



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

#### INTOX EC/IR II MAINTENANCE REPORT

REPORT #3

marries - Lation 20, Lat 12				KBIOKI #5	
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		
12819	WAYNESVILLE POLICE DEPT		05/29/2024		
LOCATION OF INSTRUMENT (STREET AND CITY)			TIME OF INSPECTION		
601 Historic 66 WAYNESVILLE			03:20 CDT		
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 STANDA	PDS	<del></del>			
SIMULATOR SOLUTION X COMPRESSED ETHANOL-GAS MIXTURE					
lend .		OT# AG229703 EXP. DATE 10/24/2024			
SIMULATOR TEMP (34°C +0.2°C)	SIM. SN	110225705	ISIM. NIST EXP I		
51MOLATOK 1EMP (54 C +0.2 C)	SIFI. SN		DIM. NIDI DAI I	MIL	
THE CALL YADD WILLOW CHIEF AND					
X CALIBRATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)					
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					
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 0.100 g/210L	TECT 2 15 0 100 0/2101		TEST 3 0.100 g/210L		
INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:					
REFUSALS 1 004 0	.0509 1 .1	014 1	.1519 0	OVER .19 0	
LIST ANY NEW PARTS AND DESCRIBE ANY ALTE			STORE THE INSTRUMENT	TO OPERATE	
SATISFACTORILY AND WITHIN ESTABLISHED LI	MITS (USE OTHER SIDE IF NE	CESSARY).			
INSPECTING OFFICER	SHAPE CONCRETE MESSAGE SHEET	Victorial Control	<b>可能是美国的</b>		
SIGNATURE		NT FULL NAME		HOUSE HEALTH CONTRACTOR AND THE	
► SIR #713	BR	IAN MOORE			
TYPE II PERMIT NUMBER EXPIRA	TION DATE TEL	EPHONE NUMBER			
230240 10/31	1/2025 (5	573 ) 774-2414			
RETURN COMPLETED REPORT TO	) THE:		A 10		
100 PT COMP CONTROL OF THE CONTROL O					
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: 26-Oct-2022

Lot # AG229703 Model 108

Exp Date 24-Oct-2024 Cyl. Type 108

Component Ethanol

**Certified Concentration** 0.100 ± 2% BrAC (272 ppm)

Nitrogen

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

CRM Serial No. Concentration CRM Serial No. CC434668 800.0 ppm 0056649 CC234503 253.0 ppm 0056662

Concentration 390.1 ppm 150.2 ppm

Analytical Method: NDIR

Digitally signed by:Quality Control Reason:Dry gas standard certification of analysis Location:Airgas USA LLC (Lab) Date:10.31.2022 12:31

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** 



# PERMIT TYPE II **BRIAN MOORE**

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. MA INA

DATE10/31/2023	Mike Massmi		
	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY		
NUMBER 230240	Davla J. Nichselson		
EXPIRES 10/31/2025	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES		

MO 580-0771 (6-10)

LAB-4 (R6-10)



instrument for the determination of the alcoholic content in breath form of expired air in Missouri.

Operator MOORE, BRIAN

Permit No 230240

Date Issued 10/31/2023 Date Expires 10/31/2025

