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By Tracy Crews at 7:22 am, Sep 11, 2024



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

INTOX DMT MAINTENANCE REPORT

REPORT #1

ABSSESS. INTOX DIVIT INVALINTEINANCE KE				
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.				
NAME OF AGENCY 500078 NAME OF AGENCY Missouri State Highway Patrol		DATE OF INSPECTION 09/04/2024		
LOCATION OF INSTRUMENT (STREET AND CITY) Newton County Jail		TIME OF INSPECTION 11:18:42		
CHECKLIST: Place a mark in the box by each item if found to be satisfactory or is operating within established limits. (Write in observed values where determined). Unmarked items must be corrected before using instrument.				
☑ DIAGNOSTIC RECORD				
DATE AND TIME09/04/2024 11:18:45 DETECTOR				
☑ PROGRAM ☑ FILTER 1				
☑ SAMPLE CHAMBER_48.7°C				
☑ BREATH TUBE 44.8°C ☑ FILTER 3				
☑ PUMP ☑ INTERNAL STANDARD				
BREATH ANALYZER ACCURACY STANDARDS				
☐ SIMULATOR STANDARD		RESSED ETHANOL-GAS MIXTURE		
☐ STANDARD SUPPLIER INTOXIMETERS	LOT#_AG3205	01 EXP. DATE 0	7/24/2025	
☐ SIMULATOR TEMP (34°C ± 0.2°C)	SIM. SN	SIM. NIST EXP DATE		
 □ CALIBRATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT) Run three tests using a standard. 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 being used. □ 0.10% 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 				
TEST 1: 0.098 TEST	T 2: 0.098	TEST 3: 0.098		
☑ PERFORM R.F.I. TEST				
INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:				
REFUSALS: 0 004: 0 .050	09: 7 .1014:	.1519: 5	OVER .19: 3	
LIST ANY NEW PARTS AND DESCRIBE ANY ALTERATION OR MODIFICATION ESTABLISHED LIMITS (USE OTHER SIDE IF NECESSARY)	ON THAT WAS MADE TO RESTORE THE	EINSTRUMENT TO OPERATE SATISFACTORILY AI	ND WITHIN	
INSPECTING OFFICER				
SIGNATURE	PRINT FULL	NAME REY T DAY		
TYPE II PERMIT NUMBER	EXPIRATION DATE	TELEPHONE NUMBER		
230092 RETURN COMPLETED REPORT TO THE Proofs	05/22/2025	417-895-6868		
Breath Alcohol Program, Missouri Department of Health and Senior Services by mail, fax, or email				



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: 26-Jul-2023

Lot # AG320501 Model 108

Exp Date

Cyl. Type

Component

Certified Concentration

24-Jul-2025

108

Ethanol

 $0.100 \pm 2\%$ BrAC (260 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

EB0010681 52.22 ppm

CRM Serial No.

Concentration

CC727481 CC727496 800.0 ppm 253.0 ppm CRM Serial No.

CC727493

CC727498

EB0010579

Concentration

390.0 ppm 150.0 ppm

52.94 ppm

Analytical Method: NDIR

Digitally signed by:Quality Control Reason:Dry gas standard certification of analysis Location:Airgas USA LLC (Lab) Date:07.26.2023 12:45

Approved for Release:

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

JEFFREY T. DAY

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

INTOY DMT

for the determination of the alcoholic content of blood from a 577.020 through 577.041, RSMo and 306.111 through 306.	sample of expired air. Permit issued under the provisions of sections 119 RSMo. Mile Massure		
DATE5/22/2023	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY		
NUMBER 230092	Davla I. nichelson		
EXPIRES 5/22/2025	DIRECTOR OF DEPARTMENT OF HEALTH AND SERVICES		
MO 580-0771 (6-10)	LAB-4 (R6-10)		



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 air in Missouri

Operator Permit No 230092

DAY, JEFFREY

Date Issued 5/22/2023 Date Expires 5/22/2025