

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

### INTOX DMT MAINTENANCE REPORT

**RECEIVED** By Tracy Crews at 8:04 am, Sep 27, 2021

**REPORT #1** 

Complete this report at the time of the regular m Complete this report whenever the instrument is Retain the original and send a copy within 15 da	serviced or repaired and	whenever it is placed int		
100 DMT SN NAME OF AGENCY 500046 Missouri State Highway Patrol			DATE OF INSPECTION 09/17/2021	
LOCATION OF INSTRUMENT (STREET AND CITY) 10 NE Tudor Road, Lee's Summit			TIME OF INSPECTION 19:20:36	
CHECKLIST: Place a mark in the box by each i values where determined). Unmarked items must	item if found to be satisfac st be corrected before usi	ctory or is operating withi ng instrument.	n established limits. (V	Vrite in observed
DIAGNOSTIC RECORD				
DATE AND TIME 09/17/2021 19:20:39 🛛 DETECTOR				
PROGRAM SILTER 1				
SAMPLE CHAMBER 48.9°C				
BREATH TUBE 47.2°C SILTER 3				
DUMP INTERNAL STANDA			RD	
BREATH ANALYZER ACCURACY STANDARDS				
SIMULATOR STANDARD				
STANDARD SUPPLIER INTOXIMETER	<u>S</u> LOT#	AG024403	EXP. DATE 08	3/31/2022
SIMULATOR TEMP (34°C ± 0.2°C)	SIM. SN	S	IM. NIST EXP DATE	
of .005 or less. Mark the box corresponding to the standard being used.   ☑ 0.10% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE   □ 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: 0.101			TEST 3: 0.100	
DERFORM R.F.I. TEST				
INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:				
REFUSALS: 1 004: 1	.0509: 0	.1014: 9	.1519:1	OVER .19: 1
LIST ANY NEW PARTS AND DESCRIBE ANY ALTERATION OR MOI ESTABLISHED LIMITS (USE OTHER SIDE IF NECESSARY) Maintenance for September	DIFICATION THAT WAS MADE TO F	ESTORE THE INSTRUMENT TO O	PERATE SATISFACTORILY AN	ID WITHIN
INSPECTING OFFICER				
SIGNATURE (+B. Ada		PRINT FULL NAME CORY BRADSHAW		
TYPE II PERMIT NUMBER 210095	EXPIRATION DATE 05/18/2023	TELEPHONE NUMBI 816-622-08	ER	
	Breath Alcohol Program, l by mail, fax, or email	Missouri Department of F	lealth and Senior Serv	vices

# Airgas.

Airgas USA LLC (LAB) 3500 Bernard Street St. Louis, Mo. 63103 Ph: (314) 533-3100 Fax: (314) 533-7328

## **Certificate of Analysis**

Test Date: 2-Sep-2020

<u>Customer Name</u> Exclusive Supplier Intoximeters, Inc. 2081 Craig Road St. Louis, Mo 63146

## Lot # AG024403 Model 108cacd

Exp. Date 31-Aug-2022

Cyl. Type 108 <u>Component</u> 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

<u>CRM Serial No.</u> CC434668 CC234503 <u>Concentration</u> 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

CRM Serial No. 0056649 0056662 <u>Concentration</u> 393.0 ppm 258.2 ppm 208.3 ppm 104.2 ppm 52.81 ppm

Concentration 390.1 ppm 150.2 ppm

Analytical Method:

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:

los Marsale

Rod Marsala

ISO 17025:2005 A2LA accredited. Certificate Number 3082.06 ISO 17034:2016 A2LA accredited. Certificate Number 3082.07

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