

By Tracy Crews at 10:57 am, May 11, 2020



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 Complete this report whenever Retain the original and send a c	the instrument is serviced	or repaired and	whenever it is placed i	ceed 35 days). nto service.	
NAME OF AGENCY 500115 NAME OF AGENCY Missouri State Highway Patrol, Troop B - Zone 6			04/27/2020		
117 S. Market St., Rm #3, Memphis, Scotland CO SO				TIME OF INSPECTION 18:47:01	
CHECKLIST: Place a mark in t values where determined). Unm	he box by each item if four arked items must be corre	nd to be satisfac	tory or is operating wit	thin established limits. (\	Write in observed
☑ DIAGNOSTIC RECORD				A 0 1 4 5 1 5 1 1 A 1	
DATE AND TIME <u>04/27/2020 18:47:03</u> ☑ DETECTOR					
☐ PROGRAM		[2	FILTER 1		
☐ SAMPLE CHAMBER 48.8°C			☑ FILTER 2		
☑ BREATH TUBE 48.1°C		8	☑ FILTER 3		
☑ PUMP		8	INTERNAL STAND	DARD	
BREATH ANALYZER ACCUR	ACY STANDARDS				
☐ SIMULATOR STANDAR	RD	Ø	COMPRESSED ET	THANOL-GAS MIXTUR	Ε
STANDARD SUPPLIER IN	TOXIMETERS	LOT#_ <i>_</i>	AG905203	EXP. DATE _0	2/21/2021
☐ SIMULATOR TEMP (34°C ±	: 0.2°C)	SIMULATO	OR SN	SIMULATOR EXP DA	TE
□ 0.08% STANDARD	x corresponding to the star - MUST READ BETWEE - MUST READ BETWEE - MUST READ BETWEE	andard being use EN 0.095% AND EN 0.076% AND	ed. 0.105% INCLUSIVE 0.084% INCLUSIVE	na maschave a spread	
TEST 1. 0.097 TEST 2: 0.098		0.098		TEST 3: 0.098	
PERFORM R.F.I. TEST					
INDICATE THE NUMBER OF	BREATH TESTS IN THE	E FOLLOWING	RANGES SINCE TH	HE LAST MAINTENAN	NCE REPORT:
REFUSALS 0 004: 0	.0509: (0	1014: 0	.1519: 0	OVER 19:0
LIST ANY NEW PARTS AND DESCRIBE ANY ESTABLISHED LIMITS (USE OTHER SIDE IF I		HAT WAS MADE TO RE	STORE THE INSTRUMENT TO	OPERATE SATISFACTORILY AN	ND WITHIN
Adjusted clock					
INSPECTING OFFICER	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)				
SIGNATURE		F	PRINT FULL NAME BRETT D TAPPEN	NDORF	
TYPE II PERMIT NUMBER 200096		PRATION DATE 2/18/2022	TELEPHONE NUM 660-385-2	BER	
RETURN COMPLETED REPORT TO THE Breath Alcohol Program, MO Department of Health and Senior Services Southeast District Office 2875 James Blvd, Poplar Bluff, MO 63901					



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: 22-Feb-2019

Lot # AG905203 Model 108cacd

Exp. Date 21-Feb-2021 Cyl. Type 108 Component Ethanol Certified Concentration 0.100 ± 2% BrAC (260 ppm)

Nitrogen

Balance

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

RGM Serial No.	Concentration	RGM Serial No.	Concentration
EB0010581	392.1 ppm	EB0010603	393.0 ppm
EB0010570	259.8 ppm	EB0010559	258.2 ppm
EB0010285	208.0 ppm	EB0010595	208.3 ppm
EB0010561	103.6 ppm	EB0010562	104.2 ppm
EB0010681	52.12 ppm	EB0010579	52.81 ppm

 CRM Serial No.
 Concentration
 CRM Serial No.
 Concentration

 CC434668
 800.0 ppm
 0056649
 390.1 ppm

 CC234503
 253.0 ppm
 0056662
 150.2 ppm

Analytical Method:

NDIR

Digitally signed by Quality Centrol Date: 2019-02:27-15-07:54-06:00 Reason: Dry gas standard cent catenic tianalysis Location: Argas USA LLC (Lab.)

Approved for Release:

Rod Marsala

ISO 17025:2005 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

BRETT D TAPPENDORF

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

INTOX DMT

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.

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DATE 2/18/2020	we note
	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 200096	
EXPIRES 2/18/2022	for William
	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

LAB-4 (R6-10)

