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By Tracy Crews at 7:39 am, Jan 05, 2024



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

INTOX DMT MAINTENANCE REPORT

REPORT #1

Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 35 days).
Complete this report whenever the instrument is serviced or repaired and whenever it is placed into service.
Retain the original and send a copy within 15 days to the Breath Alcohol Program, DHSS.

INTOX DMT SN 500203	NAME OF AGENCY Missouri State Highway Patrol	DATE OF INSPECTION 01/02/2024
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LOCATION OF INSTRUMENT (STREET AND CITY) 2920 N. Shamrock Rd, Jefferson City	TIME OF INSPECTION 10:59:04
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CHECKLIST: Place a mark in the box by each item if found to be satisfactory or is operating within established limits. (Write in observed values where determined). Unmarked items must be corrected before using instrument.

DIAGNOSTIC RECORD

DATE AND TIME 01/02/2024 10:59:07 DETECTOR

PROGRAM FILTER 1

SAMPLE CHAMBER 48.7°C FILTER 2

BREATH TUBE 47.9°C FILTER 3

PUMP INTERNAL STANDARD

BREATH ANALYZER ACCURACY STANDARDS

SIMULATOR STANDARD COMPRESSED ETHANOL-GAS MIXTURE

STANDARD SUPPLIER INTOXIMETERS LOT # AG320502 EXP. DATE 07/24/2025

SIMULATOR TEMP (34°C ± 0.2°C) _____ SIM. SN _____ SIM. NIST EXP DATE _____

CALIBRATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)
Run three tests using a standard. All three tests must be within ±5% of the standard value and must have a spread of .005 or less. Mark the box corresponding to the standard being used.

0.10% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE

0.08% STANDARD - MUST READ BETWEEN 0.076% AND 0.084% INCLUSIVE

0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE

TEST 1: 0.098 TEST 2: 0.098 TEST 3: 0.097

PERFORM R.F.I. TEST

INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:

REFUSALS: 0 0-.04: 2 .05-.09: 0 .10-.14: 0 .15-.19: 0 OVER .19: 4

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)

Detector Block cleaned and Instrument calibrated. Digital pots mod performed.

INSPECTING OFFICER

SIGNATURE PRINT FULL NAME
JIMMY L CLEVELAND

TYPE II PERMIT NUMBER 230082 EXPIRATION DATE 05/03/2025 TELEPHONE NUMBER 573-751-4722

RETURN COMPLETED REPORT TO THE Breath Alcohol Program, Missouri Department of Health and Senior Services
by mail, fax, or email

CALIBRATION FACTORS

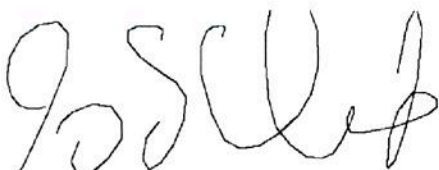
Missouri State Highway Patrol
INTOX dmt: 500203

Date: 12/28/2023
Time: 11:14:02

OPERATOR NAME:
JIMMY L CLEVELAND
PERMIT NUMBER: 230082
EXPIRATION DATE: 05/03/2025

LOT #: 23390
SUPPLIER: GUTH
EXPIRATION: 10/17/2025

Ca = 0.1000
ADJ = 0.976721 0.800 <= ADJ < 1.200
b1 = 0.0000 0.0000 <= b1 < 0.0040
b2 = 0.0025 0.0010 <= b2 < 0.0100
b3 = 0.0000 0.0000 <= b3 < 0.0040
Xq = 0.1039 0.0500 <= Xq < 0.2500
a21 = 1.126322 1.050 <= a21 < 1.300
a31 = 0.475300 0.300 <= a31 < 0.800





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: 1-Aug-2023

Lot # AG320502 **Model** 108

Exp Date	Cyl. Type	Component	Certified Concentration
24-Jul-2025	108	Ethanol Nitrogen	0.100 ± 2% BrAC (260 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	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: 08.10.2023 09:48



Approved for Release: _____
 Yusef Woods

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



GUTH LABORATORIES, INC.

590 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **23390** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **October 18, 2023**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.1207%** (w/vol) ethyl alcohol. The expiration date for this lot number is **October 17, 2025** at 11:59 PM.

When used in a calibrated Simulator, operating at $34^{\circ}\text{C} \pm .2^{\circ}\text{C}$, this solution will give a breath alcohol analysis instrument reading of **0.100 g/210L** $\pm 3\%$.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President
GUTH LABORATORIES, INC.

NIST Traceability:

Testing was conducted using Cerilliant Reference Standard lot number FN03072301 whose values are traceable to NIST.

All balances are calibrated annually by an outside agency using NIST traceable weights. Calibration verification is done prior to each use utilizing NIST traceable weights.



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

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**PERMIT
 TYPE II**

JIMMY L. CLEVELAND

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, INTOX DMT

for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of section: 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE 5/3/2023

NUMBER 230082

EXPIRES 5/3/2025

Mike Mason

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Paula J. Nielson

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

LAB-4 (R6-10)

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

INSTRUMENT OPERATOR CARD

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.

Operator CLEVELAND, JIMMY
 Permit No 230082
 Date Issued 5/3/2023 Date Expires 5/3/2025

