

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 LOCATION OF INSTRUMENT DATE OF INSPECTION TIME OF INSPECTION 80-005838 KCMO POLICE DEPT. 01/06/2021 17:48 CALIBRATION CHECK RESULTS CALIBRATION CHECK SUMMARY STANDARD EXPIRATION DATE STANDARD TYPE STANDARD LOT# DRY 14020080A2 07/05/2022 Test q/210L Time SIM CERTIFICATE EXPIRATION SIM TEMPERATURE SIM SERIAL NUMBER N/A N/A N/A Air Blank 0.000 17:49 STANDARD VALUE STANDARD SUPPLIER Cal Check 0.081 17:50 0.080 CMT Air Blank 0.000 17:50 CALIBRATION CHECK RESULT 1 Cal Check 0.081 17:51 0.081 Air Blank 0.000 17:51 CALIBRATION CHECK RESULT 2 Cal Check 0.082 17:51 0.081 Air Blank 17:52 0.000 CALIBRATION CHECK RESULT 3 0.082 ass MAXIMUM DEVIATION (MUST BE WITHIN 5%) SPREAD (MUST BE .005 OR LESS) 2.5% 0.001 DIAGNOSTIC TEST RESULTS RFI TEST RESULTS Voltage/Current Test Pass Test q/210L Time RAM Test Pass EEPROM Checksum Test Air Blank Pass RFI* 17:52 Real Time Clock Test Pass Air Blank 0.000 17:53 DSP Test Pass Analytical Stability Test Pass *RFI Detect Modem Test Pass Temperature Regulation Test Pass Pass NUMBER OF REFUSALS AND SUBJECT BREATH TESTS IN EACH RANGE SINCE LAST MAINTENANCE REPORT REFUSALS 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 OFF	ICER					
SIGNATURE	\wedge $///$		PRINT NAME			
P.O. John			JORDAN INFRANCA			
TYPE II PERMIT NUMBER	7	EXPIRATION DATE			TELEPHONE NUMBER	
290130	J	06/21/20:	21		816-382-589	97



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

Certificate of Analysis

Certificate	ID:

13021

Part #:

105L Cylinder Size:

Lot Number:

Expiration:

14020080A2 7/5/2022

BAC105L080T

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

Contents:

Component:

Ethanol

Nitrogen

105 Liters @ 1000 psig 70°F (21°C)

Analytical

Reported

208 ppm

Balance

Concentration:

Accuracy Analytical

(U, k=2):

Method:

+/-0.602 BAC(G/210L) NDIR [5.2 ppm]

CMI Inc.

Distributed by:

316 East Ninth Street Owensboro, KY 42303

Phone 866-835-0690 www.alcoholtest.com

*Traceable to:

Certified Reference Material - 262.4 µmol/mol

Ethanol 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).

Issuance Date

06-15-2020

The calibration results within this certificate were obtained using equipment and standards capable of producing analytical results traceable to NIST, and apply only to the items conclused 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



MO 580-0771 (6-10)

STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES **BREATH ALCOHOL PROGRAM**



LAB-4 (R6-10)

PERMIT TYPE II

JORDAN INFRANCA

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.

DATE6/21/2019	Was hard
	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 290130	
EXPIRES 6/21/2021	DIRECTOR OF DEPARTMENT OF HEALTH AND SERVICES





The named cardholder is authorized to operate en evidential breath alcohol

INFRANCA, JORDAN Permit No 290130

Date Issued 6/21/2019 Date Expires 6/21/2021