#### RECEIVED

By Tracy Crews at 9:09 am, Sep 26, 2022



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

#### INTOX DMT MAINTENANCE REPORT

REPORT #1

Appendix II	ALOY DIMIT MINIMITEDIANO	E KEPUK I			KEI OKI #I	
Complete this r	eport at the time of the regular mo eport whenever the instrument is s nal and send a copy within 15 day	serviced or repaired and	whenever it is placed in			
500187		e Highway Patrol		DATE OF INSPECTION 09/25/2022		
LOCATION OF INSTR Montgomery	oment (street and city) County Jail, 211 E 3rd.,Montg	omery City		TIME OF INSPECTION 07:58:39		
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.						
☑ DIAGNOS	TIC RECORD			3111		
DATE AND	TIME 09/25/2022 07:58:42 SI DETECTOR					
☑ PROG	AM 🖾 FILTER 1					
⊠ SAMPI	CHAMBER 48.7°C					
☑ BREAT	H TUBE_48.1°C		X FILTER 3		No Michigan Sale in November 1	
☑ PÜMP	☑ INTERNAL STANDARD					
BREATH ANA	LYZER ACCURACY STANDAR	DS				
☐ SIMUL	TOR STANDARD		COMPRESSED ET	HANOL-GAS MIXTURE		
☑ STANDARI	SUPPLIER INTOXIMETER	LOT#_	AG200302	EXP. DATE <u>01/0</u>	03/2024	
SIMULATO	R TEMP (34°C ± 0.2°C)	SIM. SN		SIM. NIST EXP DATE		
of .005 or le ☑ 0.1 ☐ 0.0	RATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)  Iree tests using a standard. All three tests must be within ±5% of the standard value and must have a spread  5 or less. Mark the box corresponding to the standard being used.  10.10% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE  10.08% STANDARD - MUST READ BETWEEN 0.076% AND 0.084% INCLUSIVE  10.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE					
TEST 1: 0,099	TEST 2: 0.099		-2	TEST 3: 0.099		
☑ PERFORM	R.F.I. TEST					
INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:						
REFUSALS: 2	004: 3	,05-,09: 1	.1014: 1	.1519: 0	OVER .19: 0	
LIST ANY NEW PART ESTABLISHED LIMITS	S AND DESCRIBE ANY ALTERATION OR MODI (USE OTHER SIDE IF NECESSARY)	FICATION THAT WAS MADE TO F	ESTORE THE INSTRUMENT TO	OPERATE SATISFACTORILY AND V	WITHIN	
INSPECTING (SIGNATURE TYPE II PERMIT NUME 210241	Shill	EXPIRATION DATE 11/05/2023	PRINT FULL NAME RAYMOND S MILL TELEPHONE NUM 573-751-1	BER		
RETURN COM	PLETED REPORT TO THE B	reath Alcohol Program, y mail, fax, or email		Health and Senior Service	es	



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: 3-Jan-2022

**Lot** # AG200302 **Model** 108

**Exp Date** 3-Jan-2024 Cyl. Type 108

Component

Ethanol Nitrogen **Certified Concentration** 

0.100 ± 2% BrAC (260 ppm)

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

RGM Serial No. EB0010581 EB0010570

392.1 ppm 259.8 ppm 208.0 ppm 103.6 ppm

Concentration RGM Serial No. EB0010603 EB0010559 EB0010595 EB0010562 52.12 ppm EB0010579

Concentration 393.0 ppm 258.2 ppm 208.3 ppm 104.2 ppm 52.81 ppm

CRM Serial No. CC434668

Concentration 800.0 ppm 253.0 ppm

CRM Serial No. 0056649 0056662

Concentration

390.1 ppm 150.2 ppm

Analytical Method: NDIR

CC234503

EB0010285

EB0010561

EB0010681

Digitally signed by:Quality Control Reason:Dry gas standard certification of analysis Location:Airgas USA LLC (Lab) Date:01.04.2022 14:35

Approved for Release:

Rod Marsala

AG200302

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

## RAYMOND SCOTT MILLER

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 de	termination of the alcoholic content of blood	from a sample of expired air. Permit issued under the provisions of sections
577.020 t	through 577.041, RSMo and 306.111 through	h 306.119 RSMo.
	11/5/2021	Laura 2 Nag
		DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER	210241	
EXPIRES	11/5/2023	Donnel A. Kann wy
MO 580-0771 (6-	10)	DIRECTOR OF DEPARTMENT OF HEALTH AND SENJOR SERVICES  LAB4 (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 in Missouri.

Operator MILLER, RAYMOND Permit No 210241

Date Expires 11/5/2023

