By Tracy Crews at 7:28 am, Jun 05, 2024



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

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 500201 Missouri State Highway Patrol			DATE OF INSPECTION 06/03/2024	
LOCATION OF INSTRUMENT (STREET AND CITY) 104 N. Phelps Ave., Mansfield, MO (Mansfield PD)			15:34:39	- 4
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>06/03/2024 15:34:42</u> ☑ DETECTOR				
☑ PROGRAM ☑ FILTER 1				
☐ SAMPLE CHAMBER 48.8°C ☐ ☐ FILTER 2				
☐ BREATH TUBE 42.3°C ☐ FILTER 3				
☑ PUMP ☑ INTERNAL STANDARD				
BREATH ANALYZER ACCURACY STANDARDS				
☐ SIMULATOR STANDARD ☐ COMPRESSED ETHANOL-GAS MIXTURE				
☐ STANDARD SUPPLIER INTOXIMETERS	LOT# AG	320532	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	TEST 2: 0.098		TEST 3: 0.097	
☑ PERFORM R.F.I. TEST				
INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:				
REFUSALS: 1 004: 0 .050	9: 0	014: 0	.1519: 1	OVER .19: 0
LIST ANY NEW PARTS AND DESCRIBE ANY ALTERATION OR MODIFICATION ESTABLISHED LIMITS (USE OTHER SIDE IF NECESSARY)	N THAT WAS MADE TO REST	ORE THE INSTRUMENT TO O	PERATE SATISFACTORILY AI	ND WITHIN
INSPECTING OFFICER SIGNATURE PRINT FULL NAME				
SIGNATURE		STACY J CREWSE		
TYPE II PERMIT NUMBER DE MILE. 230244	10/31/2025	417-469-31		
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: 1-Aug-2023

Lot # AG320502 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:

Concentration RGM Serial No. EB0010581 391.8 ppm EB0010570 259.8 ppm EB0010285 209.0 ppm 103.7 ppm EB0010561 EB0010681 52.22 ppm

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

CRM Serial No. CC727481 CC727496

Concentration 800.0 ppm 253.0 ppm

CRM Serial No. CC727493 CC727498

Concentration 390.0 ppm 150.0 ppm

Analytical Method: NDIR

Digitally signed by Quality Control Reason:Dry gas standard certification of analysis Location:Argas USA LLC (Lab) Date:08.10.2023 09:48

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

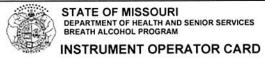
STACY J. CREWSE

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)

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES
LAB4 (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 air in Missouri.

Operator CREWSE, STACY

Permit No 210245

Date Issued 11/12/2021 Date Expires 11/12/2023

