

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

INTOX EC/IR IT MAINTENANCE REPORT

	FC) IN II							REPORT #3
Complete this report	at the time o	f the regular	r month	ly prever	tive main	tenance check	(not to exceed 35	
days). Complete this	report whenev	er the instru	ument i	s service	d or repa	ired and whenev	ver it is placed	
into service. Retair	the original			nin 15 da	ys to the			
INTOX EC/IR II SN 13051		NAME OF AGEN				DATE OF INSPEC	TION	
		Creve Coe	ur Pol	ice Dept		09/08/2024		
LOCATION OF INSTRUMENT		,				TIME OF INSPEC	TION	
350 N. New Ballas						05:36 CDT		
CHECKLIST: Place a m								
established limits. before using instrum		rved values v	where de	etermined). Unmar	ked items must	be corrected	
X DIAGNOSTIC RECOR								
	·							
X BLANK CHECK					CHECK			
X FC 1 TEMP				X FLOW	CHECK			
X SRC TEMP				X FCB	CHECK			
X DET TEMP				X CRC	COMP CHE	CK	· .	
· X BT TEMP			-		CAL CHEC			
X STD 2 TEMP					T TEST			
				X PKIN	T TEST			
X ETH CHECK								
BREATH ANALYZER AC		ARDS						
SIMULATOR SOLU		•		X COMP	RESSED E	THANOL-GAS MI	XTURE	
X STANDARD SUPPLIE	R INTOX	IMETERS		LOT# A	G408806	E	XP. DATE 03/28	/2026
SIMULATOR TEMP ($34^{\circ}C + 0.2^{\circ}C$)	· ···	SIM. S	EN		SIM. NIST E	XP DATE	
X CALIBRATION CHEC	K - (ONLY ON	Z CTANDADD T	IC MO E	ים וופפה	DEED MARTIN	TENANCE DEPON	m\	
							•	
Run three tests	using a stand	dard solution	on. Al	l three	tests m	ist be within	± 5 % of the star	ndard value
and must have a used.	spread or .ut	or less.	Mark	tne box	correspo	onding to the	standard solut	ion being
X 0.10% STANDARD	י אוופית ספיאר.	DEPREMENT O (ነብ ወደ አለ	ID 0 10E		T 7 7 7 3		
0.08% STANDARD								
0.04% STANDARD	- MUSI READ	DEIMEEN O.(או פסטונו	D 0.004	TNCLUS.	LVE		
U. O. O. BIMDAND	- MOSI KEAD	DEINCEN C.	JJOT AL	U.U4Z	g TMCTOP	TAF		
TEST 1 © 0.101 g/	210L	TEST 2 🖙	0 100	α/21 NT.		TEST 3 ® 0	100 0/2101	
				_		1	3.	
INDICATE THE NUMBE	R OF BREATH T	ESTS IN THE	FOLLO	WING RAI	NGES SINC	CE THE LAST M	AINTENANCE REPO	RT:
REFUSALS 0 (004 10	.0509	2	.101	4 7	γ		· · · · · · · · · · · · · · · · · · ·
_			3		- '	.1519 1	OVER .19	0
JIST ANY NEW PARTS AND SATISFACTORILY AND WITH	DESCRIBE ANY ALTE IN ESTABLISHED LI	ERATION OR MODI MITS (USE OTHE	FICATION R SIDE 1	THAT WAS	MADE TO RE	STORE THE INSTRU	MENT TO OPERATE	
					,			
INSPECTING OFFICER								
				PRINT FU	T. NAMIR			
SIGNATURE					NAPILE			
- Lot- Wela	1. July	25	İ	DEUTMA	N, MICH	AEL		
	1. Jayor	TION DATE		TELEPHON	N, MICH			
	7: Julian 04/0	TION DATE 8/2026		TELEPHON	N, MICH			
240090				TELEPHON	N, MICH			
RETURN COMPLETE Breath Alcohol Pr	D REPORT TO	O THE:	`tment	ТЕLЕРНОМ (314)	AN, MICH E NUMBER 432-8000)	zi gog	



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-Mar-2024

Lot # AG408806 Model 108

Exp Date 28-Mar-2026 Cyl. Type 108 Component

Certified Concentration

Ethanol

0.100 ± 2% BrAC (272 ppm)

Nitrogen

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		5. 51

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

Analytical Method: NDIR

Digitally signed by:Quality Control Reason:Dry gas standard certification of analysis Location:Airgas USA LLC (Lab) Date:03.29.2024 08:02

Approved for Release:

Yusef Woods

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

MICHAEL T. DEUTMAN

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

INTOX EC/III II				
for the determination of the alcoholic content of blood from 577.020 through 577.041, RSMo and 306.111 through 30	n a sample of expired air. Permit issued under the provisions of sections 06.119 RSMo.			
DATE4/8/2024	Mile Massini DIRECTOR OF STATE PUBLIC HEALTH LABORATORY			
NUMBER 240090	_			
EXPIRES 4/8/2026	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES			
10 500 0771 (0 10)	LAD AUDE 401			

MO 580-0771 (6-10)

LAB-4 (R6-10)

