

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

INTOX DMT MAINTENANCE REPORT

REPORT #1

	N.C. 10		1.711	- 1 25 1>	
Complete this report at the time of the regular monopolete this report whenever the instrument is Retain the original and send a copy within 15 days	serviced or rep	paired and wheneve	er it is placed into		
NAME OF AGENCY 500045 Missouri State Highway Patrol				DATE OF INSPECTION 09/01/2021	
LOCATION OF INSTRUMENT (STREET AND CITY) Pettis Co Jail, 333 S Lamine, Sedalia, MO		TIME OF INSPECTION 14:08:57			
CHECKLIST: Place a mark in the box by each it values where determined). Unmarked items mus	tem if found to	be satisfactory or is before using instru	operating withi ment.	in established limits	s. (Write in observed
☑ DIAGNOSTIC RECORD					
DATE AND TIME 09/01/2021 14:09:00		☑ DETECTOR			
☑ PROGRAM			ER 1		
☑ SAMPLE CHAMBER 48.8°C			R 2		
☐ BREATH TUBE 45.6°C	-		R 3		
☑ PUMP			RNAL STANDA	ARD	
BREATH ANALYZER ACCURACY STANDAR	RDS				
☐ SIMULATOR STANDARD		□ COMPRESSED ETHANOL-GAS MIXTURE			
☐ STANDARD SUPPLIER INTOXIMETERS	S	LOT# <u>AG0244</u>	03	EXP. DATE	08/31/2022
☐ SIMULATOR TEMP (34°C ± 0.2°C)		SIM. SN	8	SIM. NIST EXP DA	TE
□ 0.10% STANDARD - MUST READ □ 0.08% STANDARD - MUST READ □ 0.04% STANDARD - MUST READ	BETWEEN 0.	076% AND 0.084% 038% AND 0.042%	INCLUSIVE	1	
TEST 1: 0.098	TEST 2: 0.09	9 8	ž.	TEST 3: 0.098	
PERFORM R.F.I. TEST					
INDICATE THE NUMBER OF BREATH TEST	S IN THE FO	LLOWING RANG	ES SINCE TH	E LAST MAINTEN	NANCE REPORT:
REFUSALS: 0 004: 5	.0509: 2	.1014:		.1519: 1	OVER .19: 3
LIST ANY NEW PARTS AND DESCRIBE ANY ALTERATION OR MODESTABLISHED LIMITS (USE OTHER SIDE IF NECESSARY)	DIFICATION THAT WA	AS MADE TO RESTORE TH	E INSTRUMENT TO C	PERATE SATISFACTORIL	Y AND WITHIN
This instrument is operating within the guidelines set fo	rth by the Missou	uri Department of Heal	th.		
INSPECTING OFFICER					
SGT. B.M. Come \$263		PRINT FULL NAM BENJAMI		IN N COMER	
TYPE II PERMIT NUMBER 200065	01/21	ON DATE 1/2022	TELEPHONE NUMBER 816-622-0800		
RETURN COMPLETED REPORT TO THE	Breath Alcohol by mail, fax, or	Program, Missouri email	Department of I	Health and Senior S	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 Intoximeters, Inc. 2081 Craig Road St. Louis, Mo 63146 Test Date: 2-Sep-2020

Lot # AG024403 Model 108cacd

Exp. Date 31-Aug-2022 Cyl. Type

Component Ethanol

Certified Concentration

108

Nitrogen

0.100 ± 2% BrAC (260 ppm)

Balance

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

Concentration RGM Serial No. 392.1 ppm EB0010581 259.8 ppm EB0010570 208.0 ppm EB0010285 EB0010561 EB0010681

103.6 ppm

52.12 ppm

Concentration 800.0 ppm 253.0 ppm

RGM Serial No. Concentration 393.0 ppm EB0010603 EB0010559 258.2 ppm 208.3 ppm EB0010595 EB0010562 104.2 ppm 52.81 ppm EB0010579

CRM Serial No. 0056649 0056662

Concentration 390.1 ppm 150.2 ppm

Analytical Method:

CRM Serial No.

CC434668

CC234503

NDIR

Digitally signed by Quality Control Date: 2020.09.02 19:09:33 - 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

BENJAMIN N COMER

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

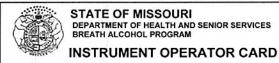
INTOX DMT

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.

DATE1/21/2020	wind
DATE TREATMENT TO THE PROPERTY OF THE PROPERTY	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 200065	
EXPIRES 1/21/2022	DIRECTOR OF DEPARTMENT OF HEALTH AND SERVICES
	BINESTON OF BETANNIENT OF FIELD THAT SERVICE 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 in Missouri.

Operator COMER, BENJAMIN

Permit No 200065

Date Issued 1/21/2020 Date Expires 1/21/2022

