## **RECEIVED**

MISSOURI DEPARTMENT OF HEALTH AND SENIOR By Tracy Crews at 7:56 am, Aug 16, 2024 STATE PUBLIC HEALTH LABORATORY BREATH ALCOHOL PROGRAM



INTOX EC/IR II MAINTENANCE REPORT

REPORT #3

			REPORT	
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	is days to the	DATE OF INSPECTION	
12860	HANNIBAL POLICE DEP	A DTME	08/16/2024	
LOCATION OF INSTRUMENT (STREET AND C		ARIME	TIME OF INSPECTION	
777 BROADWAY Hannibal	111)		05:20 CDT	
	or by each item if found t	o bo antiafoat		
CHECKLIST: Place a mark in the bestablished limits. (Write in ob	NOT THE PARTY OF THE PARTY OF THE PARTY OF		A POST OF THE STATE OF THE STAT	
before using instrument.	served values where determ	iiinea). Oiiiiaik	ked Items must be corrected	
X DIAGNOSTIC RECORD				
X BLANK CHECK		CO2 CHECK		
X FC 1 TEMP				
	1,000	FLOW CHECK		
X SRC TEMP	The state of the s	FCB CHECK		
X DET TEMP		CRC COMP CHEC		
X BT TEMP	X	CRC CAL CHECK	K	
X STD 2 TEMP	X	PRINT TEST		
X ETH CHECK				
BREATH ANALYZER ACCURACY STA	NDARDS			
SIMULATOR SOLUTION		COMPRESSED ET	THANOL-GAS MIXTURE	
		# AG313002	EXP. DATE 05/10/2025	
		# AG313002		
SIMULATOR TEMP (34°C ±0.2°	SIM. SN		SIM. NIST EXP DATE	
X CALIBRATION CHECK - (ONLY	ONE STANDARD IS TO BE U	SED PER MAINT	TENANCE REPORT)	
Run three tests using a st	andard solution. All th	hree tests mu	ust be within +5% of the standard value	
			onding to the standard solution being	
used.				
X 0.10% STANDARD - MUST RE	AD BETWEEN 0.095% AND 0	.105% INCLUSI	IVE	
0.08% STANDARD - MUST RE	AD BETWEEN 0.076% AND 0	.084% INCLUSI	IVE	
0.04% STANDARD - MUST RE	AD BETWEEN 0.038% AND 0	.042% INCLUSI	IVE	
			·	
TEST 1 🦥 0.100 g/210L	TEST 2 😇 0.100 g/2	10L	TEST 3 © 0.100 g/210L	
INDICATE THE NUMBER OF BREAT	TESTS IN THE FOLLOWING	G RANGES SINC	CE THE LAST MAINTENANCE REPORT:	
REFUSALS 0 004 0	.0509 0 .1	014 1	.1519 1 OVER .19 1	
LIST ANY NEW PARTS AND DESCRIBE ANY A			STORE THE INSTRUMENT TO OPERATE	
SATISFACTORILY AND WITHIN ESTABLISHED LIMITS (USE OTHER SIDE IF NECESSARY).				
*				
INSPECTING OFFICER				
SIGNATURE		NT FULL NAME		
7	PRI			
52	55,000		CHARY	
TYPE II PERMIT NUMBER EXE	PF	EIFFER, ZAC	CHARY	
The state of the s	PF IRATION DATE TEL	EIFFER, ZAC		
230050 03	PF	EIFFER, ZAC		
230050 03  RETURN COMPLETED REPORT	PF IRATION DATE TEL /27/2025 (5) TO THE:	EIFFER, ZAC EPHONE NUMBER 573 ) 221-0987	7	
230050 03	PF IRATION DATE TEL /27/2025 (5) TO THE:	EIFFER, ZAC EPHONE NUMBER 573 ) 221-0987	7	



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: 11-May-2023

Lot # AG313002 Model 108

Exp Date 10-May-2025 Cyl. Type 108 Component

Ethanol Nitrogen Certified Concentration

0.100 ± 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		(\$20%)

CRM Serial No.	Concentration	CRM Serial No.	Concentration
CC727481	800.0 ppm	CC727493	390.0 ppm
CC727496	253.0 ppm	CC727498	150.0 ppm

Analytical Method: NDIR

Digitally signed by:Quality Control Reason:Dry gas standard certification of analysis Location:Afgas USA LLC (Lab) Date:05.11.2023 21:07

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

## ZACHARY PFEIFFER

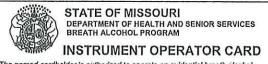
is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

# INTOX EC/IR II nt of blood from a sample of expired air. Permit issued under the provisions of sections 111 through 306.119 BSMo.

for the determination of the alcoholic content of blood fr 577.020 through 577.041, RSMo and 306.111 through	om a sample of expired air. Permit issued under the provisions of sections
are ozo tillough are out , namo and accent tillough	Mile Mason
DATE3/27/2023	/ ( We / lassure
	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 230050	
EXPIRES 3/27/2025	Daves J. nichelson
=-/i	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES
10/200 6774 (0.40)	

MO 580-0771 (6-10)

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 PFEIFFER, ZACHARY Permit No 230050

Date Issued 3/27/2023 Date Expires 3/27/2025

