

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

INTOV DMT MAINTENANCE REPORT

REPORT #1

Complete this report at the time of the regular mor Complete this report whenever the instrument is so Retain the original and send a copy within 15 days	erviced or repaired and w	henever it is pla	to exceed 35 days). aced into service.	
intox dmt sn NAME OF AGENCY 500214 Lamar Police	Department		DATE OF INSPECTION 09/18/2024	
LOCATION OF INSTRUMENT (STREET AND CITY) 1010 Cherry Street, Lamar			TIME OF INSPECTION 09:28:46	
CHECKLIST: Place a mark in the box by each ite values where determined). Unmarked items must	m if found to be satisfact be corrected before usin	ory or is operati g instrument.	ng within established limits. (\	Write in observed
☑ DIAGNOSTIC RECORD				
DATE AND TIME <u>09/18/2024 09:28:50</u>	×	DETECTOR		
☑ PROGRAM	X	FILTER 1		
☑ SAMPLE CHAMBER 48.8°C		FILTER 2		
☑ BREATH TUBE 46.0°C	×	FILTER 3		
X PUMP	×] INTERNAL S	TANDARD	
BREATH ANALYZER ACCURACY STANDAR	DS			
☑ SIMULATOR STANDARD		COMPRESS	ED ETHANOL-GAS MIXTUR	RE
	LOT#_2	23390	EXP. DATE 1	0/17/2025
	SIM. SN_	MP2116	SIM. NIST EXP DATE	01/16/2025
of .005 or less. Mark the box corresponding ☑ 0.10% STANDARD - MUST READ B ☐ 0.08% STANDARD - MUST READ B ☐ 0.04% STANDARD - MUST READ B	BETWEEN 0.095% AND BETWEEN 0.076% AND	0.105% INCLU 0.084% INCLU	JSIVE	
TEST 1: 0.098	TEST 2: 0.097		TEST 3: 0,098	
☑ PERFORM R.F.I. TEST			<u> </u>	
INDICATE THE NUMBER OF BREATH TEST	S IN THE FOLLOWING	RANGES SIN	ICE THE LAST MAINTENA	NCE REPORT:
REFUSALS: 0 004: 0	.0509: 0	.1014: 0	.1519: 0	OVER .19: 0
LIST ANY NEW PARTS AND DESCRIBE ANY ALTERATION OR MODI	,			
ESTABLISHED LIMITS (USE OTHER SIDE IF NECESSARY)				
INSPECTING OFFICER				
SIGNATURE		PRINT FULL NAME	ILDKNECHT	
TYPE II PERMIT NUMBER 230225	EXPIRATION DATE 10/19/2025	TELEPH	HONE NUMBER H-543-4573	
RETURN COMPLETED REPORT TO THE		Missouri Depart	ment of Health and Senior S	ervices

CALIBRATION FACTORS

Lamar Police Department

INTOX dmt: 500214

Date: 09/18/2024 Time: 08:56:10

OPERATOR NAME:
RYAN SCHILDKNECHT
PERMIT NUMBER: 230225

EXPIRATION DATE: 10/19/2025

LOT #: 23390 SUPPLIER: GUTH

EXPIRATION: 10/17/2025

Ca = 0.1000



CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 23390 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on October 18, 2023, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1207% (w/vol) ethyl alcohol. The expiration date for this lot number is October 17, 2025 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.100 g/210L +/- 3%.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President GUTH LABORATORIES, INC.

NIST Traceability:

Testing was conducted using Cerilliant Reference Standard lot number FN03072301 whose values are traceable to NIST.

All balances are calibrated annually by an outside agency using NIST traceable weights. Calibration verification is done prior to each use utilizing NIST traceable weights.



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: 21-May-2024

Lot # AG414104 Model 108

Exp Date 20-May-2026 Cyl. Type 108 Component

Ethanol Nitrogen **Certified Concentration**

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
EB0010681	52.22 ppm		• •

CRM Serial No.	Concentration
CC727481	799.4 ppm
CC727496	253.4 ppm

CRM Serial No. CC727493

Concentration 389.8 ppm

CC727498 150.2 ppm

Analytical Method: NDIR

Digitally signed by:Quality Control Reason:Dry gas standard certification of analysis Location:Airgas USA LLC (Lab) Date:05.24.2024 08:21

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

RYAN SCHILDKNECHT

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, INTOXILYZER 8000, INTOX EC/IR II, ASIV W/PRINTER

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	10/19/2023	Laura G. Wary
D/(1L		DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER	230225	
EXPIRES 10/19/2025	, acting director	
		DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES
		1 40 4 60 4

MO 680-0771 (6-10)

LAB-4 (R6-10)

