

**RECEIVED**

By Tracy Crews at 7:52 am, Mar 22, 2021

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 80-005837	LOCATION OF INSTRUMENT KANSAS CITY PD	DATE OF INSPECTION 03/09/2021	TIME OF INSPECTION 23:37
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**CALIBRATION CHECK RESULTS**

Test	g/210L	Time
Air Blank	0.000	23:39
Cal Check	0.080	23:39
Air Blank	0.000	23:40
Cal Check	0.081	23:40
Air Blank	0.000	23:41
Cal Check	0.080	23:41
Air Blank	0.000	23:42

**Pass****CALIBRATION CHECK SUMMARY**

STANDARD TYPE DRY	STANDARD LOT # 14020080A2	STANDARD EXPIRATION DATE 07/05/2022
SIM TEMPERATURE N/A	SIM SERIAL NUMBER N/A	SIM CERTIFICATE EXPIRATION N/A
STANDARD VALUE 0.080	STANDARD SUPPLIER CMI	
CALIBRATION CHECK RESULT 1 0.080		
CALIBRATION CHECK RESULT 2 0.081		
CALIBRATION CHECK RESULT 3 0.080		
MAXIMUM DEVIATION (MUST BE WITHIN 5%) 1.2%	SPREAD (MUST BE .005 OR LESS) 0.001	

**DIAGNOSTIC TEST RESULTS**

Voltage/Current Test	Pass
RAM Test	Pass
EEPROM Checksum Test	Pass
Real Time Clock Test	Pass
DSP Test	Pass
Analytical Stability Test	Pass
Modem Test	Pass
Temperature Regulation Test	Pass

**Pass****RFI TEST RESULTS**

Test	g/210L	Time
Air Blank	RFI*	23:42
Air Blank	0.000	23:42
*RFI Detect		

**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	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 5646 290087 04/22/2021 PRINT NAME DOUGLAS DAVIDSON

TYPE &amp; PERMIT NUMBER 290087 EXPIRATION DATE 04/22/2021 TELEPHONE NUMBER 8162345000



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: 13821  
Part #: BAC105L088T  
Cylinder Size: 105L  
Lot Number: 14828088A2  
Expiration: 7/5/2022

0.080 BAC (from the calibration of instruments used to determine breath alcohol concentration)

Component:	Reported Concentration:	Analytical Accuracy (U, k=2):	Analytical Method:
Ethanol	288 ppm	+/-0.8% BAC(6200)	NDIR
Nitrogen	balance	(5.2 ppm)	

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

Traceable to:  
Certified Reference Material - 2824 umol/mol  
Ethanol in Nitrogen - Serial No. SMO15026 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]*  
Specialty Gas Lab Tech

06-15-2020  
Issuance Date



ISO/IEC 17025:2017 Accredited Laboratory

The calibration results shown on certificates were obtained using equipment and under conditions of production analysis traceable to NIST and apply only to the units  
indicated on this certificate. UNDO Product Changing policy no warranty or responsibility as to the suitability of the use of any calibration provided for any product  
except the information and as by the instrument and the use of the user. Labels shall be based on established replacement cost of the material or service.



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

**PERMIT**  
TYPE II

**DOUGLAS DAVIDSON**

is hereby authorized to, instruct and supervise operators, train instructors, inspect, calibrate, perform field services 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  
MO REG 0771 (8-10)

*[Signature]*  
DIRECTOR OF STATE PUBLIC HEALTH LABORATORY  
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES  
MO-4 (86-10)

STATE OF MISSOURI  
DEPARTMENT OF SENIOR SERVICES  
BREATH ALCOHOL PROGRAM

**INSTRUMENT OPERATOR CARD**

The instrument calibration is valid for use only on the instrument for which it was issued. The instrument must be used in accordance with the instructions provided in the instrument manual.  
Operator: DAVIDSON, DOUGLAS  
Date Issued: 4/22/2019 Date Expires: 4/22/2021

The calibration results shown on certificates were obtained using equipment and under conditions of production analysis traceable to NIST and apply only to the units  
indicated on this certificate. UNDO Product Changing policy no warranty or responsibility as to the suitability of the use of any calibration provided for any product  
except the information and as by the instrument and the use of the user. Labels shall be based on established replacement cost of the material or service.