

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

	MAINTENANCE REPORT	REPORT #3	
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 th		
INTOX EC/IR II SN	NAME OF AGENCY	DATE OF INSPECTION	
12814	Maryland Heights	07/29/2024	
LOCATION OF INSTRUMENT (STREET AND CITY)	TIME OF INSPECTION	
11911 DORSETT RD MARYLAND HEIGHTS 22:10 CDT			
CHECKLIST: Place a mark in the box by each item if found to be satisfactor or is operating within			
established limits. (Write in obse	rved values where determined). Unma	rke Sitems must be corrected	
before using instrument.		N	
X DIAGNOSTIC RECORD		60	
X BLANK CHECK	X CO2 CHEC		
X FC 1 TEMP	X FLOW CHECK	on l	
X SRC TEMP	X FCB CHEC	4	
X DET TEMP		ECK E	
X BT TEMP		, , , , , , , , , , , , , , , , , , ,	
X STD 2 TEMP	X PRINT TEST	77	
X ETH CHECK		7	
BREATH ANALYZER ACCURACY STAND	ARDS	ä	
SIMULATOR SOLUTION	X COMPRESSED	ETH CL-GAS MIXTURE	
X STANDARD SUPPLIER INTOX	IMETERS, INC LOT# AG31940	EXP. DATE 07/13/2025	
SIMULATOR TEMP (34°C +0.2°C)	SIM. SN	EXP. DATE 07/13/2025 NIST EXP DATE	
SIMOLATOR TEMP (34°C ±0.2°C)	SIM. SIM	NIOT BAT DATE	
	L		
X STANDARD SUPPLIER INTOXIMETERS, ÎNC LOT# AG319			
Run three tests using a standard solution. All three tests within ±5% of the standard value			
and must have a spread of .005 or less. Mark the box cor			
used.			
X 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 0.099 g/210L	TEST 2 0.099 g/210L	TEST 3 0.099 g/210L	
INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:			
INDICATE THE NUMBER OF BRUSHIN	India in indianame material		
REFUSALS 0 004 0	.0509 0 .1014 0	.1519 0 OVER .19 0	
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).			
INSPECTING OFFICER			
INSPECTING OFFICER SIGNATURE	PRINT FULL NAME		
SIGNATURE SIGNATURE	24 FRY, MATTHER		
SIGNATURE TYPE II PERMIT NUMBER EXPIR	FRY, MATTHEWATION DATE TELEPHONE NUMBER		
SIGNATURE TYPE II PERMIT NUMBER EXPIR	24 FRY, MATTHER		
SIGNATURE TYPE II PERMIT NUMBER EXPIR	FRY, MATTHEW TELEPHONE NUMBER 02/2026 (314)298-87		
TYPE II PERMIT NUMBER EXPIR 240026 02/	FRY, MATTHEW TELEPHONE NUMBER 02/2026 (314)298-87	700	



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-Jul-2023

Lot # AG319402 Model 108

Exp Date 13-Jul-2025

Cyl. Type

108

Component

Ethanol

Certified Concentration

 $0.100 \pm 2\%$ BrAC (272 ppm)

Nitrogen

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

RGM Serial No. Concentration EB0010581 391.8 ppm EB0010570 259,8 ppm EB0010285 209.0 ppm EB0010561 103.7 ppm EB0010681 52.22 ppm

RGM Serial No. Concentration EB0010603 392.5 ppm EB0010559 258.9 ppm EB0010562 104.2 ppm 52.94 ppm EB0010579

CRM Serial No. CC727481

Concentration 800.0 ppm

CC727496

253.0 ppm

CRM Serial No.

CC727493 CC727498 Concentration

390.0 ppm 150.0 ppm

Analytical Method: NDIR

Digitally signed by:Quality Control Resson:Dry gas standerd certification of analysis Location:Afrges USA LLC (Lab) Date:07.13.2023 16:59

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

MATTHEW FRY

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

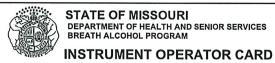
INTOX EC/IR II

for the determination of the alcoholic content of blood from 577.020 through 577.041, RSMo and 306.111 through 30	a sample of expired air. Permit issued under the provisions of section 6.119 RSMo.	
DATE2/2/2024	Mike Massur	
	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY	
NUMBER 240026		
EXPIRES 2/2/2026	Davla I. Nichelson	
	DIDECTOR OF DERAPTMENT OF LIEALTH AND CENTOR CERTIFICA	

MO 580-0771 (6-10)

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 Permit No 240026

FRY, MATTHEW

Date Issued 2/2/2024 Date Expires 2/2/2026

