5%)	SPREAD (MUST BE .005 OR LESS)	
			2.5%	0.001	

0A2

DIAGNOSTIC TEST RESULTS			RFI TEST RESULTS		
			Test	g/210L	Time
Voltage/Current Test	Pass		Air Blank	0.000	19:01
RAM Test	Pass		Subject Test	RFI*	19:01
EEPROM Checksum Test	Pass		Air Blank	0.000	19:01
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 <i>P.O. R 5396</i>	PRINT NAME SHAWN DAVIS
TYPE II PERMIT NUMBER 290088	EXPIRATION DATE 04/22/2021
	TELEPHONE NUMBER 816-234-5000



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

### Certificate of Analysis

Certificate ID: 13021  
 #: BAC105L080T  
 Under Size: 105L  
 Number: 14020030A2  
 Expiration: 7/5/2022

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

Volume: 105 Liters @ 1000 psig 70°F (21°C)  
 Analytical Accuracy: (U, k=2): ±1.8 mg BAC (0.720L) NOIR  
 (5.2 ppm)  
 Reported Concentration: 288 ppm  
 Method: Balance  
 Distributed by: CMI Inc.  
 316 East Ninth Street  
 Owensboro, KY 42303  
 Phone 866-835-0690  
 www.alcoholtest.com

Material: 10L in Nitrogen - Serial No. GN0015026 Lot No. 050319E11  
 Reference Material - 2624 µmol/mol  
 Store in dry area, away from sources of heat, ignition and direct sunlight. Do not allow storage area to exceed 52 °C (125 °F).



06-15-2020  
 Issuance Date

Gas Lab Tech  
 [Signature]

Information: The information on this certificate was obtained using equipment and methods capable of producing analytical results traceable to NIST, and apply only to the items listed 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 17025:2017 Accredited Laboratory



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

## PERMIT TYPE II

SHAWN DAVIS

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: 2900088  
 EXPIRES: 4/22/2021  
 MO 590-0771 (8-10)

[Signature]  
 DIRECTOR OF STATE PUBLIC HEALTH LABORATORY  
 [Signature]  
 DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES  
 LAB-4 (85-10)

STATE OF MISSOURI  
 DEPARTMENT OF HEALTH AND SENIOR SERVICES  
 BREATH ALCOHOL PROGRAM  
**INSTRUMENT OPERATOR CARD**  
 The named operator is authorized to operate an individual breath alcohol instrument for the determination of the alcoholic content in breath form of expired air.  
 Operator: DAVIS, SHAWN  
 Permit No: 2900088  
 Date Issued: 4/22/2019  
 Date Expires: 4/22/2021

