

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

INTOX EC/IR II				REPO	ORT #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 Breath Alcohol Program, DHSS.						
INTOX EC/IR 11 SN	NAME OF AGENCY	in 15 days to the		gram, DHSS.		
12687	SPRINGFIELD POLI	<u>የ</u> ሮድ ከፍውጥ	DATE OF INSPECTION			
LOCATION OF INSTRUMENT (STREET AND CITY		ICE DEFI.	08/01/2022 TIME OF INSPECTION			
1199 N HASELTINE GC JAIL SPRING						
CHECKLIST: Place a mark in the box		and to be get effect	14:05 CDT			
established limits. (Write in obse	rved values where de	etermined) Unmari	cory or is operacin	ig within		
before using instrument.		.colminod,. Omagi	red icemp mast be o	Offected		
X DIAGNOSTIC RECORD						
X BLANK CHECK		X CO2 CHECK				
X FC 1 TEMP		X FLOW CHECK			_	
X SRC TEMP		X FCB CHECK	<u> </u>			
X DET TEMP			011			
X BT TEMP		X CRC COMP CHE				
_		X CRC CAL CHEC	K			
X STD 2 TEMP		X PRINT TEST				
X ETH CHECK						
BREATH ANALYZER ACCURACY STAND	ARDS					
SIMULATOR SOLUTION		X COMPRESSED E	THANOL-GAS MIXTU	RE		
X STANDARD SUPPLIER INTOX	IMETERS	LOT# AG215102	EXP.	DATE 05/31/2024		
SIMULATOR TEMP (34°C ±0.2°C)	SIM. S	SN	SIM. NIST EXP	DATE		
_						
X CALIBRATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)						
Run three tests using a standard solution. 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 solution being used.						
X 0.10% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE						
0.08% STANDARD - MUST READ BETWEEN 0.076% AND 0.105% INCLUSIVE						
0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE						
TEST 1 0.100 g/210L	TEST 2 0.101	g/210L	TEST 3 % 0.10	g/210L	-	
INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:						
REFUSALS 1 004 0	.0509 3	.1014 1	.1519 1	OVER .19 2		
LIST ANY NEW PARTS AND DESCRIBE ANY ALT	ERATION OR MODIFICATION	THAT WAS MADE TO RE	STORE THE INSTRUMENT	TO OPERATE		
SATISFACTORILY AND WITHIN ESTABLISHED L	IMITS (USE OTHER SIDE I	(F NECESSARY).				
INSPECTING OFFICER						
SIGNATURE		PRINT FULL NAME			Щ	
	340	KAUFMAN, BENJ	AMIN			
	ATION DATE	TELEPHONE NUMBER				
2201/3	.2/2024	(417)864-1810				
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 Exclusive Supplier Intoximeters, Inc. 2081 Craig Road St. Louis, Mo 63146

Test Date: 1-Jun-2022



Lot # AG215102 Model 108

22-0770-00 AG215102

Exp Date

Cyl. Type 108 **Component** Ethanol

Certified Concentration 0.100 ± 2% BrAC (272 ppm)

31-May-2024

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Nitrogen

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

RGM Serial No.	Concentration	RGM Serial No.	Concentration
EB0010581	391.8 ppm	EB0010603	392.5 ppm
EB0010570	259.8 ppm	EB0010559	258.9 ppm
EB0010285	209.0 ppm	EB0010562	104.2 ppm
EB0010561	103.7 ppm	EB0010579	52.94 ppm
EB0010681	52.22 ppm		

CRM Serial No. CC727481 Concentration 800.0 ppm

253.0 ppm

CRM Serial No.

CC727493 CC727498 Concentration

390.0 ppm 150.0 ppm

Analytical Method: NDIR

CC727496

Digitally signed by Quality Control Reason:Dry gas standard certification of analysis Location:Airgas USA LLC (Lab) Date:06.02.2022 17:18

Approved for Release:

Rod Marsala

Roll Marsola

ISO 17025:2017 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

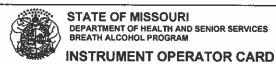
BENJAMIN R. KAUFMAN

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 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.

,	Mile Mason
DATE	1.100 1.00000
	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 220179	
EXPIRES 7/12/2024	Daves I. Nichelson
EXPIRES III 2/2/124	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES
MD 580-0771 (6-10)	149 4 (00 4)



The named cardholder is authorized to operate an evidential breath alcohol instrument for the determination of the alcoholic content in breath form of expired all in Missouri.

KAUFMAN, BENJAMIN Operator

Permit No 220179

Date Issued 7/12/2022 Date Expires 7/12/2024

