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By Tracy Crews at 10:56 am, Sep 13, 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 80-005838	LOCATION OF INSTRUMENT KCMO POLICE DEPT.	DATE OF INSPECTION 09/07/2021	TIME OF INSPECTION 01:48
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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	01:50	DRY	14020080A2	07/05/2022
Cal Check	0.080	01:50	SIM TEMPERATURE	SIM SERIAL NUMBER	SIM CERTIFICATE EXPIRATION
Air Blank	0.000	01:51	N/A	N/A	N/A
Cal Check	0.081	01:51	STANDARD VALUE	STANDARD SUPPLIER	
Air Blank	0.000	01:52	0.080	CMI	
Cal Check	0.080	01:52	CALIBRATION CHECK RESULT 1		
Air Blank	0.000	01:53	0.080		
Cal Check	0.080	01:52	CALIBRATION CHECK RESULT 2		
Air Blank	0.000	01:53	0.081		
Cal Check	0.080	01:52	CALIBRATION CHECK RESULT 3		
Air Blank	0.000	01:53	0.080		
Pass			MAXIMUM DEVIATION (MUST BE WITHIN 5%)	SPREAD (MUST BE .005 OR LESS)	
			1.2%	0.001	

DIAGNOSTIC TEST RESULTS			RFI TEST RESULTS		
			Test	g/210L	Time
Voltage/Current Test		Pass	Air Blank	0.000	01:53
RAM Test		Pass	Subject Test	RFI*	01:53
EEPROM Checksum Test		Pass	Air Blank	0.000	01:54
Real Time Clock Test		Pass	*RFI Detect		
DSP Test		Pass	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	0	0	1	0	1	

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 INFRANCA, JORDAN	
TYPE II PERMIT NUMBER 210128	EXPIRATION DATE 06/21/2023	TELEPHONE NUMBER 816-382-5897



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

Certificate of Analysis

certificate ID: 13021
art #: BAC105L080T
cylinder Size: 105L
lot Number: 14020080A2
expiration: 7/5/2022

080 BAC (for the calibration of instruments used to determine breath alcohol concentration)

contents: 105 liters @ 1000 psig 70°F (21°C)
analytical accuracy: (U, K₂)
component: Reported Concentration: Method: Analytical Method:
nitrogen: 288 Ppm Balance (5.2 ppm) NDIR

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

receivable to:
certified Reference Material - 2624 ppm/mmol
nitrogen in Nitrogen - Serial No. GND015026 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]
Quality Gas Lab Tech

06-15-2020
Issuance Date



ISO/IEC 17025:2017 Accredited Laboratory

Attention: notes within this certificate were obtained using equipment and methods capable of producing analytical results traceable to NIST, and apply only to the amount stated 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 herein is the sole responsibility of the user. Liability shall be limited to established performance contract 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 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: 6/21/2019
NUMBER: 290130
EXPIRES: 6/21/2021
MO 586-9771 (6-10)

[Signature]
DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES
L984 (RS-10)

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

The named cardholder is authorized to operate an Intoxilizer breath alcohol instrument for the determination of the alcoholic content in breath from or expired air in Missouri.

Operator: INFRANCA, JORDAN
Permit No: 290130
Date Issued: 6/21/2019 Date Expires: 6/21/2021

