

MISSOURI DEPARTMENT OF HEALTH AND SEISTATE PUBLIC HEALTH LABORATORY
BREATH ALCOHOL PROGRAM

RECEIVED

By Tracy Crews at 11:57 am, Aug 09, 2024

INTOX EC/IR II MAINTENANCE REPORT

REPORT #3

F # 1 + 117 - 1 + 11 + 1	E III				
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 with	hin 15 days to the	Breath Alcohol Pr	ogram, DHSS.	
INTOX EC/IR II SN	NAME OF AGENCY		DATE OF INSPECTION		
12702	MANCHESTER PD		08/07/2024		
LOCATION OF INSTRUMENT (STREET AND CITY	()	y .	TIME OF INSPECTION	Г	
200 Highlands Blvd Manchester			08:12		
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	Tet.				
		X CO2 CHECK			
		X FLOW CHECK			
X SRC TEMP X FCB CHECK					
X DET TEMP		X CRC COMP CHE	CK		
X BT TEMP	E	X CRC CAL CHEC	K		
X STD 2 TEMP		X PRINT TEST	9		
X ETH CHECK		Record			
BREATH ANALYZER ACCURACY STAND	ARDS				
SIMULATOR SOLUTION		X COMPRESSED E	THANOL-GAS MIXTU	IRE	
X STANDARD SUPPLIER INTOX	IMETERS	LOT# AG311004	EXP.	DATE 04/20/2025	
SIMULATOR TEMP (34°C +0.2°C)	SIM.	SN	SIM. NIST EXP	DATE	
X CALIBRATION CHECK - (ONLY ON	E STANDARD IS TO I	BE USED PER MAIN	TENANCE REPORT)		
hand				% of the standard value	
Run three tests using a standard solution. 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 solution being used.					
X 0.10% STANDARD - MUST READ	DETRIETN O OOES AN	ND 0 105% INCLUD	T110		
Beauty II					
0.08% STANDARD - MUST READ					
0.04% STANDARD - MUST READ	BETWEEN 0.038% Ar	ND 0.042% INCLUS	TAE		
TEST 1 0.100 g/210L	TEST 2 0.100	g/210L	TEST 3 0.10	0 g/210L	
INDICATE THE NUMBER OF BREATH	TESTS IN THE FOLLO	OWING RANGES SING	I CE THE LAST MAIN	TENANCE REPORT.	
				Tanada Marona.	
REFUSALS 0 004 0	.0509 0	.1014 0	.1519 0	OVER .19 1	
LIST ANY NEW PARTS AND DESCRIBE ANY ALT	ERATION OR MODIFICATION	N THAT WAS MADE TO RE	STORE THE INSTRUMENT	TO OPERATE	
SATISFACTORILY AND WITHIN ESTABLISHED LIMITS (USE OTHER SIDE IF NECESSARY).					
INSPECTING OFFICER		M "35 - 5 - 5 - 5 .	ALC: FEXT THE		
SIGNATURE	\	PRINT FULL NAME			
► F2 9.	366	TOEDEBUSCH, R	ANDY		
	ATION DATE	TELEPHONE NUMBER			
240101 05/0	07/2026	(636)227-1410	0		
RETURN COMPLETED REPORT TO THE:					
Breath Alcohol Program, Missouri Department of Health and Senior Services,					
by mail, fax, or e-mail					



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: 24-Apr-2023

Lot # AG311004 Model 108

Exp Date

Cyl. Type

Component

Certified Concentration

20-Apr-2025

108

Ethanol Nitrogen $0.100 \pm 2\%$ 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	391.8 ppm	EB0010603	392.5 ppm
EB0010570	259.8 ppm	EB0010559	258.9 ppm
EB0010285	209.0 ppm	EB0010562	104.2 ppm
EB0010561	103.7 ppm	EB0010579	52.94 ppm
EB0010681	52.22 ppm		• • •

CRM Serial No. CC727481 CC727496

Concentration mqq 0.008 253.0 ppm

CRM Serial No. CC727493

CC727498

Concentration 390.0 ppm

150.0 ppm

Analytical Method: NDIR

Digitally signed by Quality Control Reason:Dry gas standard certification of analysis Location:Airgas USA LLC (Lab) Date:05.05.2023 12:02

Approved for Release:

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**



CES

PERMIT

RANDY TOEDEBUSCH

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 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. $\Delta \Omega \Delta$

DATE5/7/2024	Mile Mason
	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 240101	Data
EXPIRES 5/7/2026	Davla I. Nichelson
	DIDECTOR OF DEDARTMENT OF LIEUTILAND OFFICE OFFI

MO 580-0771 (6-10)



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 TOEDEBUSCH, RANDY

Permit No 240101 Date Issued 5/7/2024

Date Expires 5/7/2026

