### RECEIVED

By Tracy Crews at 3:52 pm, Aug 19, 2021



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

#### INTOX DMT MAINTENANCE REPORT

REPORT #1

Complete this report at the time of Complete this report whenever the Retain the original and send a co	ne instrument is serviced	d or repaired and w	henever it is placed in	eed 35 days). to service.		
INTOX DMT SN NAME OF AGENCY  500052 Missouri State Highway Patrol			08/13/2021			
LOCATION OF INSTRUMENT (STREET AND C 200 W 9th St., Henrietta, MC			TIME OF INSPECTION 13:12:57			
CHECKLIST: Place a mark in the box by each item if found to be satisfactory or is operating within established limits. (Write in observed values where determined). Unmarked items must be corrected before using instrument.						
☑ DIAGNOSTIC RECORD						
DATE AND TIME 08/13/2021 13:13:00						
☑ PROGRAM ☑ FILTER 1						
☐ SAMPLE CHAMBER 48.8°C ☐ ☐ FILTER 2						
☐ BREATH TUBE 46.5°C ☐ FILTER 3						
□ PUMP	□ PUMP  □ INTERNAL STANDARD					
BREATH ANALYZER ACCURACY STANDARDS						
☐ SIMULATOR STANDARD ☐ COMPRESSED ETHANOL-GAS MIXTURE					RE	
STANDARD SUPPLIER IN	TOXIMETERS	LOT#	G102002	EXP. DATE <u>0</u>	1/20/2023	
☐ SIMULATOR TEMP (34°C ±	: 0.2°C)	SIM. SN_		SIM. NIST EXP DATE		
<ul> <li>CALIBRATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT) Run three tests using a standard. 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 being used.</li> <li>☑ 0.10% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE</li> <li>☐ 0.08% STANDARD - MUST READ BETWEEN 0.076% AND 0.084% INCLUSIVE</li> <li>☐ 0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE</li> </ul>						
TEST 1: 0.099	TEST	2: 0.099		TEST 3: 0.098		
□ PERFORM R.F.I. TEST						
INDICATE THE NUMBER OF	BREATH TESTS IN T	HE FOLLOWING	RANGES SINCE T	HE LAST MAINTENA	NCE REPORT:	
REFUSALS: 1 004: 0	.050	9: 1	.1014: 1	.1519: 1	OVER .19: 1	
LIST ANY NEW PARTS AND DESCRIBE ANY ESTABLISHED LIMITS (USE OTHER SIDE IF	LECECCA DIA	N THAT WAS MADE TO RI	ESTORE THE INSTRUMENT TO	O OPERATE SATISFACTORILY A	ND WITHIN	
INSPECTING OFFICER SIGNATURE			PRINT FULL NAME			
TYPE II PERMIT NOMBER 1 Sulfan	/	EXPIRATION DATE 02/23/2023	ANDREW M BEC	MBER		
210029 02/23/2023 816-622-0800  RETURN COMPLETED REPORT TO THE Breath Alcohol Program, Missouri Department of Health and Senior Services by mail, fax, or email						



#### 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 <u>Test Date:</u> 21-Jan-2021

Lot # AG102002 Model 108cacd

Exp. Date 20-Jan-2023 **Cyl. Type** 108

<u>Component</u> Ethanol <u>Certified Concentration</u> 0.100 ± 2% BrAC (260 ppm)

Nitrogen

Balance

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

RGM Serial No.	Concentration	RGM Serial No.	<b>Concentration</b>
EB0010581	392.1 ppm	EB0010603	393.0 ppm
EB0010570	259.8 ppm	EB0010559	258.2 ppm
EB0010285	208.0 ppm	EB0010595	208.3 ppm
EB0010561	103.6 ppm	EB0010562	104.2 ppm
EB0010681	52.12 ppm	EB0010579	52.81 ppm
CRM Serial No.	Concentration	CRM Serial No.	Concentration
CC727481	800.0 ppm	CC727493	390.0 ppm
CC727496	253.0 ppm	CC727498	150.0 ppm

**Analytical Method:** 

**NDIR** 

Digitally signed by Quality Control Date: 2021.01.27 14:59:44 -06:00 Reason: Dry gas standard certification of analysis Location: Airgas 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



# PERMIT TYPE II

## ANDREW BECKWITH

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 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.

DATE2/23/2021	wond		
	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY		
NUMBER 210029			
EXPIRES 2/23/2023	Self Ville Commission of DEPARTMENT OF MEANING SERVICES		
	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES		

MO 580-0771 (6-10)

LAB-4 (R6-10)

