

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

INTOX	EC/IR	II	MAINTENANCE	REPORT	

	K II WAINIEN					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 the Breath Alcohol Program, DHSS.								
INTOX EC/IR II SN		NAME OF AGENCY Riverside Police Dept.			DATE OF INSPECTION			
12835		Dept.	05/24/2024					
LOCATION OF INSTRUMENT (STREET	· ·			TIME OF INSPECTION 01:46 CDT				
2990 NW Vivion Road Rive								
CHECKLIST: Place a mark in								
established limits. (Write	in observed values	where dete	ermined). Unmar	ked 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					
Х ВТ ТЕМР			X CRC CAL CHECK					
X STD 2 TEMP		1						
l 1			X PRINT TEST					
X ETH CHECK								
BREATH ANALYZER ACCURACY	STANDARDS					-		
SIMULATOR SOLUTION			X COMPRESSED E	THANOL-GAS MIXTU	RE			
X STANDARD SUPPLIER	L	OT# AG305902	EXP. DATE 02/28/2025					
SIMULATOR TEMP (34°C +),2°C)	SIM. SN		SIM. NIST EXP				
FEE CLY TODAY SURGE (A)								
X CALIBRATION CHECK - (O								
Run three tests using a	a standard soluti	on. All	three tests mu	ıst be within <u>+</u> 5	% of the stand	lard value		
and must have a spread	of .005 or less.	Mark t	he box correspo	onding to the st	andard solutio	n being		
used.								
X 0.10% STANDARD - MUST								
0.08% STANDARD - MUS	read between o.	076% AND	0.084% INCLUS	IVE				
0.04% STANDARD - MUST	READ BETWEEN O.	038% AND	0.042% INCLUS	CVE				
TEST 1 → 0.099 g/210L	TEST 2	TEST 2 * 0.099 g/210L			TEST 3 * 0.099 g/210L			
INDICATE THE NUMBER OF B	EATH TESTS IN TH	E FOLLOW:	ING RANGES SINC	E THE LAST MAIN	TENANCE REPORT	! :		
REFUSALS 0 004	0 .0509	1	.1014 0	.1519 0	OVER .19	0		
LIST ANY NEW PARTS AND DESCRIBE	ANY ALTERATION OR MOI	DIFICATION 1	THAT WAS MADE TO RE	STORE THE INSTRUMENT	TO OPERATE			
SATISFACTORILY AND WITHIN ESTABL	ISHED LIMITS (USE OTH	ER SIDE IF	NECESSARY).					
Maintenance check passed	according to DHS	S regulat	tions.					
INSPECTING OFFICER								
SIGNATURE			PRINT FULL NAME					
-SCTUS. MMGA196			Ethan J. McMillen					
TYPE II PERMIT NUMBER	EXPIRATION DATE	1	relephone number					
230088	05/12/2025		(816)741-1191					
RETURN COMPLETED REP								
Breath Alcohol Program	, Missouri Depa	rtment c	of Health and	Senior Service	es,			
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: 28-Feb-2023

Lot # AG305902 Model 108

Exp Date 28-Feb-2025 Cyl. Type 108

Component

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

Ethanol

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 EB0010579 52.94 ppm

CRM Serial No. CC727481 CC727496

Concentration 800.0 ppm 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:03.01.2023 17:25

Approved for Release:

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



MC) 580-0771 (8-10)

STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM



LAB-4 (A6-10)

PERMIT TYPE II

ETHAN MCMILLEN

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



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 at In Misxouri,

Operator MCN

MCMILLEN, ETHAN

Permit No 230088 Date Issued 5/12/2023

Date Expires 5/12/2025

