

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

INTOX EC/IR II MAINTENANCE REPORT

REPORT #3

| Complete this report at the time o | 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 EC/IR II SN | NAME OF AGENCY | DATE OF INSPECTION | | |
| 12673 | KIRKWOOD | 12/23/2024 | | |
| LOCATION OF INSTRUMENT (STREET AND CITY | · I | TIME OF INSPECTION | | |
| 131 W. Madison Kirkwood | , | | | |
| | | 14:03 CST | | |
| 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. | | | | |
| X DIAGNOSTIC RECORD | | | | |
| X BLANK CHECK | X CO2 CHECK | | | |
| X FC 1 TEMP | X FLOW CHECK | | | |
| X SRC TEMP | X FCB CHECK | | | |
| | | | | |
| X DET TEMP X CRC COMP CHECK | | | | |
| X BT TEMP X CRC CAL CHECK | | | | |
| X STD 2 TEMP X PRINT TEST | | | | |
| X ETH CHECK | | | | |
| | | | | |
| BREATH ANALYZER ACCURACY STAND | ARDS | | | |
| SIMULATOR SOLUTION X COMPRESSED ETHANOL-GAS MIXTURE | | | | |
| X STANDARD SUPPLIER INTOX | IMETERS LOT# ag306807 | EXP. DATE 03/09/2025 | | |
| SIMULATOR TEMP (34°C +0.2°C) | SIM. SN | SIM. NIST EXP DATE | | |
| - · | | | | |
| | | | | |
| X CALIBRATION CHECK - (ONLY ON | E STANDARD IS TO BE USED PER MAIN | ITENANCE REPORT) | | |
| | | Tanada Marona, | | |
| Run three tests using a stan | | | | |
| Run three tests using a stan and must have a spread of .0 | dard solution. All three tests r | nust be within +5% of the standard value | | |
| Run three tests using a stan and must have a spread of .0 used. | dard solution. All three tests r | | | |
| and must have a spread of .0 used. | dard solution. All three tests r 05 or less. Mark the box corresp | must be within $\pm 5\%$ of the standard value conding to the standard solution being | | |
| and must have a spread of .0 used. X 0.10% STANDARD - MUST READ | dard solution. All three tests r 05 or less. Mark the box corresp BETWEEN 0.095% AND 0.105% INCLUS | nust be within ±5% of the standard value conding to the standard solution being | | |
| and must have a spread of .0 used. X 0.10% STANDARD - MUST READ 0.08% STANDARD - MUST READ | dard solution. All three tests r 05 or less. Mark the box corresp BETWEEN 0.095% AND 0.105% INCLUS BETWEEN 0.076% AND 0.084% INCLUS | nust be within ±5% of the standard value conding to the standard solution being SIVE | | |
| and must have a spread of .0 used. X 0.10% STANDARD - MUST READ 0.08% STANDARD - MUST READ | dard solution. All three tests r 05 or less. Mark the box corresp BETWEEN 0.095% AND 0.105% INCLUS | nust be within ±5% of the standard value conding to the standard solution being SIVE | | |
| and must have a spread of .0 used. X 0.10% STANDARD - MUST READ 0.08% STANDARD - MUST READ 0.04% STANDARD - MUST READ | dard solution. All three tests roots or less. Mark the box corresponders of the box corresponder | nust be within ±5% of the standard value conding to the standard solution being SIVE | | |
| and must have a spread of .0 used. X 0.10% STANDARD - MUST READ 0.08% STANDARD - MUST READ 0.04% STANDARD - MUST READ TEST 1 0.097 g/210L | dard solution. All three tests r 05 or less. Mark the box corresp BETWEEN 0.095% AND 0.105% INCLUS BETWEEN 0.076% AND 0.084% INCLUS BETWEEN 0.038% AND 0.042% INCLUS TEST 2 0.097 g/210L | TEST 3 0.097 g/210L | | |
| and must have a spread of .0 used. X 0.10% STANDARD - MUST READ 0.08% STANDARD - MUST READ 0.04% STANDARD - MUST READ TEST 1 0.097 g/210L | dard solution. All three tests roots or less. Mark the box corresponders of the box corresponder | TEST 3 0.097 g/210L | | |
| and must have a spread of .0 used. X 0.10% STANDARD - MUST READ 0.08% STANDARD - MUST READ 0.04% STANDARD - MUST READ TEST 1 0.097 g/210L INDICATE THE NUMBER OF BREATH | dard solution. All three tests rough to or less. Mark the box correspondence of the solution o | TEST 3 0.097 g/210L | | |
