RECEIVED

By Tracy Crews at 8:36 am, Jun 26, 2024



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

REPORT #1

500260 KENNETT POLICE DEPARTMENT COCATION OF INSTRUMENT (STREET AND CITY) 200 Cedar St. Kennett Mo 63857 CHECKLIST: Place a mark in the box by each item if found to be satisfactory or is operating within established limits. (Write in observed alues where determined). Unmarked items must be corrected before using instrument.		MAINTENANCE		an abank (not to	evened 35 days)	
CONDENS CRENKETT POLICE DEPARTMENT OB/25/2024	omplete this report whenever t	the instrument is serv	iced or repaired and wi	nenever it is place	ed into service.	
20 Ocades X terminet Mo 63867 HECKLIST: Place a mark in the box yeach item if found to be satisfactory or is operating within established limits. (Write in observed allees where determined). Unmarked items must be corrected before using instrument. DATE AND TIME_08/25/2024_07:48:22	TOX DMT SN 500260	NAME OF AGENCY KENNETT POLICE DEPARTMENT				
DATE AND TIME 06/25/2024 07:48:22 □ DETECTOR □ PROGRAM □ FILTER 1 □ SAMPLE CHAMBER 48.9°C □ FILTER 2 □ BREATH TUBE 46.4°C □ FILTER 3 □ INTERNAL STANDARD □ INTERNAL STANDARD □ SIMULATOR TEMP (34°C ± 0.2°C) □ SIM. SN □ SIM. NIST EXP DATE 03/06/2025 □ SIMULATOR TEMP (34°C ± 0.2°C) □ SIM. SN □ SIM. NIST EXP DATE 05/06/2025 □ SIMULATOR TEMP (34°C ± 0.2°C) □ SIM. SN □ SIM. NIST EXP DATE 05/06/2025 □ SIMULATOR STANDARD STANDARD IS TO BE USED PER MAINTENANCE REPORT) Run three tests using a standard valletine 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. □ 0.06% STANDARD - MUST READ BETWEEN 0.095% AND 0.084% INCLUSIVE 0.06% STANDARD - MUST READ BETWEEN 0.095% AND 0.084% INCLUSIVE 0.06% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE 0.06% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE 0.06% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE 0.06% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE 0.06% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE 0.06% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE 0.06% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE 0.06% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE 0.06% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE 0.06% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE 0.06% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE 0.06% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE 0.06% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE 0.06% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE 0.06% STANDARD - MUST READ BETWEEN 0.06% STANDARD	200 Cedar St. Kennett Mo	63857			07:48:18	
DATE AND TIME	HECKLIST: Place a mark in la lues where determined). Unn	the box by each item narked items must be	if found to be satisfacto corrected before using	ory or is operating instrument.	within established limits.	(Write in observed
© PROGRAM © FILTER 1 © SAMPLE CHAMBER 48.9°C © FILTER 2 © BREATH TUBE 46.4°C © FILTER 3 © PUMP © INTERNAL STANDARD SREATH ANALYZER ACCURACY STANDARDS © SIMULATOR STANDARD © COMPRESSED ETHANOL-GAS MIXTURE. © STANDARD SUPPLIER_INTOXIMETERS LOT # AG306503 EXP. DATE 03/06/2025 © SIMULATOR TEMP (34°°C± 0.2°C) SIM. SN SIM. INST 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 0.095% AND 0.084% INCLUSIVE □ 0.08% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE □ 0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE □ 0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.105% INCLUSIVE □ 0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.105% INCLUSIVE □ 0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.105% INCLUSIVE □ 0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.105% INCLUSIVE □ 0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.105% INCLUSIVE □ 0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE □ 0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE □ 0.05 0.05 0.05 0.05 0.05 0.05 0.05 0.0	DIAGNOSTIC RECORD					
