

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

/ 小龍雪像於)	BREATH	ALCORC) L	RUGRAM				(2
	INTOX	EC/IR	ΙI	MAINTENANCE	REPORT		4 36	1 000 1 1 1

REPORT #3

THION FCATE II			36 043512 T	REFORT #3				
Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 35								
days). Complete this report whenever the instrument is serviced or repaired and whenever it is placed into service. Retain the original and send a copy within 15 days to the Breath Alcohol Program, DH68.								
		in 15 days to the	DATE OF INSPECTION					
INTOX EC/IR II SN	NAME OF AGENCY		03/02/2021					
12054	ST JOHN PD		TIME OF INSPECTION					
LOCATION OF INSTRUMENT (STREET AND CITY)								
8944 ST. CHARLES ROCK RD ST. JO			05:09 CST					
CHECKLIST: Place a mark in the box								
established limits. (Write in observed values where determined), Unmarked Items must be corrected								
before using instrument.				×				
X DIAGNOSTIC RECORD								
X BLANK CHECK		X CO2 CHECK		90				
X FC 1 TEMP		X FLOW CHECK						
X SRC TEMP		X FCB CHECK						
X DET TEMP		X CRC COMP CHEC	CK.					
X BT TEMP	-945	X CRC CAL CHECK						
X STD 2 TEMP		X PRINT TEST						
		X PRINT TEST						
X ETH CHECK				V				
BREATH ANALYZER ACCURACY STANDA	RDS		V #:	A.				
SIMULATOR SOLUTION		X COMPRESSED ET	CHANOL-GAS MIXTU	RE				
X STANDARD SUPPLIER	, A	LQT# AG009801	EXP.	DATE 04/07/2022				
SIMULATOR TEMP (34°C +0.2°C)	ISIM. S	N	ISIM. NIST EXP	DATE				
Hornor that the form of	1							
X CALIBRATION CHECK - (ONLY ONE	STANDARD IS TO B	e used per maint	ENANCE REPORT)	S-000				
Run three tests using a stand	ard solution. Al	l three tests mu	et be within <u>+</u> 54	of the standard value				
and must have a spread of .00								
used,				¥				
0.10% STANDARD - MUST READ	BETWEEN 0.095% AN	D 0.105% INCLUSI	VE					
X 0.08% STANDARD - MUST READ	BETWEEN 0.076% AN	D 0.084% INCLUSI	VE					
0.04% STANDARD - MUST READ	BETWEEN 0.038% AN	D 0.042% INCLUST	VE .					
TEST 1 5 0.081 g/210L	TEST 2 🖙 0.081	g/210L TEST 3 = 0.081 g/210L						
INDICATE THE NUMBER OF BREATH T	ESTS IN THE FOLLO	WING RANGES SINC	E THE LAST MAIN	TENANCE REPORT:				
MAINTAIN THE TOTAL OF THE TOTAL		M. Territorio de la manda de l						
REFUSALS 0 004 0	.0509 0	.1014 0	.1519 0	OVER .19 0				
LIST ANY NEW PARTS AND DESCRIBE ANY ALTE		20	20	TO OPERATE				
BATISFACTORILY AND WITHIN ESTABLISHED LI								
10	¥1							
	*							
				î i				
INSPECTING OFFICER								
SIGNATURE	2.	PRINT FULL NAME						
▶ - 7	7	PLUMB, TODD						
TYPE II PERMIT NUMBER EXPLICA	TELEPHONE NUMBER							
210019 02/0	3/2023	(314)427-8700						
RETURN COMPLETED REPORT TO THE:								
		of Health and	Senior Service	es.				
Breath Alcohol Program, Missouri Department of Health and Senior Services, by mail, fax, or e-mail								
ny matt' rax' or e-marr								



Airgas USA LLC (LAB)

3500 Bernard Street St. Louis, Mo. 63103 Ph; (314) 533-3100 Fax: (314) 533-7328

Certificate of Analysis

Customer Name

Test Date: 13-Apr-2020

Exclusive Supplier Intoximeters, Inc. 2081 Craig Road St. Louis, Mo 63146

Lot # AG009801 Model 108cacd

Exp. Date

Cyl. Type

Component

Certified Concentration

7-Apr-2022

108

Ethanol Nitrogen 0.080 ± 0.002 BrAC (208 ppm)

Balance

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

RGM Sorial No. EB0010581

Concentration 392,1 ppm 259.8 ppm

EB0010570 EB0010285 EB0010561

208.0 ppm 103.6 ppm

EB/0010631

CRM Serial No.

52.12 ppm

Concentration

CC434668 mqq 0.008 CC234503 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: 2020.04.13 18:36:40-05:00 Resaton: Dry gat standard certification of analysis Location: Argas USA LLC (Lab)

Approved for Release:

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



TODD A. PLUMB

Is hereby authorized to instruct and super and operate the following breath analyzer(vise operators, train instructors, inspect, calibrate, perform field service and repairs,					
	INTOX EC/IR II					
or the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 177.020 through 577.041, RSMb and 306.111 through 306.119 RSMb.						
DATE	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY					
NUMBER 210019						
EXPIRES 2/3/2023	A STATE OF THE PROPERTY OF THE					

MO 560,0771 (8-10).

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4:(R6-10):



STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES BREATH ALCOHOL PROGRAM

INSTRUMENT OPERATOR CARD

The named continuider is authorized to operate an evidential broath alcohol instruction for the determination of the alcoholic content in breath form of expired at in Missouri.

Operator PLUMB, TODD Permit No. 210019 Date Issued 2/3/2021 Date Date Expires 2/3/2023

