REVIEWED

By Tracy Crews at 2:08 pm, Dec 02, 2024



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

INTOVINAT MAINTENANCE DEPORT

REPORT #1

- 3475 M24 (H-1)	INTOX DIVIT MATRICIVA	NOE KEFOKI					
Complete th	s report at the time of the regular s report whenever the instrument riginal and send a copy within 15	is serviced or rep	aired and wheneve	it is placed i			
1010X DMT SN 500152	NAME OF AGENC Missouri S	atrol		DATE OF INSPECTION 12/02/2024			
Harrison (arion of instrument (street and city) arrison County L.E.C. Bethany, MO 64424				TIME OF INSPECTION 12:51:04		
CHECKLIS values where	T: Place a mark in the box by eac e determined). Unmarked items re	h item if found to I nust be corrected i	be satisfactory or is before using instrur	operating wil nent.	thin established limits. (W	Vrite in observed	
☑ DIAGNO	OSTIC RECORD						
DATE A	AND TIME 12/02/2024 12:51:07 © DETECTOR						
⊠ PRC	DGRAM ☑ FILTER 1						
SAN	WPLE CHAMBER 48.8°C						
⊠ BRE	EATH TUBE 45.4°C 🖾 FILTER 3						
XI PUN	PUMP INTERNAL STANDARD						
BREATH A	NALYZER ACCURACY STAND	ARDS					
SIMI	☐ SIMULATOR STANDARD ☐ COMPRESSED ETHANOL-GAS MIXTURE						
STANDA	ARD SUPPLIER INTOXIMETE	RS	LOT#_AG3205	01	EXP. DATE _ 07	7/24/2025	
☐ SIMULA	TOR TEMP (34°C ± 0.2°C)		SIM. SN		SIM. NIST EXP DATE		
of 005 c	ATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT) ree 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: 0.0	98	TEST 2: 0,09	7	TEST 3: 0,098			
☑ PERFOR	RM R.F.I. TEST					1 110000000	
INDICATE T	THE NUMBER OF BREATH TE	STS IN THE FO	LLOWING RANGE	ES SINCE T	HE LAST MAINTENAN	ICE REPORT:	
REFUSALS:	0 0-,04: 0	.0509: 0	1014;	0	.1519: 1	OVER .19: 0	
LIST ANY NEW P	ARTS AND DESCRIBE ANY ALTERATION OR I	MODIFICATION THAT WA	S MADE TO RESTORE TH	EINSTRUMENT TO	O OPERATE SATISFACTORILY AN	io Within	
INSPECTIN	G OFFICER		I Day		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
SIGNATURE V	MANN			PRINT FULL NAME MICHAEL J MILLER			
TYPE IL PERMIT N	UMBER	EXPIRATIO 10/29	PN DATE /2026	16-387-			
RETURN C	OMPLETED 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

Certified Concentration

Ethanol Nitrogen 0.100 ± 2% BrAC (260 ppm)

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 52.22 ppm EB0010681

CRM Serial No.

Concentration

CRM Serial No.

Concentration

CC727481 CC727496 800.0 ppm 253.0 ppm CC727493 CC727498

390.0 ppm 150.0 ppm

Analytical Method: NDIR

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

Approved for Release:

Roll Marsola

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.

DATE	10/29/2024	adam Hui			
D/ (1.60		DIRECTOR STATE PUBLIC HEALTH LABORATORY			
NUMBER	240230				
EXPIRES	10/29/2026	Davla I. Nichelson			
		DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES			
JO 580 0771 (6	(10)	LAH 4 (95-10)			



Operator MILLER, MICHAEL Permit No 240230

Date Expires 10/29/2026

