



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 09/10/2022	TIME OF INSPECTION 15:19
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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	15:20	DRY	33321080A3	01/05/2024
Cal Check	0.079	15:21	SIM TEMPERATURE	SIM SERIAL NUMBER	SIM CERTIFICATE EXPIRATION
Air Blank	0.000	15:21	N/A	N/A	N/A
Cal Check	0.078	15:21	STANDARD VALUE	STANDARD SUPPLIER	
Air Blank	0.000	15:22	0.080	CMI INC	
Cal Check	0.079	15:22	CALIBRATION CHECK RESULT 1		
Air Blank	0.000	15:23	0.079		
Pass			CALIBRATION CHECK RESULT 2		
			0.078		
			CALIBRATION CHECK RESULT 3		
			0.079		
			MAXIMUM DEVIATION (MUST BE WITHIN 6%)	SPREAD (MUST BE .005 OR LESS)	
			2.5%	0.001	

DIAGNOSTIC TEST RESULTS			RFI TEST RESULTS		
			Test	g/210L	Time
Voltage/Current Test	Pass		Air Blank	0.000	15:23
RAM Test	Pass		Subject Test	RFI*	15:24
EEPROM Checksum Test	Pass		Air Blank	0.000	15:25
Real Time Clock Test	Pass		*RFI Detect		
DSP Test	Pass		Pass		
Analytical Stability Test	Pass				
Modem Test	Pass				
Temperature Regulation Test	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	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).

INSTRUMENT TESTED AND CERTIFIED. NO CHANGES

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 • Jacksonville, IL 62651-0790
217-245-2183 • Fax: 217-243-7634 • www.ilmoproducts.com

Certificate of Analysis

Certificate ID: 14496
Part #: BAC1051080T
Cylinder Size: 105L
Lot Number: 33321080A3
Expiration: 1/5/2024

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

Component	Reported Concentration:	Accuracy (U, L=J)	Analytical Method:
Ethanol	288 ppm	±0.002 BAC(g/20L)	NDR
Nitrogen	Balance	[±2 ppm]	

Distributed by:
CMI Inc.
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
[Signature]

01-04-2022
Issuance Date



ISO/IEC 17025:2017 Accredited Laboratory

The information on this certificate was obtained using equipment and analytical methods acceptable to NIST and apply only to the items
described 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 is at the sole discretion and risk of the user. Liability shall be limited to established replacement cost of the material or service.



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 880-071 (6-10)

[Signature]
DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

[Signature]
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

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

INSTRUMENT OPERATOR CARD

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

Operator: **ROBINSON, WADE**
Permit No: **210266**
Date Issued: **11/18/2021** Date Expires: **11/18/2023**

