

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

INTOX EC/IR II MAINTENANCE REPORT

REPORT #3

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 a	and send a copy wit	thin 15 days to the	Breath Alcohol Pr	rogram, DHSS.		
INTOX EC/IR II SN	NAME OF AGENCY		DATE OF INSPECTION	1		
12818	ST. ANN PD		02/16/2025			
LOCATION OF INSTRUMENT (STREET AND CITY			TIME OF INSPECTION	ī		
10405 St. Charles Rock R St. Ar	n		08:14 CST			
CHECKLIST: Place a mark in the box	by each item if fo	ound to be satisfac	tory or is operati	ng within		
established limits. (Write in obser	established limits. (Write in observed values where determined). Unmarked items must be corrected					
before using instrument.						
X DIAGNOSTIC RECORD						
X BLANK CHECK						
X FC 1 TEMP		X FLOW CHECK				
X SRC TEMP						
X DET TEMP		X CRC COMP CHE	CK			
		X CRC CAL CHEC				
X BT TEMP		- Indiana				
X STD 2 TEMP		X PRINT TEST				
X ETH CHECK	A CANADA CA					
BREATH ANALYZER ACCURACY STANDA	RDS					
SIMULATOR SOLUTION	デスタ 東京は	X COMPRESSED E	THANOL-GAS MIXTU	RE		
X STANDARD SUPPLIER INTOXI	METERS	LOT# AG309502	EXP.	DATE 04/05/	2025	
SIMULATOR TEMP (34°C +0.2°C)	SIM.	SN	SIM. NIST EXP I	DATE		
X CALIBRATION CHECK - (ONLY ONE	STANDARD IS TO	BE USED PER MAINT	ENANCE REPORT)			
Run three tests using a standard solution. 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 solution being used. X 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 0.100 g/210L	TEST 2 3 0.100	g/210L	TEST 3 0.100	g/210L		
INDICATE THE NUMBER OF BREATH T	ESTS IN THE FOLL	OWING RANGES SINC	E THE LAST MAINT	ENANCE REPOR	Γ:	
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). RECEIVED By Tracy Craws at 10.22 am, Feb 24, 2025						
INSPECTING OFFICER						
SIGNATURE		PRINT FULL NAME SONTHEIMER, EI	RIC			
나는 그들은 그는 그가 들었다면 하고 있는데 나는데 나는데 나는데 하는데 하는데 하는데 나를 다 되었다.	ION DATE	TELEPHONE NUMBER				
230053 03/27	일본 병원 병원 및 사람이 하는 1년 강은 경험하는 모든 것이 되었다. 그는	(314)427-8000				
RETURN COMPLETED REPORT TO THE:						
Breath Alcohol Program, Missouri Department of Health and Senior Services,						
by mail, fax, or e-mail						



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: 5-Apr-2023

Lot # AG309502 Model 108

Exp Date 5-Apr-2025

Cyl. Type 108

Component Ethanol

Nitrogen

Certified Concentration $0.100 \pm 2\%$ BrAC (272 ppm)

Certification Traceable to N.I.S.T. RGM and to CRM Ethanol Standards:

RGM Serial No.			
물레 이번 집에 본 경험 전통 시간 그렇게 함께 되었다. 그렇게	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:04.05.2023 17:55

Approved for Release:

Rod Marsala

ISO 17025:2017 A2LA accredited. Certificate Number 3082.06 ISO 17034:2016 A2LA accredited. Certificate Number 3082.07