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By Tracy Crews at 2:25 pm, Jan 27, 2023



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
STATE PUBLIC HEALTH LABORATORY
CMI INTOXILYZER 8000 MAINTENANCE REPORT

SPD

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 10/20/2022	TIME OF INSPECTION 00:49
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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	00:50	DRY	33321080A3	01/05/2024
Cal Check	0.079	00:51	SIM TEMPERATURE	SIM SERIAL NUMBER	SIM CERTIFICATE EXPIRATION
Air Blank	0.000	00:51	N/A	N/A	N/A
Cal Check	0.079	00:52	STANDARD VALUE	STANDARD SUPPLIER	
Air Blank	0.000	00:52	0.080	CMI INC	
Cal Check	0.079	00:52	CALIBRATION CHECK RESULT 1		
Air Blank	0.000	00:52	0.079		
Cal Check	0.079	00:52	CALIBRATION CHECK RESULT 2		
Air Blank	0.000	00:53	0.079		
Pass			CALIBRATION CHECK RESULT 3		
			0.079		
			MAXIMUM DEVIATION (MUST BE WITHIN 5%)	SPREAD (MUST BE .005 OR LESS)	
			1.2%	0.000	

DIAGNOSTIC TEST RESULTS			RFI TEST RESULTS		
			Test	g/210L	Time
Voltage/Current Test		Pass	Air Blank	0.000	00:54
RAM Test		Pass	Subject Test	RFI*	00:54
EEPROM Checksum Test		Pass	Air Blank	0.000	00:54
Real Time Clock Test		Pass	*RFI Detect		
DSP Test		Pass			
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	0	0	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 & 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 62651-0790
 217-245-2183 • Fax: 217-243-7634 • www.ilmo-products.com

Certificate of Analysis

Certificate ID: 14496
Part #: BAC105L088T
Cylinder Size: 165L
Lot Number: 33321080A3
Expiration: 1/5/2024

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

Component	Reported Concentration:	Analytical Accuracy (U, L*2):	Analytical Method:
Ethanol	288 ppm	+/- 8.882 BAC (6/21.94)	NDIR
Nitrogen	Balance	(5.2 ppm)	

Distributed by:
 CMJ 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. GN0015026 Lot No. 050319E11

Adrian
 Specialty Gas Lab Tech

G. Hoff

01-04-2022
 Issuance Date



The information on this certificate was obtained using equipment and methods of production and is subject to the terms and conditions of the certificate. ILMO Products Company makes no warranty or representation as to the suitability of the use of the information for any purpose. The information is as at the date of issuance and is subject to change without notice. Liability shall be limited to established requirements, cost of lost material 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 210727

EXPIRES 10/6/2023

MO 580.071 (6-10)

Laura A. Dwyer
 DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

David A. Keuning
 DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (R6-10)

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

INSTRUMENT OPERATOR CARD

The actual methods and instrument used for the determination of the alcoholic content of breath from a sample of expired air in Missouri.

Operator: KAIGHEN, RYAN
 Permit No. 210727
 Date Issued: 10/06/2021
 Date Expires: 10/06/2023