### RECEIVED

By Tracy Crews at 3:19 pm, Oct 11, 2024



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 LOCATION OF INSTRUMENT DATE OF INSPECTION TIME OF INSPECTION 80-007511 KANSAS CITY POLICE 10/01/2024 20:37 CALIBRATION CHECK RESULTS **CALIBRATION CHECK SUMMARY** STANDARD EXPIRATION DATE STANDARD TYPE STANDARD LOT # 14323080A4 06/05/2025 DRY Test g/210L Time SIM TEMPERATURE SIM SERIAL NUMBER SIM CERTIFICATE EXPIRATION N/AN/A N/AAir Blank 0.000 20:38 STANDARD VALUE STANDARD SUPPLIER Cal Check 0.080 20:39 0.080 CMI INC Air Blank 0.000 20:39 CALIBRATION CHECK RESULT 1 Cal Check 0.081 20:40 0.080 Air Blank 0.000 20:40 Cal Check CALIBRATION CHECK RESULT 2 20:40 0.080 0.081 Air Blank 0.000 20:41 CALIBRATION CHECK RESULT 3 0.080 MAXIMUM DEVIATION (MUST BE WITHIN 5%) SPREAD (MUST BE .005 OR LESS) 0.001 1 - 28 **DIAGNOSTIC TEST RESULTS RFI TEST RESULTS** Voltage/Current Test Pass Test g/210L Time RAM Test Pass EEPROM Checksum Test Pass Air Blank 0.000 20:41 Real Time Clock Test Pass Subject Test RFI\* 20:42 DSP Test Pass Air Blank 0.000 20:42 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 REFUSALS 15 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 # 100 Z		PRINT NAME	
		FRANK DeMARCO	
	EXPIRATION DATE		TELEPHONE NUMBER
240076	04/02/2026		8167665068





217-245-2183 • Fax: 217-243-7634 • www.llmoproducts.com 7 Eastgate Dr. • P.O. Box 790 • Jacksonville, IL 62651-0790

## Certificate of Analysis

Certificate ID: Expiration: Lot Number: Cylinder Size: Part # 15762 105L 6/5/2025 14323080A4 BAC105L080T

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

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

Concentration: Accuracy (U, k=2): Analytical Method:

208 ppm +/-0.002 BAC(G/21eL) NDIR [5.2 ppm]

Ethanol

Distributed by:

www.alcohoitest.com Owensboro, KY 42303 Phone 866-835-0690 CMI Inc. 316 East Ninth Street

\*Traceable to: Certified Reference Material - 261.0 µmol/mol Ethanol in Nitrogen - Serial No. ND7017 Lot No. 080722EZ

Store in dry area, away from sources of hear, ignition and direct sunlight. Do not allow storage area to exceed 52 °C (125 °F).

06-61-2023 Issuance Date

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Shamorie

ISO/IEC 17025:2017 Accredited Laboratory



# STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES BREATH ALCOHOL PROGRAM



### FRANK DeMARCO PERMIT TYPE |

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

for the determination of the elecholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 505.111 through 505.119 RSMo. ALCO-SENSOR IV WITH PRINTER, INTOXILYZER 8000

DATE 4/2/2024

EXPIRES 4/2/2026 NUMBER 240076

MO 580-0771 (6-10)

DIBECTOR OF STATE PUBLICHEALTH LABORATORY Dones S. Mcasser

M. L. Mussus

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

(JAB-4, (R6-10)

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

