

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

CMI INTOXILYZER 8000 MAINTENANCE REPORT

REPORT #2

STRUMENT SERIAL NUMBER 80-005829	JASPER CO. S		02/0	PECTION 04/2025	TIME OF INSPECTION 07:22	
CALIBRATION CHECK	CALIBRATION CHECK SUMMARY					
			STANDARD TYPE	STANDARD LOT#		NDARD EXPIRATION DATE
Test	g/210L	Time	DRY	AG3215		08/03/2025
	· 		SIM TEMPERATURE	SIM SERIAL NUMBE	J.	CERTIFICATE EXPIRATION
Air Blank	0.000	07:24	N/A	N/A		A/N
Cal Check	0.080	07:24	STANDARD VALUE	STANDARD SUPPLI		
Air Blank	0.000	07:25	0.080		METERS	
Cal Check	0.079	07:25	CALIBRATION CHECK R			
Air Blank	0.000	07:25		0.0	080	
Cal Check	0.079	07:26	CALIBRATION CHECK RESULT 2			
Air Blank	0.000	07:26		0.0	79	
			CALIBRATION CHECK R			
				0.0		
F	ass		MAXIMUM DEVIATION (MUST BE WITHIN 5%) SPREAD (MUST BE .005 OR LESS)			
	<u> </u>		1.2%		0.001	·
DIAGNOSTIC TEST RES	BULTS		RFI TEST RESI	JLTS		
Voltage/Curre	nt Test	Dage	Test		g/210L	Time
Voltage/Current Test Pass RAM Test Pass		1686		9/2100	111110	
		Air Blan		0.000	07:27	
EEPROM Checksum Test Pass Real Time Clock Test Pass			Subject 5		RFI*	07:27
DSP Test Pass			Air Blan		0.000	07:27
Analytical Stability Test Pass			KII DIAM	`	0.000	07.27
Modem Test Pass			*RFI Dete	act		
Temperature Regulation Test Pass			Kri Dece	500		
	0942401011 1050	rabb				
_				[
	ass	:		Pa	00	
	a 33			Га	33	
	AND SUBJECT BREAT	H TESTS IN F	ACH RANGE SI			REPORT
FUSALS .0004	4 .0509		.1014	.1519		OVER .19
0	0		2		2	0

and within established limits (use other side if necessary).

INSPECTING OFFICER			
SIGNATURE	1,	PRINT NAME	
Det. Ola a. CZ	#249	CHRISTOPHER	CALVIN
TYPE II PERMIT NUMBER	EXPIRATION DATE		TELEPHONE NUMBER
240042	02/08/202	26	4173588177



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: 10-Aug-2023

Lot # AG321504 Model 108

Exp Date

Cyl. Type

Component

Certified Concentration

3-Aug-2025

108

Ethanol Nitrogen 0.080 ± 0.002 BrAC (208.4 ppm)

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 CC727496 800.0 ppm 253.0 ppm

CC727493 CC727498

390.0 ppm 150.0 ppm

Analytical Method: NDIR

Digitally signed by:Quality Control Reason:Dry gas standard certification of analysis Location:Airgas USA LLC (Lab) Date:08.10.2023 13:35

Approved for Release:

Yusef Woods

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



PERMIT TYPE II

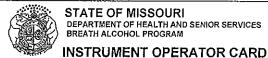
CHRISTOPHER CALVIN

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.

DATE2/8/2024	Mile Massur
· ··· -	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 240042	
EXPIRES 2/8/2026	Daven J. Michaelson
	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES
IO 580-0771 (6-10)	LAS-4 (BS-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

Operator Permit No CALVIN, CHRISTOPHER

240042

Date Expires 2/8/2026

