

**RECEIVED**

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 80-005843	LOCATION OF INSTRUMENT KANSAS CITY P.D.	DATE OF INSPECTION 09/07/2021	TIME OF INSPECTION 02:50
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**CALIBRATION CHECK RESULTS**

Test	g/210L	Time
Air Blank	0.000	02:52
Cal Check	0.080	02:52
Air Blank	0.000	02:53
Cal Check	0.079	02:53
Air Blank	0.000	02:54
Cal Check	0.080	02:54
Air Blank	0.000	02:55

**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 0.079		
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*	02:55
Air Blank	0.000	02:55
*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	2	0	5	2	7

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  
 217-245-2183 • Fax: 217-243-7634 • www.ilmo-products.com

### Certificate of Analysis

certificate ID: 13021  
 part #: BAC1051080T  
 cylinder Size: 105L  
 lot Number: 14020800A2  
 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

Component	Reported Concentration	Accuracy (U, J, %)	Analytical Method
ethanol	208 ppm	+/- 0.002 BAC (G/210L) [5.2 ppm]	NDIR
nitrogen	Balance		

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

receivable to:  
 certified Reference Material - 262.4 µmol/mol  
 ethanol in Nitrogen - Serial No. GN0015026 Lot No. 050319E11

*John A. ...*  
 Quality Gas Lab Tech

06-15-2020  
 Issuance Date



calibration results within this certificate were obtained using equipment and methods capable of producing analytical results traceable to NIST, and apply only to the items 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 on this certificate is for informational purposes only and does not constitute an offer of any product or service.

ISO/IEC 17025:2017 Accredited Laboratory



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

*W. S. ...*  
 DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

*J. ...*  
 DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 56-0771 (5-10)

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

**INSTRUMENT OPERATOR CARD**

The person whose name is on this card is authorized to operate an evidential breath alcohol instrument for the determination of the alcoholic content of breath in Missouri.

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

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