

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

INTOX EC/IR II	MAINTENANCE	REPORT		REPORT #3	
Complete this report at the time of	ALC: CID IACA COLLARS I. MARKETER PROPERTY INVALIDATION OF	Carrie Company Company (Company)	Propagation and the second sec		
days). Complete this report whenever		-		-	
into service. Retain the original and send a copy within 15 days to the INTOX EC/IR II SN NAME OF AGENCY			DATE OF INSPECTION		
12681	SLMPD		05/04/2021		
LOCATION OF INSTRUMENT (STREET AND CITY	100000000000000000000000000000000000000		TIME OF INSPECTION		
1915 OLIVE ST LOUIS		09:09 CDT			
CHECKLIST: Place a mark in the box	und to be satisfac		ng within		
established limits. (Write in obser			THE PARTY OF THE P	- 1 1 1 1 1 1 1 1 1 1	
before using instrument.					
X DIAGNOSTIC RECORD					
X BLANK CHECK	X CO2 CHECK				
X FC 1 TEMP	X FLOW CHECK	X FLOW CHECK			
X SRC TEMP	X FCB CHECK				
X DET TEMP	X CRC COMP CHECK				
X BT TEMP	X CRC CAL CHECK				
X STD 2 TEMP	X PRINT TEST				
X ETH CHECK					
BREATH ANALYZER ACCURACY STANDA	RDS				
SIMULATOR SOLUTION X COMPRESSED ETHANOL-GAS MIXTURE					
X STANDARD SUPPLIER INTOX	LOT# AG109802				
SIMULATOR TEMP (34°C +0.2°C)	ISIM. S		SIM. NIST EXP	CONTROL OF THE PROPERTY OF THE	
			bearing and an inches	and a de det	
TT CALLED A STON CHECK CONTY ON	CMANDADA TO MO T		INVESTIGE DEPOSE		
X CALIBRATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)					
Run three tests using a standard solution. All three tests must be within +5% of the standard value					
and must have a spread of .005 or less. Mark the box corresponding to the standard solution being used.					
0.10% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE					
X 0.08% STANDARD - MUST READ BETWEEN 0.076% AND 0.084% INCLUSIVE					
0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE					
TEST 1 0.079 g/210L TEST 2 0.079				9 g/210L	
INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:					
			r	4	
REFUSALS 0 004 0	.0509 0	.1014 0	.1519 0	OVER .19 0	
LIST ANY NEW PARTS AND DESCRIBE ANY ALTE SATISFACTORILY AND WITHIN ESTABLISHED LI			STORE THE INSTRUMENT	TO OPERATE	
1					
INSPECTING OFFICER					
SIGNATURE // / / / / / / /	PRINT FULL NAME				
- GM/165		LUDWIG, JUSTIN			
	TION DATE	TELEPHONE NUMBER			
29017/2 08/09	9/2021	(314)444-5345	5		
RETURN COMPLETED REPORT TO	THE:				
Breath Alcohol Program, Missouri Department of Health and Senior Services,					
by mail, fax, or e-mail					



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: 8-Apr-2021

Lot # AG109802 Model 108cacd

Exp. Date

Cyl. Type

Component

Certified Concentration

8-Apr-2023

108

Ethanol Nitrogen 0.080 ± 0.002 BrAC (218 ppm)

Balance

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

RGM Serial No. Concentration EB0010581 392.1 ppm EB0010570 259.8 ppin EB0010285 208.0 ppm EB0010561 103.6 ppm

EB0010681

CRM Serial No. CC727481 CC727496

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. CC727493 CC727498

Concentration 390.0 ppm 150.0 ppm

Analytical Method:

NDIR

Digitally signed by Quality Control Date: 2021.04.08 17:48:25 -05:00 Reason: Dry gas standard certification of analysis Location: Airgas USA LLC (Lab)

Approved for Release:

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

LOWELL MOORE

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 EC/IR II

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.

DATE4/6/2021	wante			
	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY			
NUMBER 210072				
EXPIRES 4/6/2023	El Ville			
MD 680 0771 (6-10)	DIRECTOR OF DEPARTMENT OF HEALTH AND SERVICES			

LAB-4 (R6-10)



Operator MOORE, LOWELL

Permit No 210072 Date Issued 4/6/2021 Date Expires 4/6/2023

