

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

INTOX EC/IR II					REPORT #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 INTOX EC/IR II SN NAME OF AGENCY			DATE OF INSPECTION			
INTOX EC/IR II SN	Chesterfield PD		04/15/2022			
12679			TIME OF INSPECTION			
LOCATION OF INSTRUMENT (STREET AND CITY)			16:16 CDT			
690 Chesterfield Pkwy W Chesterfield CHECKLIST: Place a mark in the box by each item if found to be satisfact			1	ng within		
established limits. (Write in obser						
before using instrument.	ved values where de	ccciminca). omaii	red reemb made be	COLLEGUE		
X DIAGNOSTIC RECORD						
X BLANK CHECK		X CO2 CHECK				
X FC 1 TEMP						
X SRC TEMP		X FCB CHECK				
			OT/			
X DET TEMP		X CRC COMP CHE				
X BT TEMP		X CRC CAL CHEC	K			
X STD 2 TEMP		X PRINT TEST				
ETH CHECK						
BREATH ANALYZER ACCURACY STANDA	RDS					
SIMULATOR SOLUTION		X COMPRESSED E	THANOL-GAS MIXTU	RE		
X STANDARD SUPPLIER INTOXI	METERS	LOT# AG035102	EXP.	DATE 12/16/2	022	
SIMULATOR TEMP (34°C +0.2°C)	SIM. S	SN	SIM. NIST EXP	DATE		
_						
X CALIBRATION CHECK - (ONLY ONE	CTANDARD TO TO	OF FICEN DEP MATE	PRIANCE PEDODT)			
—						
Run three tests using a stand						
and must have a spread of .005 or less. Mark the box corresponding to the standard solution being used.						
□ 0.10% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE						
X 0.08% STANDARD - MUST READ						
0.04% STANDARD - MUST READ						
Do. 04 0 DIRADING MODI KEE			. , 2			
TEST 1 0.080 g/210L	TEST 2 0.080	g/210L	TEST 3 = 0.08	0 g/210L		
INDICATE THE NUMBER OF BREATH T	ESTS IN THE FOLLO	WING RANGES SINC	E THE LAST MAIN	TENANCE REPORT	:	
				Von la company		
REFUSALS 0 004 0	.0509 0	.1014 0	.1519 2	OVER .19	1	
LIST ANY NEW PARTS AND DESCRIBE ANY ALTE			STORE THE INSTRUMENT	TO OPERATE		
SATISFACTORILY AND WITHIN ESTABLISHED LI	MITS (USE OTHER SIDE I	IF NECESSARY).				
THE THE TAX ADDITION OF TH						
INSTRUMENT IS OPERATING WITHIN MO DEPT OF HEALTH SPECIFICATIONS						
α						
INSPECTING OFFICER		1 3	10 30	81 y 1, E. villa 1, 31 Y	15 5 F 18 19 7	
SIGNAZORE //		PRINT FULL NAME				
► 4016 m + 16-4		RUPP, GREGORY				
	TION DATE	TELEPHONE NUMBER				
210082 04/23	1/2023	(636)537-3000				
RETURN COMPLETED REPORT TO	THE:					
Breath Alcohol Program, Missouri Department of Health and Senior Services,						
by mail. fax. or e-mail						



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: 16-Dec-2020

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

Lot # AG035102 Model 108cacd

Cyl. Type Component **Certified Concentration** Exp. Date 16-Dec-2022 108 Ethanol 0.080 ± 0.002 BrAC (218 ppm)

> Nitrogen Balance

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

RGM Serial No.	<u>Concentration</u>	<u>RGM Serial No.</u>	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 CC727481 CC727493 390.0 ppm 800.0 ppm CC727496 253.0 ppm CC727498 150.0 ppm

Analytical Method: NDIR

Digitally signed by Quality Control Date: 2020.12.16 17:41:58 -06:00 Reason: Dry gas standard certification of analysis Location: Airgas USA LLC (Lab)

Approved for Release:

North Marsola 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 || GREGORY RUPP

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 EC/IR II

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.

DATE	4/21/2021	we with		
	*	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY		
	<u>210082</u> <u>4/21/2023</u>	The Knight		
		DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR 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 ali in Missouri.

Operator RUPP, GREGORY

