



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

EPD

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 80-007514	LOCATION OF INSTRUMENT KANSAS CITY POLICE	DATE OF INSPECTION 04/14/2022	TIME OF INSPECTION 23:31
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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	23:35	DRY	14020080A2	07/05/2022
Cal Check	0.080	23:36	SIM TEMPERATURE	SIM SERIAL NUMBER	SIM CERTIFICATE EXPIRATION
Air Blank	0.000	23:36	N/A	N/A	N/A
Cal Check	0.080	23:36	STANDARD VALUE	STANDARD SUPPLIER	
Air Blank	0.000	23:37	0.080	CMI INC	
Cal Check	0.080	23:37	CALIBRATION CHECK RESULT 1		
Air Blank	0.000	23:38	0.080		
Cal Check	0.080	23:37	CALIBRATION CHECK RESULT 2		
Air Blank	0.000	23:38	0.080		
Pass			CALIBRATION CHECK RESULT 3		
			0.080		
			MAXIMUM DEVIATION (MUST BE WITHIN 5%)	SPREAD (MUST BE .005 OR LESS)	
			0.0%	0.000	

DIAGNOSTIC TEST RESULTS			RFI TEST RESULTS		
			Test	g/210L	Time
Voltage/Current Test	Pass		Air Blank	0.000	23:38
RAM Test	Pass		Subject Test	RFI*	23:39
EEPROM Checksum Test	Pass		Air Blank	0.000	23:39
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	20	1	2	3	6	

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 62851-0790
 217-245-2183 • Fax: 217-245-7634 • www.ilmoproducts.com



Certificate of Analysis

Certificate ID: 13021
 Part #: BAC105L080T
 Cylinder Size: 105L
 Lot Number: 14020880A2
 Expiration: 7/5/2022

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

Component	Reported Concentration	Accuracy (U, k=2)	Analytical Method	Distributed by
Ethanol	288 ppm	+/- 0.003 BAC(6/288)	NDR	CHI, Inc. 316 East Ninth Street Owensboro, KY 42303 Phone 866-835-0690 www.alcoholtest.com
Nitrogen	Balance	[5.2 ppm]		

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]

06-15-2020
 Issuance Date



The calibration results within this certificate were obtained using equipment and technical skills of producing analytical results traceable to NIST, and apply only to the item specified. This information is not to be used for any other purpose or representation as to the suitability of the use of any instrument provided for any purpose. The information is a confidential document and its use, copying, and its release to unauthorized reference costs of the manufacturer are prohibited.

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, INTOXLYZER 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 506.111 through 306.119 RSMo.

DATE 10/6/2021
 NUMBER 210227
 EXPIRES 10/6/2023
 MO 580-0771 (6-10)

[Signature]
 DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

[Signature]
 DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES
 LAB-4 (9-10)

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

INSTRUMENT OPERATOR CARD

The instrument cardholder is authorized to operate an Intoxilyzer breathalyzer in Missouri for the determination of the alcoholic content of human breath or expired air.

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