

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

REPORT #1

emplete this report at the time emplete this report whenever etain the original and send a c	copy within 15 days	to the Brea	th Alcol	nol Program, DHSS.	DATE OF INSPECTION	
500265 Lebanon Police Depa			ent		08/12/2020	
OCATION OF INSTRUMENT (STREET AND CITY) 401 S. Jefferson Lebanon Mo 65536					06:14:54	
HECKLIST: Place a mark in slues where determined). Unn	the box by each iten	m if found to	be sat	isfactory or is operating using instrument.	within established limits	(Write in observed
DIAGNOSTIC RECORD						
DATE AND TIME 08/12/2020 06:14:56				☑ DETECTOR		
☑ PROGRAM				☑ FILTER 1		
SAMPLE CHAMBER 48.8°C				☑ FILTER 2		
BREATH TUBE 46.6				☑ FILTER 3		
⊠ PUMP				☑ INTERNAL STA	ANDARD	
REATH ANALYZER ACCU	RACY STANDARI	DS				
☐ SIMULATOR STANDA	THE RESERVE OF THE PARTY OF THE			☑ COMPRESSED	ETHANOL-GAS MIXT	
	NITOVINIETEDO			" 40007740	EXP DATE	03/18/2021
] STANDARD SUPPLIER_I	N I OXIME LEKS		_ LOT	# AG907710	EXT. BXTE.	00,10,202
SIMULATOR TEMP (34°C CALIBRATION CHECK - Run three tests using a sta of .005 or less. Mark the b 0.10% STANDAR	(ONLY ONE STA andard. All three tes box corresponding D - MUST READ E	NDARD IS sts must be to the stand BETWEEN	SIM. TO BE within ± ard bein 0.095%	SN	SIM. NIST EXP DA NANCE REPORT) ue and must have a spre	TE
☐ 0.08% STANDAR☐ 0.08% STANDAR☐ 0.04% STANDAR	(ONLY ONE STA andard. All three tes oox corresponding D - MUST READ E D - MUST READ E	NDARD IS sts must be to the stand BETWEEN (BETWEEN (SIM. TO BE within ± ard bein 0.095% 0.076% 0.038%	SN	SIM. NIST EXP DA NANCE REPORT) ue and must have a spre	TE
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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:** 20-Mar-2019

Lot # AG907710 Model 108cacd

Exp. Date 18-Mar-2021 Cyl. Type 108

Component Ethanol

Nitrogen

Certified Concentration

0.100 ± 2% BrAC (260 ppm)

Balance

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

RGM Serial No.

EB0010581 EB0010570

EB0010285

EB0010561

EB0010681

CRM Serial No.

CC434668 CC234503 Concentration

392.1 ppm 259.8 ppm

208.0 ppm

103.6 ppm

52.12 ppm

Concentration

800.0 ppm

253.0 ppm

RGM Serial No.

EB0010603 EB0010559

EB0010595

EB0010562 EB0010579 Concentration 393.0 ppm

258.2 ppm

208.3 ppm 104.2 ppm

52.81 ppm

CRM Serial No.

0056649 0056662 Concentration

390.1 ppm 150.2 ppm

Analytical Method:

NDIR

Digitally signed by Quality Control Date: 2019.03.20 11:13:55 -05:00 Reason: Dry gas standard certification of analysis Location: Airgas USA LLC (Lab)

Approved for Release:

Norl Marsala
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

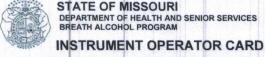
JENNIFER R JANKO

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.

DATE10/3/2019	honse
- TOIS -	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 290238	
EXPIRES 10/3/2021	for Ville
MO 580-0771 (6-10)	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES LAB-4 (R6-1



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 JANKO, JENNIFER

Permit No 290238

Date Issued 10/3/2019 Date Expires 10/3/2021

