

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

INTOX EC/IR II MAINTENANCE REPORT

PEDADE #7

THION BUYER II				REPORT W3	
Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 35					
days). Complete this report whenever					
into service. Retain the original a	The second section of the second section of the second section of the second section s	n 15 days to the		ogram, DHSS.	
INTOX EC/IR II SN	NAME OF AGENCY		DATE OF INSPECTION		
12849	Willard Police De	ept.	10/22/2024	23,000	
LOCATION OF INSTRUMENT (STREET AND CITY)		V-0.002	TIME OF INSPECTION		
795 Hughes Rd Willard			12:08 CDT		
CHECKLIST: Place a mark in the box					
established limits. (Write in obser	rved values where det	ermined). Unmark	ed items must be	corrected	
before using instrument.			2-W 10-10	- <u>10</u>	
X DIAGNOSTIC RECORD			CHICAGO NAS		
X BLANK CHECK		X CO2 CHECK			
X FC 1 TEMP		X FLOW CHECK		20	
X SRC TEMP		X FCB CHECK			
X DET TEMP	100 1855 E	X CRC COMP CHEC	:K	*	
X BT TEMP		X CRC CAL CHECK			
X STD 2 TEMP	9 W W	X PRINT TEST	% % %		
X ETH CHECK			<u> </u>	 -	
BREATH ANALYZER ACCURACY STANDA	ARDS		5.5		
SIMULATOR SOLUTION		X COMPRESSED ET	HANOL-GAS MIXTU	RE	
X STANDARD SUPPLIER INTOX	OT# AG407603 EXP. DATE 03/16/2026				
SIMULATOR TEMP (34°C ±0.2°C)	SIM. Si	ı	SIM. NIST EXP	DATE	
_					
X CALIBRATION CHECK - (ONLY ON	E STANDARD IS TO BE	USED PER MAINT	ENANCE REPORT)	<u> </u>	
				e 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.					
XIO.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					
LIO.04 & BIRMBARD - MOBI KEMB BETHELIK 0.000 Talb 0.012 V INCEDELVE					
TEST 1 0.098 g/210L	TEST 2 0.098	3/210L	TEST 3 0.09	8 g/210L	
INDICATE THE NUMBER OF BREATH	TESTS IN THE FOLLOW	VING RANGES SING	E THE LAST MAIN	TENANCE REPORT:	
,					
REFUSALS 0 004 10	.0509 1	.1014 1	.1519 0	OVER .19 0	
LIST ANY NEW PARTS AND DESCRIBE ANY ALT		THAT WAS MADE TO RE	STORE THE INSTRUMENT	TTO OPERATE	
SATISFACTORILY AND WITHIN ESTABLISHED L	IMITS (USE OTHER SIDE II	NECESSARY).			
INSPECTING OFFICER			700 W	the state of the state of the state of	
SIGNATURE / Y / Y / Y					
► Ferrost X- UllanTIL		PRINT FULL NAME			
► Ferrost d. Ullusts	/	PRINT FULL NAME KILLINGSWORTH	/RONALD		
	ATION DATE	KILLINGSWORTH TELEPHONE NUMBER			
	ATION DATE .6/2026	KILLINGSWORTH			
	6/2026	KILLINGSWORTH TELEPHONE NUMBER			
240171 08/1	6/2026 O THE:	KILLINGSWORTH TELEPHONE NUMBER (417)742-307	7	es,	
240171 08/1 RETURN COMPLETED REPORT T	6/2026 O THE:	KILLINGSWORTH TELEPHONE NUMBER (417)742-307	7	es,	



Airgas USA LLC (LAB) 3500 Bemard 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: 18-Mar-2024

Lot # AG407603 Model 108

Exp Date 16-Mar-2026 Cyl. Type 108 Component Ethanol Certified Concentration 0.100 ± 2% BrAC (272 ppm)

RGM Serial No.

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

EB0010603 392.5 ppm EB0010559 258.9 ppm EB0010562 104.2 ppm EB0010579 52.94 ppm

CRM Serial No. CC727481 CC727496 Concentration 799.4 ppm 253.4 ppm CRM Serial No. CC727493 CC727498 Concentration 389.8 ppm 150.2 ppm

Concentration

Analytical Method: NDIR .

Decaily sense by flustly Control
Reason Dry gas standard certification of analysis
Location Aligns USA LLC (Lab)
Date:05.22.2024 07 <6

Approved for Release:

Yusef Woods

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

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STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM



PERMIT TYPE II

RONALD L. KILLINGSWORTH

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

DATE 8/16/2024

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

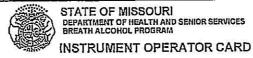
NUMBER 240171

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

MD 580-0771 (6-10)

EXPIRES 8/16/2026

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES
1AB4 (RS-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 at in Missouri

Operator KILLINGSWORTH, RONALD 240171

