



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. DATE OF INSPECTION TIME OF INSPECTION INSTRUMENT SERIAL NUMBER LOCATION OF INSTRUMENT 05/08/2024 CARTHAGE POLICE 18:01 80-005855 CALIBRATION CHECK SUMMARY **CALIBRATION CHECK RESULTS** STANDARD EXPIRATION DATE STANDARD TYPE STANDARD LOT # 08/11/2024 AG222301 DRY Time q/210L Test SIM CERTIFICATE EXPIRATION SIM TEMPERATURE SIM SERIAL NUMBER N/AN/A N/A18:02 Air Blank 0.000 STANDARD VALUE STANDARD SUPPLIER Cal Check 0.099 18:03 INTOXIMETERS 0.100 Air Blank 0.000 18:03 CALIBRATION CHECK RESULT 1 Cal Check 0.098 18:03 0.099 18:04 0.000 Air Blank CALIBRATION CHECK RESULT 2 18:04 Cal Check 0.099 0.098 Air Blank 0.000 18:05 CALIBRATION CHECK RESULT 3 0.099 ass SPREAD (MUST BE .005 OR LESS) MAXIMUM DEVIATION (MUST BE WITHIN 5%) 0.001 2.0% RFI TEST RESULTS DIAGNOSTIC TEST RESULTS g/210L Time Test Voltage/Current Test Pass Pass RAM Test 0.000 18:05 EEPROM Checksum Test Pass Air Blank Subject Test RFI* 18:06 Real Time Clock Test Pass 0.000 18:06 Air Blank DSP Test Pass Analytical Stability Test Pass *RFI Detect Modem Test Pass Temperature Regulation Test Pass NUMBER OF REFUSALS AND SUBJECT BREATH TESTS IN EACH RANGE SINCE LAST MAINTENANCE REPORT OVER 19 15- 19 REFUSALS 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).

INSPECTING OFFICER						
SIGNATURE		PRINT NAME				
Brady 200		BRADY	LUCE			
TYPE II PERMIT NUMBER	EXPIRATION DATE			TELEPHONE NUMBER		
220135	05/11/202	24		4172377200		



Airgas USA LLC (LAB) 3500 Bernard Street St. Louis, Mo. 63103 Ph: (314) 533-3100 Fax: (314) 533-7328

Certificate of Analysis

Customer Name

Exclusive Supplier Intoximeters, Inc. 2081 Craig Road St. Louis, Mo 63146 Test Date: 16-Aug-2022

Lot # AG222301 Model 108

Exp Date 11-Aug-2024 Cyl. Type 108 Component Ethanol Certified Concentration 0.100 ± 2% BrAC (260 ppm)

Nitrogen

Certification Traceable to N.I.S.T. RGM and to CRM Ethanol Standards:

RGM Serial No.	Concentration	RGM Serial No.	Concentration
EB0010581	391.8 ppm	EB0010603	392.5 ppm
EB0010570	259.8 ppm	EB0010559	258.9 ppm
EB0010285	209.0 ppm	EB0010562	104.2 ppm
EB0010561	103.7 ppm	EB0010579	52.94 ppm
EB0010681	52.22 ppm		

 CRM Serial No.
 Concentration
 CRM Serial No.
 Concentration

 CC727481
 800.0 ppm
 CC727493
 390.0 ppm

 CC727496
 253.0 ppm
 CC727498
 150.0 ppm

Analytical Method: NDIR

Digitally signed by:Quality Control Reason:Dry gas standard certification of analysis Location:Airgas USA LLC (Lab) Date:08.18.2022 21:07

Approved for Release:

Rod Marsala

ISO 17025:2017 A2LA accredited. Certificate Number 3082.06 ISO 17034:2016 A2LA accredited. Certificate Number 3082.07



STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES BREATH ALCOHOL PROGRAM



BRADY LUCE

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

INTOXILYZER 8000

for the determination of the alcoholic content of blood from a sa 577.020 through 577.041, RSMo and 306.111 through 306.119	mple of expired air. Permit issued under the provisions of sections PRSMo. Laura a Day
DATE5/11/2022	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 220135	Davla J. Nichelson
EXPIRES 5/11/2024	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES LAB-4 (R6-10)

MO 580-0771 (6-10)



The named cardholder is authorized to operate an evidential breath alcohol instrument for the determination of the alcoholic content in breath form of expired air in Missouri.

LUCE, BRADY Operator

Permit No 220135

Date Issued 5/11/2022 Date Expires 5/11/2024