| and must have a spread of .0 used. X 0.10% STANDARD - MUST READ 0.08% STANDARD - MUST READ 0.04% STANDARD - MUST READ TEST 1 0.097 g/210L INDICATE THE NUMBER OF BREATH REFUSALS 0 004 0 | dard solution. All three tests r 05 or less. Mark the box corresp BETWEEN 0.095% AND 0.105% INCLUS BETWEEN 0.076% AND 0.084% INCLUS BETWEEN 0.038% AND 0.042% INCLUS TEST 2 0.097 g/210L TESTS IN THE FOLLOWING RANGES SIN | TEST 3 0.097 g/210L TEST 3 0.097 g/210L TEST 3 0.097 g/210L TEST 3 0.097 g/210L | | |
| and must have a spread of .0 used. X 0.10% STANDARD - MUST READ 0.08% STANDARD - MUST READ 0.04% STANDARD - MUST READ TEST 1 0.097 g/210L INDICATE THE NUMBER OF BREATH REFUSALS 0 004 0 LIST ANY NEW PARTS AND DESCRIBE ANY ALT | dard solution. All three tests r 05 or less. Mark the box corresp BETWEEN 0.095% AND 0.105% INCLUS BETWEEN 0.076% AND 0.084% INCLUS BETWEEN 0.038% AND 0.042% INCLUS TEST 2 0.097 g/210L TESTS IN THE FOLLOWING RANGES SIN .0509 0 .1014 0 ERATION OR MODIFICATION THAT WAS MADE TO THE | TEST 3 0.097 g/210L TEST 3 0.097 g/210L TEST 3 0.097 g/210L TEST 3 0.097 g/210L | | |
| and must have a spread of .0 used. X 0.10% STANDARD - MUST READ 0.08% STANDARD - MUST READ 0.04% STANDARD - MUST READ TEST 1 0.097 g/210L INDICATE THE NUMBER OF BREATH REFUSALS 0 004 0 | dard solution. All three tests r 05 or less. Mark the box corresp BETWEEN 0.095% AND 0.105% INCLUS BETWEEN 0.076% AND 0.084% INCLUS BETWEEN 0.038% AND 0.042% INCLUS TEST 2 0.097 g/210L TESTS IN THE FOLLOWING RANGES SIN .0509 0 .1014 0 ERATION OR MODIFICATION THAT WAS MADE TO THE | TEST 3 0.097 g/210L TEST 3 0.097 g/210L TEST 3 0.097 g/210L TEST 3 0.097 g/210L | | |
| and must have a spread of .0 used. X 0.10% STANDARD - MUST READ 0.08% STANDARD - MUST READ 0.04% STANDARD - MUST READ TEST 1 0.097 g/210L INDICATE THE NUMBER OF BREATH REFUSALS 0 004 0 LIST ANY NEW PARTS AND DESCRIBE ANY ALT SATISFACTORILY AND WITHIN ESTABLISHED L | dard solution. All three tests roots or less. Mark the box corresponds or less. Mark the box corresponds or less. Mark the box corresponds or local settlem 0.095% AND 0.105% INCLUSE BETWEEN 0.076% AND 0.084% INCLUSE TEST 2 0.097 g/210L TEST 2 0.097 g/210L TESTS IN THE FOLLOWING RANGES SINGLED OF LOCAL SETTLEM | TEST 3 0.097 g/210L TEST 3 0.097 g/210L TEST 3 0.097 g/210L TEST 3 0.097 g/210L | | |
| and must have a spread of .0 used. X 0.10% STANDARD - MUST READ 0.08% STANDARD - MUST READ 0.04% STANDARD - MUST READ TEST 1 0.097 g/210L INDICATE THE NUMBER OF BREATH REFUSALS 0 004 0 LIST ANY NEW PARTS AND DESCRIBE ANY ALT | dard solution. All three tests roots or less. Mark the box corresponds or less. Mark the box corresponds or less. Mark the box corresponds or local settlem 0.095% AND 0.105% INCLUSE BETWEEN 0.076% AND 0.084% INCLUSE TEST 2 0.097 g/210L TEST 2 0.097 g/210L TESTS IN THE FOLLOWING RANGES SINGLED OF LOCAL SETTLEM | TEST 3 0.097 g/210L TEST 3 0.097 g/210L TEST 3 0.097 g/210L TEST 3 0.097 g/210L | | |
| and must have a spread of .0 used. X 0.10% STANDARD - MUST READ 0.08% STANDARD - MUST READ 0.04% STANDARD - MUST READ TEST 1 0.097 g/210L INDICATE THE NUMBER OF BREATH REFUSALS 0 004 0 LIST ANY NEW PARTS AND DESCRIBE ANY ALT SATISFACTORILY AND WITHIN ESTABLISHED L | dard solution. All three tests roots or less. Mark the box corresponds or less. Mark the box corresponds or less. Mark the box corresponds or local settlem 0.095% AND 0.105% INCLUSE BETWEEN 0.076% AND 0.084% INCLUSE TEST 2 0.097 g/210L TEST 2 0.097 g/210L TESTS IN THE FOLLOWING RANGES SINGLED OF LOCAL SETTLEM | TEST 3 0.097 g/210L TEST 3 0.097 g/210L TEST 3 0.097 g/210L TEST 3 0.097 g/210L | | |
