

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

### INTOX DMT MAINTENANCE REPORT

REPORT #1

MATON DIVITION TO THE PARTY OF THE	LIOILI					
Complete this report at the time of the regular monthly Complete this report whenever the instrument is service Retain the original and send a copy within 15 days to t	ced or repaired and	whenever it is placed i				
TOX DMT SN S00233  NAME OF AGENCY Hayti Police department			DATE OF INSPECTION 09/22/2022			
300 East Broadway			17:51:08			
CHECKLIST: Place a mark in the box by each item if values where determined). Unmarked items must be c	found to be satisfactorrected before usi	tory or is operating wing instrument.	thin established limits. (V	Vrite in observed		
☑ DIAGNOSTIC RECORD						
DATE AND TIME <u>09/22/2022 17:51:10</u> ☑ DETECTOR						
□ PROGRAM		FILTER 1				
SAMPLE CHAMBER 48.8°C		FILTER 2				
BREATH ANALYZER ACCURACY STANDARDS						
SIMULATOR STANDARD		COMPRESSEDE	THANOL-GAS MIXTURI	E		
STANDARD SUPPLIER INTOXIMETERS	LOT#	AG133405	EXP. DATE 11	/30/2023		
SIMULATOR TEMP (34°C ± 0.2°C)	SIM. SN_		SIM. NIST EXP DATE_			
<ul> <li>☑ CALIBRATION CHECK - (ONLY ONE STANDAR Run three tests using a standard. All three tests m of .005 or less. Mark the box corresponding to the ☑ 0.10% STANDARD - MUST READ BETV</li> <li>☑ 0.08% STANDARD - MUST READ BETV</li> <li>☑ 0.04% STANDARD - MUST READ BETV</li> </ul>	VEEN 0.095% AND	ed. 0.105% INCLUSIVE 0.084% INCLUSIVE				
ST 1: 0.099 TEST 2: 0.099		TEST 3: 0.099				
PERFORM R.F.I. TEST						
NDICATE THE NUMBER OF BREATH TESTS IN	THE FOLLOWING	RANGES SINCE T	HE LAST MAINTENAN	ICE REPORT:		
REFUSALS: 0 004: 1 .05	09: 0	.1014: 0	.1519: 0	OVER .19: 0		
IST ANY NEW PARTS AND DESCRIBE ANY ALTERATION OR MODIFICATION STABLISHED LIMITS (USE OTHER SIDE IF NECESSARY)	ON THAT WAS MADE TO R	ESTORE THE INSTRUMENT TO	OPERATE SATISFACTORILY AN	D WITHIN		
By Tracy Crews at 9:09 am, Sep 26, 2022						
NSPECTING OFFICER						
Danco		DAVID MACLIN				
YPE II PERMIT NUMBER 210125	06/11/2023	573-359-6				
RETURN COMPLETED REPORT TO THE Breath			of Health and Senior Sen	vices		
O 590 2000 (5.40)	FOLIAL OPPOPER WITH A					



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: 1-Dec-2021

Lot # AG133405 Model 108

Exp Date 30-Nov-2023

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	RGM Serial No.	Concentration
EB0010581	392.1 ppm	EB0010603	393.0 ppm
EB0010570	259.8 ppm	EB0010559	258.2 ppm
EB0010285	208.0 ppm	EB0010595	208.3 ppm
EB0010561	103.6 ppm	EB0010562	104.2 ppm
EB0010681	52.12 ppm	EB0010579	52.81 ppm

 CRM Serial No.
 Concentration
 CRM Serial No.
 Concentration

 CC434668
 800.0 ppm
 0056649
 390.1 ppm

 CC234503
 253.0 ppm
 0056662
 150.2 ppm

Analytical Method: NDIR

Digitally signed by:Quality Control
Reason:Dry gas standard certification of analysis
Location:Airgas USA LLC (Lab)
Date:12.01.2021 20:06

Approved for Release:

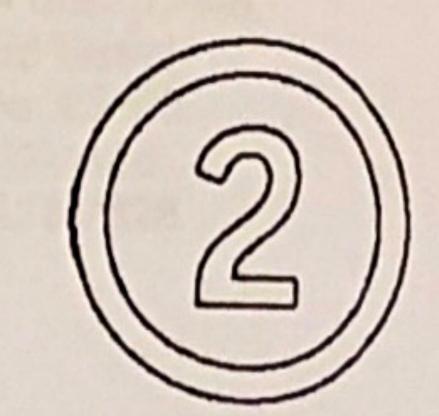
Rod Marsala

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



# PERMIT TYPE II DAVID MACLIN

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

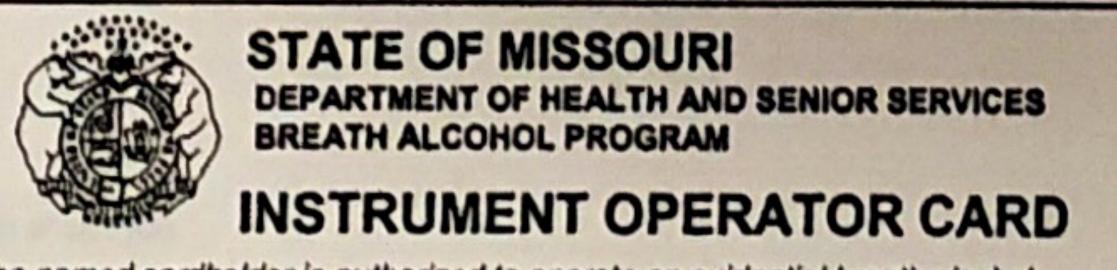
for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

MO 580-0771 (G-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

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 in Missouri.

Operator MACLIN, DAVID

Permit No 210125

Date Issued 6/11/2021 Date Expires 6/11/2023

