



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

INTOX DMT MAINTENANCE REPORT

REPORT #1

INTOX DMT MAINTENANCE	REPORT	1121 5111 11	
Complete this report at the time of the regular montl Complete this report whenever the instrument is ser Retain the original and send a copy within 15 days t	rviced or repaired and whenever it is placed		
INTOX DMT SN 500179 NAME OF AGENCY Missouri State H	Highway Patrol	DATE OF INSPECTION 10/01/2020	
LOCATION OF INSTRUMENT (STREET AND CITY) 900 Industrial Park Road, Ava, MO 65608		TIME OF INSPECTION 22:57:23	
CHECKLIST: Place a mark in the box by each item values where determined). Unmarked items must be	n if found to be satisfactory or is operating we corrected before using instrument.	ithin established limits. (Write in observed	
☑ DIAGNOSTIC RECORD			
DATE AND TIME 10/01/2020 22:57:26	□ DETECTOR		
☑ PROGRAM	☐ FILTER 1		
☑ SAMPLE CHAMBER 48.7°C	☐ FILTER 2		
☑ BREATH TUBE_43.3°C	☐ FILTER 3		
☑ PUMP		DARD	
BREATH ANALYZER ACCURACY STANDARD	S		
☐ SIMULATOR STANDARD		THANOL-GAS MIXTURE	
	LOT# <u>AG004403</u>	EXP DATE <u>02/13/2022</u>	
☐ SIMULATOR TEMP (34°C ± 0.2°C)	SIM. SN	SIM. NIST EXP DATE	
□ 0.08% STANDARD - MUST READ BE	o the standard being used. ETWEEN 0.095% AND 0.105% INCLUSIVE ETWEEN 0.076% AND 0.084% INCLUSIVE ETWEEN 0.038% AND 0.042% INCLUSIVE		
TEST 1: 0.100	EST 2: 0.099	TEST 3: 0.100	
☑ PERFORM R.F.I. TEST			
INDICATE THE NUMBER OF BREATH TESTS	IN THE FOLLOWING RANGES SINCE	THE LAST MAINTENANCE REPORT:	
REFUSALS: 0 004: 0 .0	0509: 0 .1014: 0	.1519: 0 OVER .19: 0	
LIST ANY NEW PARTS AND DESCRIBE ANY ALTERATION OR MODIFIC ESTABLISHED LIMITS (USE OTHER SIDE IF NECESSARY)	CATION THAT WAS MADE TO RESTORE THE INSTRUMENT	TO OPERATE SATISFACTORILY AND WITHIN	
INSPECTING OFFICER			
SIGNATURE AND AND	PRINT FULL NAME D J JOHNSON		
TYPE II PERMIT NUMBER TO THE STATE OF THE ST	07/17/2022 TELEPHONE N 417-469		
1	eath Alcohol Program, Missouri Department mail, fax, or email	of Health and Senior Services	



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 ntoximeters, inc. 2081 Craig Road St. Louis, Mo 63146

Test Date: 17-Feb. 020

Lot # AG004403 Model 108cacd

Exp. Date 3-Feb-2022 Cyl. Type 108

Component Ethanol Nitrogen

Certified Concentration 0.100 ± 2% BrAC (2.1) ppm

Balance

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

RGM Serial No. EB9010581 EB9010570 EB0010285 EB0010861 EB0010681

Concentration 392.1 ppm 259.8 ppm 208.0 ppm 103.6 ppm 52.12 ppm

RGM Serial No. EB0010603 EB0010559 EB0010595 EB0010582 EB0010579

Concentration 393.0 (4.6) 258.2 0001 208.3 (100) 104.2 pron 52.81

GRIM Serial No. 00434668 00234503

Concentration 800.0 ppm 253.0 ppm

CRM Serial No. 0056649 0056662

Concentration 390.1 jam 150.2

Analytical Method:

NDIR

Digitally signed by Quality Control Date: 2020.02.18.10.32:01-96:00 Reason: Dry gas standard certification of analysis Location: Airgas USA LLC (Lab)

Approved for Release:

ISO 17025:2005 AZLA accredited. Certificate Number 30\$2.06 ISO 17034:2016 A2LA accredited. Certificate Number 3082.07



STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES BREATH ALCOHOL PROGRAM



PERMIT TYPEII

DANIEL JOHNSON

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, and operate the following breath analyzer(s):	perform held	serv.ce t	epairs
INTOX DMT			
for the determination of the alcoholic content of blood from a sample of expired air. Permit issue 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.	d under the pr	rovisions t	sections

DATE 7/17/2020

DIRECTOR OF STATE PUBLIC HEALT (LABORATOR)

NUMBER 200209

1 1 20 22

EXPIRES 7/17/2022

DIRECTOR OF DEPARTMENT OF HEALTH AND BENIOR SEPT

W11 585 G) (1) 15 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 ai in Missouri

Operator JOHNSON, DANIEL Permit No 200209

Date Issued 7/17/2020 Date Expires 7/17/2022

