



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 80-007513	LOCATION OF INSTRUMENT KANSAS CITY POLICE	DATE OF INSPECTION 07/08/2022	TIME OF INSPECTION 21:03
---------------------------------------	--	----------------------------------	-----------------------------

CALIBRATION CHECK RESULTS			CALIBRATION CHECK SUMMARY		
Test	g/210L	Time	STANDARD TYPE DRY	STANDARD LOT # 33321080A3	STANDARD EXPIRATION DATE 01/05/2024
Air Blank	0.000	21:05	SIM TEMPERATURE N/A	SIM SERIAL NUMBER N/A	SIM CERTIFICATE EXPIRATION N/A
Cal Check	0.078	21:05	STANDARD VALUE 0.080	STANDARD SUPPLIER CMI INC	
Air Blank	0.000	21:06	CALIBRATION CHECK RESULT 1 0.078		
Cal Check	0.079	21:06	CALIBRATION CHECK RESULT 2 0.079		
Air Blank	0.000	21:07	CALIBRATION CHECK RESULT 3 0.079		
Cal Check	0.079	21:07	MAXIMUM DEVIATION (MUST BE WITHIN 5%) 2.5%		
Air Blank	0.000	21:08	SPREAD (MUST BE .005 OR LESS) 0.001		

Pass

DIAGNOSTIC TEST RESULTS			RFI TEST RESULTS		
Voltage/Current Test	Pass		Test	g/210L	Time
RAM Test	Pass		Air Blank	0.000	21:08
EEPROM Checksum Test	Pass		Subject Test	RFI*	21:08
Real Time Clock Test	Pass		Air Blank	0.000	21:09
DSP Test	Pass		*RFI Detect		
Analytical Stability Test	Pass				
Modem Test	Pass				
Temperature Regulation Test	Pass				

Pass

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	0	2	4

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).

NONE

INSPECTING OFFICER

SIGNATURE 	PRINT NAME WADE ROBINSON
---------------	-----------------------------

TYPE II PERMIT NUMBER 210266	EXPIRATION DATE 11/18/2023	TELEPHONE NUMBER 8164828141
---------------------------------	-------------------------------	--------------------------------



7 Eastgate Dr. • P.O. Box 790 • Jackson, MO 64301 • 62651-0790
217-245-2183 • Fax: 217-243-7634 • www.ilmo-products.com



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



PERMIT TYPE II

WADE ROBINSON

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

Certificate of Analysis

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	208 ppm	+/- 0.002 BAC (G/218L)	NDIR	CMI Inc.
Nitrogen	Balance	[5.2 ppm]		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).

Spillman
Specialty Gas Lab Tech

01-04-2022
Issuance Date



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 98-071 (8-10)

Laura A. Day
DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Donald A. Robinson
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES
UMB4 (88-10)

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

This instrument operator is authorized to operate an instrument which is used for the determination of the alcoholic content of breath from a sample of expired air in Missouri.
Operator: **ROBINSON, WADE**
Permit No. **210266**
Date Issued: **11/18/2021** Date Expires: **11/18/2023**