

**RECEIVED**

By Tracy Crews at 8:01 am, Apr 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 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 Breath Alcohol Program, DHSS.

INTOX DMT SN 500289	NAME OF AGENCY BOONE COUNTY SHERIFF'S OFFICE	DATE OF INSPECTION 04/11/2022
LOCATION OF INSTRUMENT (STREET AND CITY) 2121 E. COUNTY DR, COLUMBIA		TIME OF INSPECTION 10:05:07

**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>04/11/2022 10:05:10</u>	<input checked="" type="checkbox"/> DETECTOR
<input checked="" type="checkbox"/> PROGRAM	<input checked="" type="checkbox"/> FILTER 1
<input checked="" type="checkbox"/> SAMPLE CHAMBER <u>48.8°C</u>	<input checked="" type="checkbox"/> FILTER 2
<input checked="" type="checkbox"/> BREATH TUBE <u>48.1°C</u>	<input checked="" type="checkbox"/> FILTER 3
<input checked="" type="checkbox"/> PUMP	<input checked="" type="checkbox"/> INTERNAL STANDARD

**BREATH ANALYZER ACCURACY STANDARDS**

SIMULATOR STANDARD       COMPRESSED ETHANOL-GAS MIXTURE

STANDARD SUPPLIER INTOXIMETERS      LOT # AG019502      EXP. DATE 07/13/2022

SIMULATOR TEMP (34°C ± 0.2°C) \_\_\_\_\_      SIM. SN \_\_\_\_\_      SIM. NIST EXP DATE \_\_\_\_\_

**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.

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: 0.101      TEST 2: 0.101      TEST 3: 0.101

**PERFORM R.F.I. TEST**

**INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:**

REFUSALS: 0	0-.04: 16	.05-.09: 2	.10-.14: 0	.15-.19: 4	OVER .19: 1
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LIST ANY NEW PARTS AND DESCRIBE ANY ALTERATION OR MODIFICATION THAT WAS MADE TO RESTORE THE INSTRUMENT TO OPERATE SATISFACTORILY AND WITHIN ESTABLISHED LIMITS (USE OTHER SIDE IF NECESSARY)

Instrument operating satisfactorily and within established limits.

**INSPECTING OFFICER**

SIGNATURE 	PRINT FULL NAME STEVEN H VERBLE	
TYPE II PERMIT NUMBER 210084	EXPIRATION DATE 04/22/2023	TELEPHONE NUMBER 573-875-1111

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) 533-7326



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



**Certificate of Analysis**

Test Date: 15-Jul-2020

Customer Name  
 Exclusive Supplier  
 Intoximeters, Inc.  
 2081 Craig Road  
 St. Louis, Mo. 63146

Lot # AG019502 Model 108cacc

Exp. Date	Cyl. Type	Component	Certified Concentration
13-Jul-2022	108	Ethanol	0.100 ± 2% BrAC (260 ppm)
		Nitrogen	Balance

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

RGM Serial No.	Concentration	CRM Serial No.	Concentration
EB0010581	392.1 ppm	EB0010603	393.0 ppm
EB0010570	259.8 ppm	EB0010559	258.2 ppm
EB0010285	208.0 ppm	EB0010585	208.3 ppm
EB0010561	103.6 ppm	EB0010582	104.2 ppm
EB0010681	52.12 ppm	EB0010579	52.81 ppm
CC434688	800.0 ppm	CC434688	390.1 ppm
CC234503	253.0 ppm	0058662	150.2 ppm

Analytical Method: NDIR

Digitally signed by: Quality Center  
 Date: 2020.07.15 14:50:04 CDT  
 Location: Airgas USA LLC (Lab)

Approved for Release: Rod Marsala  
 Rod Marsala

ISO 17025:2005 A2LA accredited. Certificate Number 3082.06  
 ISO 17034:2016 A2LA accredited. Certificate Number 3082.07

**PERMIT  
 TYPE II**

**STEVEN H. VERBLE**

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.

DATE 4/22/2021  
 NUMBER 210084  
 EXPIRES 4/22/2023  
 DIRECTOR OF STATE PUBLIC HEALTH LABORATORY  
 DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

STATE OF MISSOURI  
 DEPARTMENT OF HEALTH AND SENIOR SERVICES  
 BREATH ALCOHOL PROGRAM  
**INSTRUMENT OPERATOR CARD**  
 The named cardholder is authorized to operate an instrument of breath alcohol measurement for the determination of the alcoholic content in breath form of insureds as a condition of their insurance policy.  
 Operator: VERBLE, STEVEN  
 Permit No: 210084  
 Date Issued: 4/22/2021 Date Expires: 4/22/2023