© SAMPLE CHAMBER 48.9°C	DATE AND TIME 06/25/	2024 07:48:22	X	DETECTOR		
© SHANT LE UNIDECT STANDARD © INTERNAL STANDARD	☑ .PROGRAM		X	FILTER 1		
MERCHTHOUSEN AND STANDARD MINISTERS LOT # AG306503 EXP. DATE 03/06/2025 SIMULATOR STANDARD SIMULATOR STAN	SAMPLE CHAMBER_	48.9°C		FILTER 2		
REATH ANALYZER ACCURACY STANDARDS SIMULATOR STANDARD	☑ BREATH TUBE 46.4	°C	X	FILTER 3		
SIMULATOR STANDARD STANDARD SUPPLIER INTOXIMETERS LOT # AG306503 EXP. DATE _03/06/2025 SIM. SIM. NIST EXP DATE 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 0.095% AND 0.084% INCLUSIVE 10.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE 10.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE 10.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE 10.05	⊠ PUMP		X	INTERNAL ST	ANDARD	
SIMULATOR TEMP (34°C ± 0.2°C) SIM. SIM. SIM. NIST EXP DATE SIMULATOR TEMP (34°C ± 0.2°C) SIM. SIM. SIM. NIST EXP DATE SIMULATOR TEMP (34°C ± 0.2°C) SIM. SIM. SIM. NIST EXP DATE SIMULATOR TEMP (34°C ± 0.2°C) SIM. SIM. SIM. NIST EXP DATE SIMULATOR TEMP (34°C ± 0.2°C) SIM. SIM. SIM. NIST EXP DATE SIMULATOR TEMP (34°C ± 0.2°C) SIM. SIM. SIM. NIST EXP DATE SIM. SIM. SIM. SIM. SIM. NIST EXP DATE SIM. NIST EXP. NIST DATE	BREATH ANALYZER ACCU	RACY STANDARDS				
SIMULATOR TEMP (34°C ± 0.2°C)	☐ SIMULATOR STANDA	\RD	X	COMPRESSE		
SINULATION 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 0.038% AND 0.042% INCLUSIVE ☐ 0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE ☐ 1.0099 ☐ 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: 0	STANDARD SUPPLIER_I	NTOXIMETERS	LOT #_A	G306503		
of .005 or less. Mark the box corresponding to the standard being used. I 0.10% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE 0.0.08% STANDARD - MUST READ BETWEEN 0.036% AND 0.084% INCLUSIVE 1 0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE TEST 1: 0.099 TEST 2: 0.098 TEST 3: 0.098 TEST 3: 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: 0						
PERFORM R.F.I. TEST INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT: REFUSALS: 0 004: 0 .0509: 0 .1014: 0 .1519: 0 .OVER .19: 0 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 PRINT FULL NAME RYAN SCHILDKNECHT TYPE II PERMIT FULL NAME RYAN SCHILDKNECHT TYPE II PERMIT FULL NAME 10/19/2025 TELEPHONE NUMBER 230225 RETURN COMPLETED REPORT TO THE Breath Alcohol Program, Missouri Department of Health and Senior Services	☐ 0.08% STANDAR	D - MUST READ BE	TWEEN 0.076% AND	0.084% INCLUS	SIVE	
INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT: REFUSALS: 0 004: 0 .0509: 0 .1014: 0 .1519: 0 .OVER .19: 0 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 SIGNATURE SIGNATURE EXPIRATION DATE 10/19/2025 TELEPHONE NUMBER 230225 TELEPHONE NUMBER 660-543-4573 RETURN COMPLETED REPORT TO THE Breath Alcohol Program, Missouri Department of Health and Senior Services	TEST 1: 0,099	TE	EST 2: 0.098		TEST 3: 0.098	
INSPECTING OFFICER SIGNATURE SIGNATURE SIGNATURE SIGNATURE EXPIRATION DATE 10/19/2025 SIGNATURE EXPIRATION DATE 10/19	XI PERFORM R.F.I. TEST					
REFUSALS: 0 004: 0 .0509: 0 .1014: 0 .1519: 0 OVER .19: 0 LIST ANY NEW PARTS AND DESCRIBE ANY ALTERATION OR MODIFICATION THAT WAS MADE TO RESTORE THE INSTRUMENT TO OPERATE SATISFACTORILY AND WITHIN STABLISHED LIMITS (USE OTHER SIDE IF NECESSARY) INSPECTING OFFICER SIGNATURE PRINT FULL NAME RYAN SCHILDKNECHT TYPE II PERMIT ADMBER 230225 RETURN COMPLETED REPORT TO THE Breath Alcohol Program, Missouri Department of Health and Senior Services		F BREATH TESTS	IN THE FOLLOWING	RANGES SINC	E THE LAST MAINTE	NANCE REPORT:
