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By Tracy Crews at 1:05 pm, Nov 28, 2022



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 80-007511	LOCATION OF INSTRUMENT KANSAS CITY POLICE	DATE OF INSPECTION 11/11/2022	TIME OF INSPECTION 18:48
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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	18:50	DRY	33321080A3	01/05/2024
Cal Check	0.080	18:51	SIM TEMPERATURE	SIM SERIAL NUMBER	SIM CERTIFICATE EXPIRATION
Air Blank	0.000	18:51	N/A	N/A	N/A
Cal Check	0.079	18:52	STANDARD VALUE	STANDARD SUPPLIER	
Air Blank	0.000	18:52	0.080	CMI INC	
Cal Check	0.080	18:52	CALIBRATION CHECK RESULT 1		
Air Blank	0.000	18:52	0.080		
Cal Check	0.080	18:52	CALIBRATION CHECK RESULT 2		
Air Blank	0.000	18:53	0.079		
<b>Pass</b>			CALIBRATION CHECK RESULT 3		
			0.080		
			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	18:54
RAM Test	Pass		Subject Test	RFI*	18:54
EEPROM Checksum Test	Pass		Air Blank	0.000	18:54
Real Time Clock Test	Pass		*RFI Detect		
DSP Test	Pass				
Analytical Stability Test	Pass				
Modem Test	Pass				
Temperature Regulation Test	Pass				
<b>Pass</b>			<b>Pass</b>		

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 & CERTIFIED

INSPECTING OFFICER

SIGNATURE

PRINT NAME  
WADE ROBINSON

TYPE II PERMIT NUMBER  
210266

EXPIRATION DATE  
11/18/2023

TELEPHONE NUMBER  
8164828141



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

### Certificate of Analysis

**Certificate ID:** 14496  
**Part #:** BAC105L080T  
**Cylinder Size:** 105L  
**Lot Number:** 33321080A3  
**Expiration:** 1/5/2024

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

**Contents:** 105 Liters @ 1000 psig 70°F (21°C)

Component	Reported Concentration:	Analytical Accuracy (U, k=2):	Analytical Method:	Distributed by:
Ethanol	288 ppm	±7.8-89.2 BAC(g/210L) [±2 ppm]	NDIR	CMI Inc.
Nitrogen	Balance			316 East Ninth Street Owensboro, KY 42303 Phone 866-833-0690 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).

Specialty Gas Lab Tech  
  
 Issuance Date: 01-04-2022



The information on this certificate was obtained using equipment and standards outside of producing analytical results, and only apply to the items certified on this certificate. ILMO Products Company makes no warranty or representation as to the accuracy of the information provided for any particular purpose. The information is as the sole discretion and risk of the user. Liability shall be limited to established replacement cost of the material or service.

ISO/IEC 17025:2017 Accredited Laboratory



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



## PERMIT TYPE II

**WADE ROBINSON**

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 11/18/2021

NUMBER 210266

EXPIRES 11/18/2023

MO 988-0771 (6-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (RS-10)

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

**INSTRUMENT OPERATOR CARD**

The named operator is hereby authorized to operate the named instrument for the determination of the alcoholic content in breath form of expired air in Missouri.

Operator: ROBINSON, WADE  
 Date Issued: 11/18/2021 Date Expires: 11/18/2023