

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		nin 15 days to the	-	
INTOX EC/IR II SN NAME OF AGENCY		DATE OF INSPECTION		
12833 Kearney Police Departmen LOCATION OF INSTRUMENT (STREET AND CITY)		Departmen	04/22/2022	
			TIME OF INSPECTION	
725 W. MO 92 Hwy Kearney, MO 6	and to be daticfad	22:26 CDT		
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.	.ivea varaes where de	cccimined). Onmari	red reems mase be	corrected
X DIAGNOSTIC RECORD				
X BLANK CHECK		X CO2 CHECK		
X FC 1 TEMP		X FLOW CHECK		
X SRC TEMP		X FCB CHECK		
X DET TEMP		X CRC COMP CHECK		
X BT TEMP	X CRC CAL CHECK			
	Land .			
X STD 2 TEMP X PRINT TEST				
X ETH CHECK				
BREATH ANALYZER ACCURACY STAND	ARDS			
SIMULATOR SOLUTION X COMPRESSED ETHANOL-GAS MIXTURE				RE
X STANDARD SUPPLIER INTOX		LOT# AG036401	EXP. DATE 12/29/2022	
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 0.084% INCLUSIVE				
0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE				
			•	
TEST 1 0.099 g/210L TEST 2 0.099		g/210L	TEST 3 🐡 0.099 g/210L	
INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:				
_			y	
REFUSALS 19 004 83	.0509 0	.1014 0	.1519 0	OVER .19 0
LIST ANY NEW PARTS AND DESCRIBE ANY ALT SATISFACTORILY AND WITHIN ESTABLISHED L	ERATION OR MODIFICATION		STORE THE INSTRUMENT	TO OPERATE
SHIER COMMENT AND WELLER DEVILLED COMMENTS IN MEDICINALLY.				
INSPECTING OFFICER				
Nevil Hage +981		PRINT FULL NAME HAGER/DERICK/E		
TYPE II PERMIT NUMBER (EXPIR	ATION DATE	TELEPHONE NUMBER	E .	***************************************
	L4/2022	(816)628-3925	5	
		. ,		
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: 4-Jan-2021

Lot # AG036401 Model 108cacd

Exp. Date 29-Dec-2022

<u>Cyl. Type</u> 108

<u>Component</u> Ethanol Certified Concentration 0.100 ± 2% BrAC (272 ppm)

Nitrogen

Balance

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

Concentration 800.0 ppm 253.0 ppm RGM Serial No. EB0010603 EB0010559 EB0010595 EB0010562 EB0010579

Concentration 393.0 ppm 258.2 ppm 208.3 ppm 104.2 ppm 52.81 ppm

 CRM Serial No.
 Concentration

 CC727493
 390.0 ppm

 CC727498
 150.0 ppm

Analytical Method:

CRM Serial No.

CC727481

CC727496

NDIR

Digitally signed by Quality Control Date: 2021.01.05 14:47:12 -06:00 Reason: Dry gas standard certification of analysis Location: Airgas USA LLC (Lab)

Approved for Release:

Norl 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 II

DERICK E HAGER

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.

5/14/2020 DATE . DIRECTOR OF STATE PUBLIC HEALTH LABORATORY 200173 NUMBER EXPIRES 5/14/2022 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 air



HAGER, DERICK Operator

200173

Date Issued 5/14/2020 Date Expires 5/14/2022