RECEIVED

By Tracy Crews at 11:34 am, Mar 23, 2020



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

INTOX DMT MAINTENANCE REPORT

REPORT #1

				ALI OITT #
Complete this report at the time of the regular Complete this report whenever the instrumen Retain the original and send a copy within 15	t is serviced or repaired and	d whenever it is placed	xceed 35 days). into service.	
INTOX DMT SN 500172 NAME OF AGENCY Missouri State Highway Patrol			03/21/2020	
LOCATION OF INSTRUMENT (STREET AND CITY) 200 Main Street, Boonville, Missouri 65233			TIME OF INSPECTION 01:58:12	
CHECKLIST: Place a mark in the box by eac values where determined). Unmarked items n	th item if found to be satisfanust be corrected before us	actory or is operating w	rithin established limits. (Write in observed
☑ DIAGNOSTIC RECORD		and modulion.		
DATE AND TIME 03/21/2020 01:58:	15	☑ DETECTOR		
☑ PROGRAM		☑ FILTER 1		
☑ SAMPLE CHAMBER 48.7°C		☑ FILTER 2		
☐ BREATH TUBE 44.0°C	_	☑ FILTER 3		
☑ PUMP		☑ INTERNAL STAN	DARD	
BREATH ANALYZER ACCURACY STAND	ARDS			
☐ SIMULATOR STANDARD		☐ COMPRESSED E	THANOL-GAS MIXTUR	₹E
☑ STANDARD SUPPLIER INTOXIMETE	RS LOT#_	AG831903	EXP. DATE 1	1/15/2020
☐ SIMULATOR TEMP (34°C ± 0.2°C)		TOR SN	SIMULATOR EXP DA	
□ CALIBRATION CHECK - (ONLY ONE S Run three tests using a standard. All three of .005 or less. Mark the box correspond □ 0.10% STANDARD - MUST REA □ 0.08% STANDARD - MUST REA	ing to the standard being u ND BETWEEN 0.095% AN ND BETWEEN 0.076% AN	ised. D 0.105% INCLUSIVE D 0.084% INCLUSIVE		
TEST 1: 0.101	TEST 2: 0.099		TEST 3: 0.099	
☑ PERFORM R.F.I. TEST				
INDICATE THE NUMBER OF BREATH TE	STS IN THE FOLLOWIN	G RANGES SINCE T	HE LAST MAINTENAN	NCE REPORT:
REFUSALS: 0 004: 1	.0509: 0	.1014: 0	.1519: 0	OVER 19:0
LIST ANY NEW PARTS AND DESCRIBE ANY ALTERATION OR MODIFICATION THAT WAS MADE TO RESTORE THE INSTRUMENT TO OPERATE SATISFACTORILY AND WITHIN Returned to service after maintanence. Tested within DHSS standards				
INSPECTING OFFICER SIGNATURE ANY FLAGSA TYPE II PERMIT NUMBER 290186 RETURN COMPLETED REPORT TO THE	EXPIRATION DATE 08/19/2021 Breath Alcohol Program, Southeast District Office 2875 James Blvd, Poplar	Bluff, MO 63901	MBER 1000	



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: 27-Nov-2018

Lot # AG831903 Model 108cacd

Exp. Date 15-Nov-2020 Cyl. Type

Component

Certified Concentration

108

Ethanol Nitrogen 0.100 ± 2% BrAC (260 ppm)

Balance

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

Serial No.	Concentration	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

Analytical Method:

NDIR

Digitally signed by Quality Control Date: 2018.11.27 10.10:26 -06:00 Reason: Dry gas standard certification of analysis Location: Airgas USA LLC (Lab)

Approved for Release:

Rod Marsala

ISO 17025:2005 A2LA accredited. Certificate Number 3082.06



STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM



PERMIT TYPE II

ANTHONY M RICHERSON

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

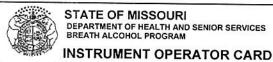
ALCO-SENSOR IV WITH PRINTER, INTOX DMT

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

DATE8/19/2019	wond
	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 290186	
EXPIRES 8/19/2021	for Ulle
110	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

LAB-4 (R6-10)



The named cardholder is authorized to operate an evidential breath alcohol instrument for the determination of the alcoholic content in breath form of expired as in Missouri.

Operator RICHERSON, ANTHONY

Permit No 290186

Date Issued 8/19/2019 Date Expires 8/19/2021

