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By Tracy Crews at 7:37 am, Jul 20, 2022



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 80-007514	LOCATION OF INSTRUMENT KANSAS CITY POLICE	DATE OF INSPECTION 07/08/2022	TIME OF INSPECTION 19:57
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CALIBRATION CHECK RESULTS		
Test	g/210L	Time
Air Blank	0.000	20:08
Cal Check	0.078	20:09
Air Blank	0.000	20:09
Cal Check	0.078	20:09
Air Blank	0.000	20:10
Cal Check	0.078	20:10
Air Blank	0.000	20:11

Pass

CALIBRATION CHECK SUMMARY		
STANDARD TYPE DRY	STANDARD LOT # 33321080A3	STANDARD EXPIRATION DATE 01/05/2024
SIM TEMPERATURE N/A	SIM SERIAL NUMBER N/A	SIM CERTIFICATE EXPIRATION N/A
STANDARD VALUE 0.080	STANDARD SUPPLIER CMI INC	
CALIBRATION CHECK RESULT 1 0.078		
CALIBRATION CHECK RESULT 2 0.078		
CALIBRATION CHECK RESULT 3 0.078		
MAXIMUM DEVIATION (MUST BE WITHIN 5%) 2.5%		SPREAD (MUST BE .005 OR LESS) 0.000

DIAGNOSTIC TEST RESULTS	
Voltage/Current Test	Pass
RAM Test	Pass
EEPROM Checksum Test	Pass
Real Time Clock Test	Pass
DSP Test	Pass
Analytical Stability Test	Pass
Modem Test	Pass
Temperature Regulation Test	Pass

Pass

RFI TEST RESULTS		
Test	g/210L	Time
Air Blank	0.000	20:11
Subject Test	RFI*	20:11
Air Blank	0.000	20:12
*RFI Detect		

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	1	2	7	

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	



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217-245-2183 • Fax: 217-243-7634 • www.ilmoproducts.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	Method:	Distributed by:
Ethanol	288 ppm	+/-0.002 BAC(6/2181)	NDIR	CM1 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

Adrian G. Hoff
Specialty Gas Lab Tech

01-04-2022
Issuance Date



ISO/IEC 17025:2017 Accredited Laboratory

The information on this certificate was obtained using equipment and standards capable of producing analytical results traceable to NIST, and apply only to the items analyzed 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 to be used at the sole discretion and risk of the user. Liability shall be limited to established replacement cost of the material or service.

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 880-0771 (8-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY:

Lucia A. Nag

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

Donald A. Harrison

LOBA (RS-10)

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

INSTRUMENT OPERATOR CARD

The named certificatee authorizes to operate an evidential breath alcohol analyzer for the determination of the alcoholic content of breath from a subject as follows:

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