



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
STATE PUBLIC HEALTH LABORATORY

**CMI INTOXILYZER 8000 MAINTENANCE REPORT**

SFA

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 80-007513	LOCATION OF INSTRUMENT KANSAS CITY POLICE	DATE OF INSPECTION 04/15/2022	TIME OF INSPECTION 01:21
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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	01:23	DRY	14020080A2	07/05/2022
Cal Check	0.080	01:23	SIM TEMPERATURE	SIM SERIAL NUMBER	SIM CERTIFICATE EXPIRATION
Air Blank	0.000	01:24	N/A	N/A	N/A
Cal Check	0.081	01:24	STANDARD VALUE	STANDARD SUPPLIER	
Air Blank	0.000	01:25	0.080	CMI INC	
Cal Check	0.081	01:25	CALIBRATION CHECK RESULT 1		
Air Blank	0.000	01:26	0.080		
<b>Pass</b>			CALIBRATION CHECK RESULT 2		
			0.081		
			CALIBRATION CHECK RESULT 3		
			0.081		
			MAXIMUM DEVIATION (MUST BE WITHIN 5%)	SPREAD (MUST BE .005 OR LESS)	
			1.2%	0.001	

DIAGNOSTIC TEST RESULTS		RFI TEST RESULTS		
Voltage/Current Test	Pass	Test	g/210L	Time
RAM Test	Pass	Air Blank	0.000	01:26
EEPROM Checksum Test	Pass	Subject Test	RFI*	01:27
Real Time Clock Test	Pass	Air Blank	0.000	01:27
DSP Test	Pass	*RFI Detect		
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	58	1	0	1	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 R. KAIGHEN	
TYPE II PERMIT NUMBER 210227	EXPIRATION DATE 10/06/2023	TELEPHONE NUMBER 8164828190	



7 Eastgate Dr. • P.O. Box 790 • Jacksonville, IL 62451-0790  
217-245-2183 • Fax: 217-243-7634 • www.ilmoproducts.com

### Certificate of Analysis

Certificate ID: 13021  
Part #: BAC105L080T  
Cylinder Size: 105L  
Lot Number: 1402080A2  
Expiration: 7/5/2022

0.080 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, L=2):	Analytical Method:
Ethanol	288 ppm	±1.6 @ 95% (6.23@)	NDIR
Nitrogen	Balance	[5-2 ppm]	

Distributed by:  
CMI Inc.  
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. GNM015026 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  
*[Signature]*

06-15-2020  
Issuance Date



The information within this certificate was obtained using appropriate and accurate methods of producing analytical results according to ASTM and good practice for the determination of the certificate. ILMO Products Company makes no warranty or representation as to the suitability of the use of any information contained herein for any purpose. The information can be used at the sole discretion and risk of the user. Liability shall be limited to established representation contained in this certificate or service.

ISO/IEC 17025:2017 Accredited Laboratory



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

**PERMIT**  
TYPE II

**RYAN KAIGHEN**

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 10/6/2021

NUMBER 210227

EXPIRES 10/6/2023

MO 880-071 (6-10)

*[Signature]*  
DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

*[Signature]*  
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LS-04 (06-10)

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

**INSTRUMENT OPERATOR CARD**

The instrument card operator is authorized to operate an evidential breath alcohol instrument for the determination of the alcoholic content of breath from a sample of expired air.

Operator: KAIGHEN, RYAN  
Permit No. 210227  
Date Issued 10/06/2021 Date Expires 10/06/2023

