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By Tracy Crews at 3:36 pm, Oct 29, 2020

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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 80-005844	LOCATION OF INSTRUMENT KCMO POLICE DEPT.	DATE OF INSPECTION 10/07/2020	TIME OF INSPECTION 01:45
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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	01:47	DRY	14020080A2	07/05/2022
Cal Check	0.079	01:47	SIM TEMPERATURE	SIM SERIAL NUMBER	SIM CERTIFICATE EXPIRATION
Air Blank	0.000	01:48	N/A	N/A	N/A
Cal Check	0.079	01:48	STANDARD VALUE	STANDARD SUPPLIER	
Air Blank	0.000	01:49	0.080	CMI	01402008
Cal Check	0.079	01:49	CALIBRATION CHECK RESULT 1		
Air Blank	0.000	01:49	0.079		
Cal Check	0.079	01:49	CALIBRATION CHECK RESULT 2		
Air Blank	0.000	01:50	0.079		
<b>Pass</b>			CALIBRATION CHECK RESULT 3		
			0.079		
			MAXIMUM DEVIATION (MUST BE WITHIN 5%)	SPREAD (MUST BE .005 OR LESS)	
			1.2%	0.000	

0A2

DIAGNOSTIC TEST RESULTS

RFI TEST RESULTS

Voltage/Current Test	Pass	Test	g/210L	Time
RAM Test	Pass	Air Blank	0.000	01:50
EEPROM Checksum Test	Pass	Subject Test	RFI*	01:50
Real Time Clock Test	Pass	Air Blank	0.000	01:51
DSP Test	Pass	*RFI Detect		
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  
 Part #: BAC105L080T  
 Cylinder Size: 105L  
 Lot Number: 14020080A2  
 Expiration: 7/5/2022

380 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	+/- 0.002 BAC (6/298L) NDIR	NDIR	CMI Inc.
nitrogen	Bal/ance			316 East Ninth Street Owensboro, KY 42303 Phone 866-835-0690 www.alcoholtest.com

Acceptable to: Modified Reference Material - 262.4 µmol/mol and in Nitrogen - Serial No. GN0015026 Lot No. 050319E11  
 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]*  
 Safety Gas Lab Tech  
 Issuance Date: 06-15-2020



Information: All information within this certificate was obtained using equipment and standards capable of producing analytical results traceable to NIST, and apply only to the items specified in this certificate. ILMO Products Company makes no warranty or representation as to the suitability of the use of any information provided for any particular use. The information on this certificate is limited to the stated 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

**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 890-0771 (5-10)

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

**INSTRUMENT OPERATOR CARD**

The state health officer is authorized to operate an evidentiary breath alcohol instrument for the determination of the alcoholic content of breath from a subject in Missouri.

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