#### RECEIVED

By Tracy Crews at 1:35 pm, Oct 04, 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 month Complete this report whenever the instrument is ser Retain the original and send a copy within 15 days t	rviced or repaired and when	never it is placed into s	35 days). ervice.	
NAME OF AGENCY  500202 Missouri State Highway Patrol			DATE OF INSPECTION 09/21/2022	
LOCATION OF INSTRUMENT (STREET AND CITY) 2920 N. Shamrock Rd, Jefferson City			TIME OF INSPECTION 08:46:39	
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.				
☑ DIAGNOSTIC RECORD				
DATE AND TIME <u>09/21/2022 08:46:42</u> ☑ DETECTOR				
☑ PROGRAM	⊠ FI	I FILTER 1		
SAMPLE CHAMBER 48.7°C				
☑ BREATH TUBE 48.1°C  ☑ FILTER 3				
☑ PUMP ☑ INTERNAL STANDARD				
BREATH ANALYZER ACCURACY STANDARDS				
☐ SIMULATOR STANDARD ☐ COMPRESSED ETHANOL-GAS MIXTURE				
STANDARD SUPPLIER INTOXIMETERS	LOT# AG2	00302	EXP. DATE <u>01/03/2024</u>	
SIMULATOR TEMP (34°C ± 0.2°C)SIM. SN		SIM.	SIM. NIST EXP DATE	
<ul> <li>□ CALIBRATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT) Run three tests using a standard. 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 being used.</li> <li>□ 0.10% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE</li> <li>□ 0.08% STANDARD - MUST READ BETWEEN 0.076% AND 0.084% INCLUSIVE</li> <li>□ 0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE</li> </ul>				
TEST 1: 0.099	TEST 2: 0.099		TEST 3: 0.099	
☑ PERFORM R.F.I. TEST				
INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:				
				OVER .19: 0
LIST ANY NEW PARTS AND DESCRIBE ANY ALTERATION OR MODIFICA ESTABLISHED LIMITS (USE OTHER SIDE IF NECESSARY)  Digital Pots modification performed	TION THAT WAS MADE TO RESTOR	ETHE INSTRUMENT TO OPER	ATE SATISFACTORILY AND WI	THIN
INSPECTING OFFICER				
9 5 1/.		PRINT FULL NAME  JIMMY L CLEVELAND		
1996 II PERMIT NUMBER 210096	05/18/2023 TELEPHONE NUI 573-751-4			
RETURN COMPLETED REPORT TO THE  Breath Alcohol Program, Missouri Department of Health and Senior Services by mail, fax, or email				

# Airgas.

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. 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

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: Airgas USA LLC (Lab) Date:01.04,2022 14:36

Approved for Release:

Horl Morsela

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** 



## PERMIT TYPE II JIMMY L. CLEVELAND

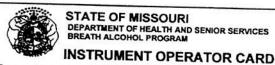
is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

ALCO-SENSOR IV WITH PRINTER, 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.

5/18/2021 DATE DIRECTOR OF STATE PUBLIC HEALTH LABORATORY NUMBER 210096 EXPIRES 5/18/2023 DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES MO 580-0771 (6-10)

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

CLEVELAND, JIMMY

Permit No 210096

Date Issued 5/18/2021 Date Expires 5/18/2023

