## RECEIVED

By Tracy Crews at 10:47 am, Dec 07, 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 of the r Complete this report whenever the inst Retain the original and send a copy wit	rument is serviced or rep	paired and	whenever it is place			
INTOX DMT SN St. S		DATE OF INSPECTION 12/02/2020				
LOCATION OF INSTRUMENT (STREET AND CITY)  200 N. Bourbeuse Street, St. James, MO 65559				TIME OF INSPECTION 21:10:16	, , , , , , , , , , , , , , , , , , ,	
CHECKLIST: Place a mark in the box values where determined). Unmarked it	by each item if found to tems must be corrected	be satisfac before usi	tory or is operating ng instrument.	within established limits. (\	Write in observed	
☑ DIAGNOSTIC RECORD						
DATE AND TIME 12/02/2020 2	DETECTOR					
☑ PROGRAM			X FILTER 1			
	FILTER 2	FILTER 2				
☑ BREATH TUBE 43.5°C	FILTER 3					
□ PUMP     □	INTERNAL STANDARD					
BREATH ANALYZER ACCURACY S	STANDARDS					
			☐ COMPRESSED ETHANOL-GAS MIXTURE			
STANDARD SUPPLIER GUTH		_ LOT#_	19160	EXP. DATE <u>C</u>	07/09/2021	
SIMULATOR TEMP (34°C ± 0.2°C) 34.0		SIM. SN	MP2927	SIM. NIST EXP DATE	11/12/2021	
<ul> <li>☑ CALIBRATION CHECK - (ONLY Run three tests using a standard. A of .005 or less. Mark the box corre</li> <li>☑ 0.10% STANDARD - MUS</li> <li>☑ 0.08% STANDARD - MUS</li> <li>☑ 0.04% STANDARD - MUS</li> </ul>	esponding to the standa BT READ BETWEEN 0. BT READ BETWEEN 0.	rd being us 095% ANE 076% ANE	ed. 0 0.105% INCLUSI 0 0.084% INCLUSI	VE VE		
TEST 1: 0.098 TEST 2: 0.09		97		TEST 3: 0.098	TEST 3: 0.098	
☑ PERFORM R.F.I. TEST						
INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:						
REFUSALS: 0 004: 1	.0509: 0		.1014: 0	.1519: 1	OVER .19: <b>0</b>	
LIST ANY NEW PARTS AND DESCRIBE ANY ALTERA ESTABLISHED LIMITS (USE OTHER SIDE IF NECESS)		AS MADE TO F	ESTORE THE INSTRUME	NT TO OPERATE SATISFACTORILY /	AND WITHIN	
INSPECTING OFFICER						
SIGNATURE			PRINT FULL NAME			
TYPE II PERMIT NUMBER	IEVDIDAT	ON DATE	JENNA RIGGS			
200256		4/2022		55-7012		
RETURN COMPLETED REPORT T	O THE Breath Alcoho by mail, fax, or		Missouri Departme	ent of Health and Senior Se	ervices	



#### CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 19160 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on July 10, 2019, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1202% (w/vol) ethyl alcohol. The expiration date for this lot number is July 9, 2021 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.100 g/210L +/- 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 FN04271602 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** 



# **PERMIT** TYPE II

## **JENNA N. RIGGS**

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

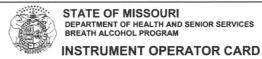
#### **INTOX DMT**

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.

DATE 9/24/2020	wante			
	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY			
NUMBER <b>200256</b>				
EXPIRES 9/24/2022	for O'Vellen			
	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 air

Operator RIGGS, JENNA

Permit No 200256

Date Issued 9/24/2020 **Date Expires** 9/24/2022

