#### RECEIVED

By Tracy Crews at 11:16 am, Aug 12, 2022



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 more Complete this report whenever the instrument is serial Retain the original and send a copy within 15 days	erviced or repaired and whenever it is	placed into service.		
INTOX DMT SN S00171  NAME OF AGENCY Missouri State	e Highway Patrol	DATE OF INSPECTION 08/01/2022		
LOCATION OF INSTRUMENT (STREET AND CITY) R.C.S.O., 209 E. 4th, New London, MO 63459		TIME OF INSPECTION 08:55:36		
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.				
☑ DIAGNOSTIC RECORD				
DATE AND TIME 08/01/2022 08:55:38	☑ DETECTO	R		
☑ PROGRAM	☐ FILTER 1			
☑ SAMPLE CHAMBER 48.8°C	☐ FILTER 2			
☑ BREATH TUBE 46.0°C ☑ FILTER 3				
☑ PUMP		. STANDARD		
BREATH ANALYZER ACCURACY STANDAR	DS		1	
☐ SIMULATOR STANDARD		SSED ETHANOL-GAS MIXT	JRE	
	LOT#_AG024403	EXP. DATE	08/31/2022	
☐ SIMULATOR TEMP (34°C ± 0.2°C)	SIM. SN	SIM. NIST EXP DAT	E	
<ul> <li>□ CALIBRATION CHECK - (ONLY ONE STAR Run three tests using a standard. All three tests of .005 or less. Mark the box corresponding.</li> <li>□ 0.10% STANDARD - MUST READ E</li> <li>□ 0.08% STANDARD - MUST READ E</li> <li>□ 0.04% STANDARD - MUST READ E</li> </ul>	to the standard being used. BETWEEN 0.095% AND 0.105% INC BETWEEN 0.076% AND 0.084% INC	LUSIVE	ad	
TEST 1: 0.098	TEST 2: 0.098	TEST 3: 0.098		
☑ PERFORM R.F.I. TEST				
INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:				
REFUSALS: 0 004: 0	.0509: 0 .1014: 1	.1519: 0	OVER .19: 1	
LIST ANY NEW PARTS AND DESCRIBE ANY ALTERATION OR MODI ESTABLISHED LIMITS (USE OTHER SIDE IF NECESSARY)	FICATION THAT WAS MADE TO RESTORE THE INST	RUMENT TO OPERATE SATISFACTORIL	Y AND WITHIN	
INSPECTING OFFICER		/		
SIGNATURE (1917)	PRINT FULL NAMI BRETT D	E TAPPENDORF		
TYPE II PERMIT NUMBER 220050		PHONE NUMBER 60-385-2132		
RETURN COMPLETED REPORT TO THE  Breath Alcohol Program, Missouri Department of Health and Senior Services by mail, fax, or email				



#### 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: 2-Sep-2020

Lot # AG024403 Model 108cacd

Exp. Date

Cyl. Type

Component

**Certified Concentration** 

31-Aug-2022

DCM Carial Na

Ethanol Nitrogen 0.100 ± 2% BrAC (260 ppm)

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

Concentration	RGM Serial No.	Concentration
392.1 ppm	EB0010603	393.0 ppm
259.8 ppm	EB0010559	258.2 ppm
208.0 ppm	EB0010595	208.3 ppm
103.6 ppm	EB0010562	104.2 ppm
52.12 ppm	EB0010579	52.81 ppm
Concentration 800.0 ppm 253.0 ppm	CRM Serial No. 0056649 0056662	Concentration 390.1 ppm 150.2 ppm
	392.1 ppm 259.8 ppm 208.0 ppm 103.6 ppm 52.12 ppm Concentration 800.0 ppm	392.1 ppm

Analytical Method:

NDIR

Digitally signed by Quality Control Date: 2020,09.02 19:09:33 -05:00 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



## STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM



# PERMIT TYPE II

## **BRETT D. TAPPENDORF**

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 DMT**

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.

DATE2/10/2022	Laura & Nay
DATE	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER <b>220050</b>	
EXPIRES 2/10/2024	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES
	DIRECTOR OF DEFARMMENT OF FIELD FINANCES

MO 580-0771 (6-10)

LAB-4 (R6-10)