| and must have a spread of .0 used. X 0.10% STANDARD - MUST READ 0.08% STANDARD - MUST READ 0.04% STANDARD - MUST READ TEST 1 0.097 g/210L INDICATE THE NUMBER OF BREATH REFUSALS 0 004 0 LIST ANY NEW PARTS AND DESCRIBE ANY ALT SATISFACTORILY AND WITHIN ESTABLISHED L | dard solution. All three tests roots or less. Mark the box corresponds or less. Mark the box corresponds or less. Mark the box corresponds or local settlem 0.095% AND 0.105% INCLUSE BETWEEN 0.076% AND 0.084% INCLUSE TEST 2 0.097 g/210L TEST 2 0.097 g/210L TESTS IN THE FOLLOWING RANGES SINGLED OF LOCAL SETTLEM | TEST 3 0.097 g/210L TEST 3 0.097 g/210L TEST 3 0.097 g/210L TEST 3 0.097 g/210L | | |
| and must have a spread of .0 used. X 0.10% STANDARD - MUST READ 0.08% STANDARD - MUST READ 0.04% STANDARD - MUST READ TEST 1 0.097 g/210L INDICATE THE NUMBER OF BREATH TEST 1 004 0 LIST ANY NEW PARTS AND DESCRIBE ANY ALT SATISFACTORILY AND WITHIN ESTABLISHED LEST SATISFACTORILY | dard solution. All three tests roots or less. Mark the box corresponds or less. Mark the box corresponds or less. Mark the box corresponds or local settlem 0.095% AND 0.105% INCLUSE BETWEEN 0.076% AND 0.084% INCLUSE TEST 2 0.097 g/210L TEST 2 0.097 g/210L TESTS IN THE FOLLOWING RANGES SINGLED OF LOCAL SETTLEM | TEST 3 0.097 g/210L TEST 3 0.097 g/210L TEST 3 0.097 g/210L TEST 3 0.097 g/210L | | |
| and must have a spread of .0 used. X 0.10% STANDARD - MUST READ 0.08% STANDARD - MUST READ 0.04% STANDARD - MUST READ TEST 1 0.097 g/210L INDICATE THE NUMBER OF BREATH TEST ANY NEW PARTS AND DESCRIBE ANY ALT SATISFACTORILY AND WITHIN ESTABLISHED LEST SATISFACTORILY AND WITHIN ESTA | dard solution. All three tests roots or less. Mark the box corresponds or less. Mark the box corresponds or less. Mark the box corresponds or local settlem 0.095% AND 0.105% INCLUSE BETWEEN 0.076% AND 0.084% INCLUSE TEST 2 0.097 g/210L TEST 2 0.097 g/210L TESTS IN THE FOLLOWING RANGES SINGLED OF LOCAL SETTLEM | TEST 3 0.097 g/210L TEST 3 0.097 g/210L TEST 3 0.097 g/210L TEST 3 0.097 g/210L | | |
| and must have a spread of .0 used. X 0.10% STANDARD - MUST READ 0.08% STANDARD - MUST READ 0.04% STANDARD - MUST READ TEST 1 0.097 g/210L INDICATE THE NUMBER OF BREATH TEST 1 0.097 g/210L REFUSALS 0 004 0 LIST ANY NEW PARTS AND DESCRIBE ANY ALT SATISFACTORILY AND WITHIN ESTABLISHED LEST SATISFACTORILY AND WITHIN ESTABL | dard solution. All three tests rough of or less. Mark the box corresponds or less. Mark the box corresponds or less. Mark the box corresponds or local settlem 0.095% AND 0.105% INCLUSE BETWEEN 0.076% AND 0.084% INCLUSE TEST 2 0.097 g/210L TEST 2 0.097 g/210L TESTS IN THE FOLLOWING RANGES SINGLED OF LOCAL SETTLEM OF LOCAL SETT | TEST 3 0.097 g/210L TEST 3 0.097 g/210L TEST 3 0.097 g/210L TEST 3 0.097 g/210L | | |
| and must have a spread of .0 used. X 0.10% STANDARD - MUST READ 0.08% STANDARD - MUST READ 0.04% STANDARD - MUST READ TEST 1 0.097 g/210L INDICATE THE NUMBER OF BREATH TEST 1 0.097 g/210L REFUSALS 0 004 0 LIST ANY NEW PARTS AND DESCRIBE ANY ALT SATISFACTORILY AND WITHIN ESTABLISHED LEST SATISFACTORILY AND WITHIN ESTABL | dard solution. All three tests rost or less. Mark the box corresponds or less. Mark the box corresponds or less. Mark the box corresponds or local settlem 0.095% AND 0.105% INCLUSE BETWEEN 0.076% AND 0.084% INCLUSE BETWEEN 0.038% AND 0.042% INCLUSE TESTS IN THE FOLLOWING RANGES SINGLED TO STATE OF LIMITS (USE OTHER SIDE IF NECESSARY). PRINT FULL NAME HANCE, MICHA | TEST 3 0.097 g/210L TEST 3 0.097 g/210L TO OVER .19 0 TESTORE THE INSTRUMENT TO OPERATE | | |
