## **RECEIVED**

By Tracy Crews at 10:07 am, Oct 04, 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 the regular Complete this report whenever the instrument Retain the original and send a copy within 15	is serviced or repaire	ed and wheneve	r it is placed int				
INTOX DMT SN S00093  NAME OF AGENCY Missouri State Highway Patrol				10/02/2021			
LOCATION OF INSTRUMENT (STREET AND CITY) 17201 Paradesian, Smithville, MO	12:53:00						
CHECKLIST: Place a mark in the box by eac values where determined). Unmarked items n	h item if found to be nust be corrected bef	satisfactory or is ore using instrur	operating with	in established limits	. (Write in observed		
☑ DIAGNOSTIC RECORD							
DATE AND TIME 10/02/2021 12:53:0	02_	□ DETE	CTOR	12			
☑ PROGRAM ☑ FILTER 1							
☑ SAMPLE CHAMBER 48.8°C							
☑ BREATH TUBE 44.8°C							
☑ PUMP			RNAL STANDA	RD			
BREATH ANALYZER ACCURACY STAND	ARDS						
☐ SIMULATOR STANDARD			PRESSED ETH	HANOL-GAS MIXT	URE		
	RS LO	OT# <u>AG0044</u>	03	EXP. DATE	02/13/2022		
☐ SIMULATOR TEMP (34°C ± 0.2°C)	SI	M. SN		IM. NIST EXP DA	TE		
<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 2: 0.099		TEST 3: 0,099			
☑ PERFORM R.F.I. TEST							
INDICATE THE NUMBER OF BREATH TE	STS IN THE FOLL	OWING RANG	ES SINCE TH	E LAST MAINTEN	NANCE REPORT:		
REFUSALS: 0 004: 5	.0509: 0	.1014:	0	.1519: 3	OVER .19: 0		
LIST ANY NEW PARTS AND DESCRIBE ANY ALTERATION OR ESTABLISHED LIMITS (USE OTHER SIDE IF NECESSARY)  Maintenance test for October	MODIFICATION THAT WAS M	ADE TO RESTORE TH	E INSTRUMENT TO (	PERATE SATISFACTORIL	Y AND WITHIN		
INSPECTING OFFICER							
SIGNATURE Con B-15hm	PRINT FULL NAME CORY W BRADSH		AW				
TYPE II PERMIT NUMBER 210095	05/18/20	ATE	TELEPHONE NUME 816-622-08	BER			
RETURN COMPLETED REPORT TO THE  Breath Alcohol Program, Missouri Department of Health and Senior Services by mail, fax, or email  MO 580-2898 (5-19)  AN EQUAL OPPORT UNITY/AFFIRMATIVE ACTION EMPLOYER							



## 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: 17-Feb-2020

Lot # AG004403 Model 108cacd

Exp. Date 13-Feb-2022 Cyl. Type 108

Component

Certified Concentration

Ethanol

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.	Concentration
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 CC434668 mqq 0.008 0056649 390.1 ppm 0056662 CC234503 253.0 ppm 150.2 ppm

Analytical Method:

NDIR

Digitally signed by Quality Control Date: 2020.02.18 10:32:01 -06:00 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