

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

INTOX EC/IR II					REPORT #3
Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 35					
days). Complete this report whenev into service. Retain the original		_		•	
INTOX EC/IR II SN	NAME OF AGENCY	III 15 days to the	DATE OF INSPECTION		
13051	Creve Coeur Pol:	ice Dept.	06/27/2024	1	
LOCATION OF INSTRUMENT (STREET AND CITY	1		TIME OF INSPECTION	Ţ	
350 N. New Ballas Rd. Creve Co	eur, MO 63141		12:56 CDT		
CHECKLIST: Place a mark in the box	by each item if for	und to be satisfac	tory or is operati	ng within	
established limits. (Write in obse					
before using instrument.					
X DIAGNOSTIC RECORD					
			CO2 CHECK		
X FC 1 TEMP	X FLOW CHECK				
X SRC TEMP	X FCB CHECK				
X DET TEMP	X DET TEMP X CRC COMP C		ECK		
X BT TEMP	X BT TEMP X CRC CAL CHE		<u>IK</u>		
X STD 2 TEMP					
X ETH CHECK					
BREATH ANALYZER ACCURACY STAND	ARDS			· · · · · · · · · · · · · · · · · · ·	
SIMULATOR SOLUTION		COMPRESSED E	THANOL-GAS MIXTU	IRF.	
	IMETERS	LOT# AG220802	EXP. DATE 07/27/2024		
SIMULATOR TEMP (34°C +0.2°C)			ISIM. NIST EXP		1024
	DIF. I	214	DIM: NIDI EXE	DATE	
CALIDDAMION GURGE LONI V ON	E CHANDADD TC BO I	THE MATERIAL TO THE MATERIAL TO THE PARTY OF	MINANAE DEDODELL		
X CALIBRATION CHECK - (ONLY ON					
Run three tests using a stan and must have a spread of .0	dard solution. Al	l three tests m	ust be within +5	% of the stand	lard value
used.	05 Of Tess. Mark	the box correspo	onaing to the st	andard Solutio	on being
X 0.10% STANDARD - MUST READ	BETWEEN 0.095% AN	ND 0.105% INCLUS	IVE:		
0.08% STANDARD - MUST READ					
0.04% STANDARD - MUST READ	BETWEEN 0.038% AN	ND 0.042% INCLUS	IVE		
TEST 1 🖙 0.101 g/210L	TEST 2 🖙 0.101	g/210L	210L TEST 3 ® 0.100 g/210L		
INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:					
	T	<u> </u>	Υ		
REFUSALS 0 004 16	.0509 3	.1014 1	.1519 1	OVER .19	2
LIST ANY NEW PARTS AND DESCRIBE ANY ALT SATISFACTORILY AND WITHIN ESTABLISHED L	ERATION OR MODIFICATION IMITS (USE OTHER SIDE I	N THAT WAS MADE TO RE IF NECESSARY).	ESTORE THE INSTRUMENT	TO OPERATE	
INSPECTING OFFICER					
INSPECTING OFFICER SIGNATURE		PRINT FULL NAME			
1015 ±1015		ZUCKERMAN, JONATHAN			
	ATION DATE	TELEPHONE NUMBER			
240075 03/2	27/2026	(314)432-8000	0		
RETURN COMPLETED REPORT T	O THE:	——————————————————————————————————————			
Breath Alcohol Program, Missouri Department of Health and Senior Services,					
by mail, fax, or e-mail					
by mail, tax, of e-mail					



Airges USALLO (LAB) 3500 Bernard Street St. Louis, Mo. 63103 Ph: (314) 533-3100 Fax: (314) 633-7328

Certificate of Analysis

Customer Name Exclusive Supplier Intoximeters, Inc. 2081 Craig Road St. Louis, Mo 63146

Test Date: 27-Jul-2022

Lot # AG220802 Model 108

Exp Date 27-Jul-2024

Cyl. Type 108 Component Ethanol

Certified Concentration 0.100 ± 2% BrAC (272 pprm)

Nitrogen

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

RGM Serial No. Concentration
E80010581 391.8 ppm
E80010570 259.8 ppm
E80010285 209.0 ppm
E80010561 103.7 ppm
E80010681 52.22 ppm

RGM Serial No. Concentration BB0010803 392, 5 ppm BB0010859 248, 9 ppm BB0010862 144, 2 ppm BB0010879 52,94 ppm

CRM Serial No. Concentration CC727481 800.0 ppm CC727496 253.0 ppm

CRM Serial No. CC727493 3 CC727498 1

Concentration 390.0 ppm 150.0 ppm

Analytical Method: NDIR

Oigitetly signed by: Quality Centrol Research Dry gas standard extilitiosion of analysis Location Argas UBA LLC (Lab) Discio 7.27.2032 16:22

Approved for Release:

Rod Marasia

ISO 17025:2017 A2LA accredited. Certificate Number 308206 ISO 17034:2016 A2LA accredited. Certificate Number 308207



STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM



PERMIT TYPE II

JONATHAN P. ZUCKERMAN

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

	etermination of the alcoholic content of blood from a sample	
577.020	through 577.041, RSMo and 306.111 through 306.119 RSM	10. 10/) 1 10/0
DATE	3/27/2024	Mile Massur
	2400==	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER	240075	Dadnia
EXPIRES 3/27/2026	3/27/2026	Davla J. Nichelson
LXI IIILO		DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES
MO 580-0771 (6	6-10)	LAB-4 (R6-10)



Operator ZUCKERMAN, JONATHAN

Permit No 240075 Date Issued 3/27/2024

Date Expires 3/27/2026