| and must have a spread of .0 used. X 0.10% STANDARD - MUST READ 0.08% STANDARD - MUST READ 0.04% STANDARD - MUST READ 1.0097 g/210L INDICATE THE NUMBER OF BREATH 1.0097 g/210L REFUSALS 0 004 0 LIST ANY NEW PARTS AND DESCRIBE ANY ALT SATISFACTORILY AND WITHIN ESTABLISHED LENGTH SATISFACTORILY AND WITHIN ESTABLISHED LENGTH SIGNATURE 1.0097 g/210L INSPECTING OFFICER SIGNATURE 1.0097 g/210L EXPIRE | dard solution. All three tests rost or less. Mark the box corresponds or local settlem 0.095% AND 0.105% INCLUSE BETWEEN 0.076% AND 0.084% INCLUSE BETWEEN 0.038% AND 0.042% INCLUSE TESTS IN THE FOLLOWING RANGES SINGLAR TO SETTLE OF LIMITS (USE OTHER SIDE IF NECESSARY). PRINT FULL NAME HANCE, MICHA TELEPHONE NUMBER | TEST 3 0.097 g/210L TEST 3 0.097 g/210L CE THE LAST MAINTENANCE REPORT: .1519 0 OVER .19 0 RESTORE THE INSTRUMENT TO OPERATE | | |
| and must have a spread of .0 used. X 0.10% STANDARD - MUST READ 0.08% STANDARD - MUST READ 0.04% STANDARD - MUST READ 1.0097 g/210L INDICATE THE NUMBER OF BREATH 1.0097 SATISFACTORILY AND WITHIN ESTABLISHED LEADING AND WITHIN ESTABLISHED LEADING OFFICER SIGNATURE 1.0097 SIGNA | dard solution. All three tests rost or less. Mark the box corresponds or less. Mark the box corresponds or less. Mark the box corresponds or local settlem 0.095% AND 0.105% INCLUSE BETWEEN 0.076% AND 0.084% INCLUSE BETWEEN 0.038% AND 0.042% INCLUSE TESTS IN THE FOLLOWING RANGES SINGLED TO SETTLE OF LIMITS (USE OTHER SIDE IF NECESSARY). PRINT FULL NAME HANCE, MICHA | TEST 3 0.097 g/210L TEST 3 0.097 g/210L CE THE LAST MAINTENANCE REPORT: .1519 0 OVER .19 0 RESTORE THE INSTRUMENT TO OPERATE | | |
| and must have a spread of .0 used. X 0.10% STANDARD - MUST READ 0.08% STANDARD - MUST READ 0.04% STANDARD - MUST READ 0.04% STANDARD - MUST READ TEST 1 0.097 g/210L INDICATE THE NUMBER OF BREATH OLD COMMENT OF BREATH O | dard solution. All three tests rost or less. Mark the box corresponds or local settlem 0.095% AND 0.105% INCLUSE BETWEEN 0.076% AND 0.084% INCLUSE TEST 2 0.097 g/210L TEST 2 0.097 g/210L TESTS IN THE FOLLOWING RANGES SINGLED TO SETTLE OF LOCAL SETTLEMENT OF LOCA | TEST 3 0.097 g/210L TEST 3 0.097 g/210L CE THE LAST MAINTENANCE REPORT: .1519 0 OVER .19 0 RESTORE THE INSTRUMENT TO OPERATE | | |
| and must have a spread of .0 used. X 0.10% STANDARD - MUST READ 0.08% STANDARD - MUST READ 0.04% STANDARD - MUST READ 0.04% STANDARD - MUST READ INDICATE THE NUMBER OF BREATH SATISFACTORILY AND WITHIN ESTABLISHED LEADING AND WITHIN ESTABLISHED LEADING AND WITHIN ESTABLISHED LEADING OFFICER SIGNATURE TYPE II PERMIT NUMBER SIGNATURE TYPE SIGNATURE SIGNATURE TYPE SIGNATURE SIGNATU | dard solution. All three tests of the corresponding of the corresponding part of the correspondi | TEST 3 0.097 g/210L TEST 3 0.097 g/210L CE THE LAST MAINTENANCE REPORT: .1519 0 OVER .19 0 RESTORE THE INSTRUMENT TO OPERATE | | |
| and must have a spread of .0 used. X 0.10% STANDARD - MUST READ 0.08% STANDARD - MUST READ 0.04% STANDARD - MUST READ 0.04% STANDARD - MUST READ INDICATE THE NUMBER OF BREATH SATISFACTORILY AND WITHIN ESTABLISHED LEADING AND WITHIN ESTABLISHED LEADING AND WITHIN ESTABLISHED LEADING OFFICER SIGNATURE TYPE II PERMIT NUMBER SIGNATURE TYPE SIGNATURE SIGNATURE TYPE SIGNATURE SIGNATU | dard solution. All three tests rost or less. Mark the box corresponds or local settlem 0.095% AND 0.105% INCLUSE BETWEEN 0.076% AND 0.084% INCLUSE TEST 2 0.097 g/210L TEST 2 0.097 g/210L TESTS IN THE FOLLOWING RANGES SINGLED TO SETTLE OF LOCAL SETTLEMENT OF LOCA | TEST 3 0.097 g/210L TEST 3 0.097 g/210L CE THE LAST MAINTENANCE REPORT: .1519 0 OVER .19 0 RESTORE THE INSTRUMENT TO OPERATE | | |