INSPECTING OFFICER SIGNATURE SIGNATURE TYPE II PERMIT MOMBER 230225 RETURN COMPLETED REPORT TO THE INSPECTION OF MODIFICATION THAT WAS MADE TO RESTORE THE INSTRUMENT TO OPERATE SATISFACTORILY AND WITHIN ENTABLISHED LIMITS (USE OTHER SIDE IF NECESSARY) PRINT FULL. NAME RYAN SCHILDKNECHT TYPE II PERMIT MOMBER 230225 RETURN COMPLETED REPORT TO THE Breath Alcohol Program, Missouri Department of Health and Senior Services	REFUSALS: 0 004	.0 .0	509: 0	.1014: 0	.1519: 0	OVER .19: 0
INSPECTING OFFICER SIGNATURE SIGNATURE PRINT FULL NAME RYAN SCHILDKNECHT TYPE II PERMIT MÜMBER 230225 EXPIRATION DATE 10/19/2025 RETURN COMPLETED REPORT TO THE Breath Alcohol Program, Missouri Department of Health and Senior Services	IST ANY NEW PARTS AND DESCRIBE A	NY ALTERATION OR MODIFIC	CATION THAT WAS MADE TO R	ESTORE THE INSTRUM	ENT TO OPERATE SATISFACTOR	LY AND WITHIN
TYPE II PERMIT HUMBER 230225 RETURN COMPLETED REPORT TO THE Breath Alcohol Program, Missouri Department of Health and Senior Services	LOWING CO.					
TYPE II PERMIT HUMBER 230225 RETURN COMPLETED REPORT TO THE Breath Alcohol Program, Missouri Department of Health and Senior Services						
TYPE II PERMIT FULL NAME RYAN SCHILDKNECHT TYPE II PERMIT FULL NAME RYAN SCHILDKNECHT TELEPHONE NUMBER 230225 RETURN COMPLETED REPORT TO THE Breath Alcohol Program, Missouri Department of Health and Senior Services						
TYPE II PERMIT FULL NAME RYAN SCHILDKNECHT TYPE II PERMIT FULL NAME RYAN SCHILDKNECHT TELEPHONE NUMBER 230225 RETURN COMPLETED REPORT TO THE Breath Alcohol Program, Missouri Department of Health and Senior Services						
TYPE II PERMIT FULL NAME RYAN SCHILDKNECHT TYPE II PERMIT FULL NAME RYAN SCHILDKNECHT TELEPHONE NUMBER 230225 RETURN COMPLETED REPORT TO THE Breath Alcohol Program, Missouri Department of Health and Senior Services						
PRINT FULL NAME RYAN SCHILDKNECHT TYPE II PERMIT MIMBER 230225 EXPIRATION DATE 10/19/2025 TELEPHONE NUMBER 660-543-4573 RETURN COMPLETED REPORT TO THE Breath Alcohol Program, Missouri Department of Health and Senior Services						
TYPE II PERMIT MIMBER 230225 RETURN COMPLETED REPORT TO THE Breath Alcohol Program, Missouri Department of Health and Senior Services				PRINT FULL NAME		
230225 10/19/2025 660-543-4573 RETURN COMPLETED REPORT TO THE Breath Alcohol Program, Missouri Department of Health and Senior Services	1/2-		Involgation page			
210000000000000000000000000000000000000	TYPE II PERMIT MOMBER 230225					
	RETURN COMPLETED RE			Missouri Departn	nent of Health and Senior	Services

CALIBRATION FACTORS

KENNETT POLICE DEPARTMENT

INTOX dmt: 500260

Date: 06/24/2024 Time: 09:28:59

OPERATOR NAME:

RYAN SCHILDKNECHT PERMIT NUMBER: 230225

EXPIRATION DATE: 10/19/2025

LOT #: 23390 SUPPLIER: GUTH

EXPIRATION: 10/17/2025

Ca = 0.1000

Ma



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: 7-Mar-2023

Lot # AG306503 Model 108

Exp Date 6-Mar-2025 Cyl. Type 108

Component

Certified Concentration 0.100 ± 2% BrAC (260 ppm)

Ethanol

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 209.0 ppm	EB0010559	258.9 ppm
EB0010285		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:03.09.2023 20:47

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

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	Lama G. Way
DATE10/19/2023	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 230225	
EXPIRES 10/19/2025	, acting director
	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

LAB-4 (R6-10)

