

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

# RECEIVED

By Tracy Crews at 6:59 am, Jul 25, 2024

INTOX DMT MAINTENANCE REPORT

REPORT #1

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 500130 Missouri State Highway Patrol			DATE OF INSPECTION 07/24/2024	
LOCATION OF INSTRUMENT (STREET AND CITY) 1175 Floyd Street, Kennett, Mo 63857			TIME OF INSPECTION 13:21:06	
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 TIME <u>07/24/2024 13:21:09</u> ☑ DETECTOR				
☑ PROGRAM ☑ FILTER 1 .				•
SAMPLE CHAMBER 48.7°C				
□ BREATH TUBE 46.0°C □ FILTER 3				
☑ PUMP ☑ INTERNAL STANDARD				
BREATH ANALYZER ACCURACY STANDARDS				
☐ SIMULATOR STANDARD ☐ COMPRESSED ETHANOL-GAS MIXTURE				
STANDARD SUPPLIER INTOXIMETERS LOT # _A		G320501	EXP. DATE <u>07/24/2025</u>	
SIMULATOR TEMP (34°C ± 0.2°C)SIM. SN		s	SIM. NIST EXP DATE	
<ul> <li>□ 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.</li> <li>□ 0.10% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE</li> <li>□ 0.08% STANDARD - MUST READ BETWEEN 0.076% AND 0.084% INCLUSIVE</li> <li>□ 0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE</li> </ul>				
EST 1: 0.098 TEST 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: 2 004: 0 .050	09: 0	1014: 5	.1519: 1	OVER .19: 2
LIST ANY NEW PARTS AND DESCRIBE ANY ALTERATION OR MODIFICATION THAT WAS MADE TO RESTORE THE INSTRUMENT TO OPERATE SATISFACTORILY AND WITHIN ESTABLISHED LIMITS (USE OTHER SIDE IF NECESSARY)				
INSPECTING OFFICER				
SIGNATURE SIGT RD Stam		PRINT FULL NAME RICHARD D OWENS		
TYPE II PERMIT NUMBER 230272	EXPIRATION DATE 11/28/2025	TELEPHONE NUMB 573-840-95		
RETURN COMPLETED REPORT TO THE  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** 24-Jul-2025 Cyl. Type 108

Component Ethanol

Certified Concentration 0.100 ± 2% BrAC (260 ppm)

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

**RGM Serial No.** Concentration EB0010603 392.5 ppm EB0010559 258.9 ppm EB0010562 104.2 ppm EB0010579 52.94 ppm

CRM Serial No. CC727481

Concentration 800.0 ppm 253.0 ppm

**CRM Serial No.** CC727493

CC727498

Concentration 390.0 ppm

150.0 ppm

CC727496 Analytical Method:

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

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

## RICHARD D. OWENS

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

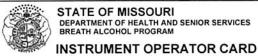
INTOX DMT

### 

MO 580-0771 (6-10)

LAB-4 (R6-10)

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES



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 Missauri.

Operator OWENS, RICHARD

Permit No 230272
Date Issued 11/28/2023 Date Expires 11/28/2025

