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By Tracy Crews at 8:38 am, Mar 19, 2020



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 80-005845	LOCATION OF INSTRUMENT KANSAS CITY PD	DATE OF INSPECTION 03/05/2020	TIME OF INSPECTION 22:37
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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	22:39	DRY	00919080A1	03/05/2021
Cal Check	0.082	22:39	SIM TEMPERATURE	SIM SERIAL NUMBER	SIM CERTIFICATE EXPIRATION
Air Blank	0.000	22:40	N/A	N/A	N/A
Cal Check	0.082	22:40	STANDARD VALUE	STANDARD SUPPLIER	
Air Blank	0.000	22:41	0.080	CMI	
Cal Check	0.082	22:41	CALIBRATION CHECK RESULT 1		
Air Blank	0.000	22:41	0.082		
Cal Check	0.082	22:41	CALIBRATION CHECK RESULT 2		
Air Blank	0.000	22:41	0.082		
Pass			CALIBRATION CHECK RESULT 3		
			0.082		
			MAXIMUM DEVIATION (MUST BE WITHIN 5%)	SPREAD (MUST BE .005 OR LESS)	
			2.5%	0.000	

DIAGNOSTIC TEST RESULTS			RFI TEST RESULTS		
			Test	g/210L	Time
Voltage/Current Test	Pass		Air Blank	RFI*	22:42
RAM Test	Pass		Air Blank	0.000	22:42
EEPROM Checksum Test	Pass		*RFI Detect		
Real Time Clock Test	Pass		Pass		
DSP Test	Pass				
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	35	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 JORDAN INFRANCA	
TYPE II PERMIT NUMBER 290130	EXPIRATION DATE 06/21/2021	TELEPHONE NUMBER 8163825897	



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

Certificate of Analysis

Certificate ID: 11721
Part #: BAC105L089T
Cylinder Size: 105L
Lot Number: 00919880A1
Expiration: 3/5/2021

0.080 BAC for the calibration of furnaces used to determine breath alcohol concentration

Contents: 105 Liters @ 1000 psig 70°F (21°C)
Component: Reported Accuracy Analytical
Concentration: (1) (±2%) Method:
Ethanol 208 ppm 7-8 and BAC(2021) mix
Nitrogen Balance 15.2 ppm

Distributed by:
CMI Inc.
316 East Ninth Street
Owensboro, KY 42303
Phone: 866-835-0690
www.alcoholcert.com

NIIST Traceable Reference Material
Cylinder No. CC774573 / Job No. 09160306
Certified 362.2 umol/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).

Speckly Gas Lab Tech

Date: 01-24-19



ISO/IEC 17025:2005 Accredited Laboratory

The calibration results within this certificate were obtained using equipment and methods capable of producing analytical results traceable to NIST and only by the same
equipment and methods used to calibrate the equipment under an authority or registration as to the reliability of the same information provided for any particular
purpose. The information on it is the sole discretion and risk of the user. Liability shall be limited to substitution of reference out of this material or service.



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

PERMIT
TYPE II

JORDAN INFRANCA

is hereby authorized to install, and supervise, operation, 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 §§6-111 through 606-118 RSMo.

DATE: 07/12/19
NUMBER: 290130
EXPIRES: 02/1/2021

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

STATE OF MISSOURI
DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM
INSTRUMENT OPERATOR CARD

The permit holder is authorized to operate an alcohol breath analyzer
in accordance with the requirements of this certificate and to install, train, inspect, calibrate, and perform field service on the
equipment. The permit holder shall be held responsible for the accuracy of the alcohol content of the breath sample of the
operator. NINEANON, JORDAN
Operator: NINEANON, JORDAN
Date Issued: 06/12/2019 • Date Expires: 02/01/2021

