



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
STATE PUBLIC HEALTH LABORATORY

**RECEIVED**

By Tracy Crews at 8:41 am, Aug 15, 2024

**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 07/31/2024	TIME OF INSPECTION 22:02
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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	22:04	DRY	14323080A4	06/05/2025
Cal Check	0.080	22:05	SIM TEMPERATURE	SIM SERIAL NUMBER	SIM CERTIFICATE EXPIRATION
Air Blank	0.000	22:05	N/A	N/A	N/A
Cal Check	0.080	22:05	STANDARD VALUE	STANDARD SUPPLIER	
Air Blank	0.000	22:06	0.080	CMI INC	
Cal Check	0.079	22:06	CALIBRATION CHECK RESULT 1		
Air Blank	0.000	22:07	0.080		
<b>Pass</b>			CALIBRATION CHECK RESULT 2		
			0.080		
			CALIBRATION CHECK RESULT 3		
			0.079		
			MAXIMUM DEVIATION (MUST BE WITHIN 5%)	SPREAD (MUST BE .005 OR LESS)	
			1.2%	0.001	

DIAGNOSTIC TEST RESULTS			RFI TEST RESULTS		
Test	Result		Test	g/210L	Time
Voltage/Current Test	Pass		Air Blank	0.000	22:07
RAM Test	Pass		Subject Test	RFI*	22:08
EEPROM Checksum Test	Pass		Air Blank	0.000	22:08
Real Time Clock Test	Pass		*RFI Detect		
DSP Test	Pass		<b>Pass</b>		
Analytical Stability Test	Pass				
Modem Test	Pass				
Temperature Regulation Test	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	6	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 AND CERTIFIED

INSPECTING OFFICER			
SIGNATURE 		PRINT NAME WADE ROBINSON	
TYPE II PERMIT NUMBER 230228	EXPIRATION DATE 10/23/2025	TELEPHONE NUMBER 8164828141	



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



**PERMIT  
TYPE II**

**WADE ROBINSON**

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 10/23/2023

NUMBER 230228

EXPIRES 10/23/2025

MO 880-0771 (8-10)

*Mike Mason*  
DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

*Dawn J. Robinson*  
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (88-10)

STATE OF MISSOURI  
DEPARTMENT OF HEALTH AND SENIOR SERVICES  
BREATH ALCOHOL PROGRAM  
**INSTRUMENT OPERATOR CARD**

The named contributor is authorized to use the instrument for the determination of the alcoholic content in human form of expired air in Missouri.

Operator No. ROBINSON, WADE  
Date Issued 10/23/2023 Date Expires 10/23/2025




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

**Certificate of Analysis**

Certificate ID: 15762  
Part #: BAC105L080T  
Cylinder Size: 105L  
Lot Number: 14323880A4  
Expiration: 6/5/2025

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 (U, k=2)	Analytical Method
Ethanol	288 ppm	±0.002 BAC(0.210) (±0.1 ppm)	NDIR
Nitrogen	Balance		

Distributed by:  
CMI Inc.  
316 East Ninth Street  
Owensboro, KY 42303  
Phone 866-835-0890  
www.alcoholtest.com

\*Traceable to:  
Certified Reference Material - 261.0 µmol/mol  
Ethanol in Nitrogen - Serial No. ND7017 Lot No. 080722E2

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

*Spiller*  
Specialty Gas Lab Tech

06-01-2023  
Issuance Date



The calibration results within this certificate were achieved at the facility listed above using equipment and procedures capable of producing analytical results traceable to NIST, and apply to the specific instrument and cylinder identified above. The information is for informational purposes only and does not constitute a warranty for any particular purpose. The information is not to be used for legal or regulatory purposes. Liability shall be limited to established replacement cost of this material or system. This certificate applies only to the same classified and shall not be retroactively applied from the issuing facility.

ISO/IEC 17025:2017 Accredited Laboratory