

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

RECEIVED

By Tracy Crews at 9:40 am, May 23, 2024

INTOX DMT MAINTENANCE REPORT

REPORT #1

Complete t	his report	whenever t	he instrument is s	nthly preventive maint serviced or repaired ar s to the Breath Alcoho	nd wheneve	r it is placed in				
500152			NAME OF AGENCY Missouri State	e Highway Patrol	A A STOCK And A STOCK AND A STOCK AS A STOCK	DATE OF INSPECTION 04/02/2024				
LOCATION OF I	County L.E.C. Bethany, MO 64424						TIME OF INSPECTION 22:27:35			
CHECKLIS values whe	T: Place	a mark in ti ined). Unm	he box by each ite arked items must	em if found to be satis be corrected before a	factory or is	operating with	in established limits	(Write in observed		
☑ DIAGN	OSTIC R	ECORD								
DATE	DATE AND TIME <u>04/02/2024 22:27:38</u> ☑ DETECTOR									
☑ PR	OGRAM ☑ FILTER 1									
⊠ SA	SAMPLE CHAMBER 48.8°C									
⊠ BR	☑ BREATH TUBE 45.9°C ☑ FILTER 3									
⊠ PU	PUMP ☑ INTERNAL STANDARD									
BREATH	NALYZE	R ACCUR	ACY STANDAR	DS			a			
SIN	ULATOR	STANDA	RD		⊠ COM	PRESSED ET	HANOL-GAS MIXTI	JRE		
STANE	ARD SUF	PLIER IN	ITOXIMETERS	LOT#	#_AG3205	01	EXP. DATE	07/24/2025		
SIMUL	TOR TE	MP (34°C :	± 0.2°C)	SIM. S	Ν		SIM. NIST EXP DAT	E		
of .005 ⊠	ATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT) ee tests using a standard. All three tests must be within ±5% of the standard value and must have a spread 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.	.097	TEST 2: 0.096				TEST 3: 0.096				
☑ PERF	RM R.F.I	TEST	sportes and accommend of the contract of the c			ghalling ago greecement at marrie no contravous versions	-			
INDICATE	THE NU	MBER OF	BREATH TEST	S IN THE FOLLOWI	NG RANG	ES SINCE TH	IE LAST MAINTEN	IANCE REPORT:		
REFUSAL	\$: 1	004: ()	.0509: 0	.1014:	1	.1519: 1	OVER .19: 1		
		DESCRIBE ANY		FICATION THAT WAS MADE 1	O RESTORE TH	E INSTRUMENT TO	OPERATE SATISFACTORIL	Y AND WITHIN		
				7.5.4.5.2.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5						
INSPECTI SIGNATURE	NG OFFI	CER			PRINT FUL	NAME				
TYPE II PERMIT	NUMBER	HILL.		EXPIRATION DATE		AEL J MILLE				
220258	1			11/17/2024		816-387-2				
RETURN	COMPLE	TED REP		reath Alcohol Programy mail, fax, or email	m, Missouri	Department of	Health and Senior	Services		



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: 1-Aug-2023

Lot # AG320502 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	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		

 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 Airgas USA LLC (Lab) Date 08 10 2023 09 46

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 J. MILLER

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

ALCO-SENSOR IV WITH PRINTER, INTOX DMT

for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo. Mike Masson

DATE 11/17/2022

NUMBER 220258

EXPIRES 11/17/2024

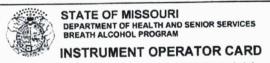
MO 560 0771 (6 10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Daves I. nichelson

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

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 a

MILLER, MICHAEL Operator Permit No

220258

Date Expires 11/17/2024 Date Issued 11/17/2022