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: 13-Mar-2023

Lot # AG306807 Model 108

Exp Date 9-Mar-2025 Cyl. Type

Component

Certified Concentration

108

Ethanol Nitrogen 0.100 ± 2% BrAC (272 ppm)

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

RGM Serial No.

Concentration

RGM Serial No.

Concentration

EB0010581 EB0010570 391.8 ppm 259,8 ppm EB0010603 EB0010559 392.5 ppm

EB0010285

209.0 ppm

EB0010562

258.9 ppm 104.2 ppm

EB0010561

103.7 ppm

EB0010579

EB0010681

52.22 ppm

52.94 ppm

CRM Serial No.

Concentration

CRM Serial No.

Concentration

CC727481

800.0 ppm

CC727493

390.0 ppm

CC727496

253.0 ppm

CC727498

150.0 ppm

Analytical Method: NDIR

Digitally signed by:Quality Control Reason:Dry gas standard certification of analysis Location:Airgas USA LLC (Lab) Date:03.16.2023 13:02

Approved for Release:

ISO 17025:2017 A2LA accredited. Certificate Number 3082.06 ISO 17034:2016 A2LA accredited. Certificate Number 3082.07



MO 580-0771 (6-10)

STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM



LAB-4 (R6-10)

PERMIT TYPE II

MICHAEL A. HANCE

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 EC/IR II | | | | |
|--|--|--|--|--|
| 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. | | | | |
| or rioze though or rioze, home and coolers the | Mile Massin | | | |
| DATE:10/6/2023 | DIRECTOR OF STATE PUBLIC HEALTH LABORATORY | | | |
| NUMBER 230216 | | | | |
| EXPIRES 10/6/2025 | Davla I. Nichelson | | | |
| | 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 evidential breath alcohol instrument for the determination of the alcoholic content in breath form of expired air in Missouri.

Operator

HANCE, MICHAEL

Permit No 230216 Date Issued 10/6/2023

Date Expires 10/6/2025

