#### **RECEIVED**

By Tracy Crews at 12:15 pm, Feb 01, 2022



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

INTOX EC/IR II	MAINTENANCE	REPORT					REPORT #3
this manage at the time of	f the regular monthl	v prevent	ive maint	enance check (n	ot to excee	ed 35	
and demplote this report whenever	er the instrument is	serviced	or repai	red and wheneve	I IC IR DIG	aceu	
into service. Retain the original	and send a copy with	in 15 day	s to the	Breath Arcohor	rrogram, Di	HSS.	
INTOX EC/IR II SN	NAME OF AGENCY			DATE OF INSPECT	ON		
12832	North Kansas Cit	y Police	9	01/06/2022			
LOCATION OF INSTRUMENT (STREET AND CITY	)			TIME OF INSPECT	ON		
2020 HOWELL North Kansas City,	MO			11:24 CST			
CHECKLIST: Place a mark in the box	by each item if fou	nd to be	satisfact	ory or is opera	ting within	1	
established limits. (Write in obse	rved values where de	etermined)	. Unmark	ed items must f	e corrected	1	
before using instrument.							
X DIAGNOSTIC RECORD							
X BLANK CHECK		X CO2 (					
X FC 1 TEMP		X FLOW	CHECK				
X SRC TEMP		X FCB (	CHECK				
X DET TEMP		X CRC (	COMP CHEC	2K			
			CAL CHECK				
X BT TEMP		X PRIN					
X STD 2 TEMP		V EVIII.	. 1501				
X ETH CHECK							
BREATH ANALYZER ACCURACY STAND	ARDS						
SIMULATOR SOLUTION		X COMPI	RESSED ET	THANOL-GAS MIX			
X STANDARD SUPPLIER INTOX	IMETERS	LOT# A	3120703	EX	P. DATE	)7/26/2	:023
SIMULATOR TEMP (34°C ±0.2°C)	SIM. S	SN .		SIM. NIST EX	P DATE		
					<del> </del>		
X CALIBRATION CHECK - (ONLY ON	E STANDARD IS TO E	BE USED I	ER MAINT	ENANCE REPORT	)		
	dard colution Al	11 three	tests mu	st be within	+5% of the	e stand	iard value
and must have a spread of .0	05 or less. Mark	the box	correspo	nding to the	standard a	solutio	on being
used.							
X 0.10% STANDARD - MUST READ	BETWEEN 0.095% AM	ND 0.1059	INCLUSI	:VE			
0.08% STANDARD - MUST READ	BETWEEN 0.076% AN	ND 0.0849	INCLUSI	.VE			
0.04% STANDARD - MUST READ	BETWEEN 0.038% AN	VD 0.0429	INCLUSI	TVE			
	TEST 2 0.100			TEST 3 E 0.	100 g/210	 L	
TEST 1 0.100 g/210L	i .						Γ.
INDICATE THE NUMBER OF BREATH	TESTS IN THE FOLLO	WING RAN	IGES SINC	E THE LAST MA	INIENANCE	AEF ON 1	. •
REFUSALS 0 004 0	.0509 0	.1014	-	.1519 0	OVER		0
LIST ANY NEW PARTS AND DESCRIBE ANY ALT SATISFACTORILY AND WITHIN ESTABLISHED L	ERATION OR MODIFICATION	N THAT WAS	MADE TO RE	STORE THE INSTRUM	ENT TO OPERA	16	
SATISFACTORILY AND WITHIN ESTABLISHED D	IMIIS (ODE CIMEN DIDE)		, -				
MAINTENANCE							
INSPECTING OFFICER							
SIGNATURE		PRINT FU					
R. Fronk 118		FICKEN	, GARY				
1110 11 11011	ATION DATE	TELEPHON.					
200267	L4/2022	(816)	274-6013	\$			
RETURN COMPLETED REPORT T	O THE:						
Breath Alcohol Program, Mis	souri Department	of Hea	lth and	Senior Serv	ices,		
by mail, fax, or e-mail	-						
NI MALLI LOW, OF CHALL							



**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: 26-Jul-2021

Lot # AG120703 Model 108

Exp Date 26-Jul-2023 Cyl. Type 108 Component Ethanol Certified Concentration 0.100 ± 2% BrAC (272 ppm)

Nitrogen

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

RGM Serial No. Concentration

EB0010581 392.1 ppm
EB0010570 259.8 ppm
EB0010285 208.0 ppm
EB0010561 103.6 ppm
EB0010681 52.12 ppm

RGM Serial No. Concentration
EB0010603 393.0 ppm
EB0010559 258.2 ppm
EB0010595 208.3 ppm
EB0010562 104.2 ppm
EB0010579 52.81 ppm

CRM Serial No. CC434668 CC234503

Concentration 800.0 ppm 253.0 ppm CRM Serial No. 0056649 0056662

Concentration 390.1 ppm 150.2 ppm

Analytical Method: NDIR

Digitally signed by:Quality Control Reason:Dry gas standard certification of analysis Location:Afrigas USA LLC (Lab) Date:07.27.2021 16:53

Approved for Release:

Rod Marsala

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



LAB-4 (R6-10)

# PERMIT TYPE II

## GARY FICKEN

is hereby authorized to instruct and supervise of and operate the following breath analyzer(s):	operators, train instructors, inspect, calibrate, perform field service and repair				
I	NTOX EC/IR II				
for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of section 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.					
DATE10/14/2020	wond				
NUMBER 200267	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY				
EXPIRES 10/14/2022	El Ville				
MO 580-0771 (6-10)	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES				



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

#### **INSTRUMENT OPERATOR CARD**

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

Operator FICKEN, GARY

Permit No 200267

Date Issued 10/14/2020 Date Expires 10/14/2022

