

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
STATE PUBLIC HEALTH LABORATORY

By Brian Lutmer at 1:45 pm, Mar 17, 2025

BREATH ALCOHOL PROGRAM



REPORT #1

TIVION DIVIT IN	MAINTENANCE	CLFORT				KLFOKT#1
Complete this report at the time Complete this report whenever Retain the original and send a c	the instrument is service	ced or repaired and	whenever	it is placed into	ed 35 days). o service.	
INTOX DMT SN 500129						
LOCATION OF INSTRUMENT (STREET AND CITY) 204 S. Poplar St, Buffalo, MO 65622					TIME OF INSPECTION 12:09:41	
CHECKLIST: Place a mark in t values where determined). Unm	he box by each item if arked items must be o	found to be satisfactorrected before usi	ctory or is	operating within	n established limits. (Writ	te in observed
☑ DIAGNOSTIC RECORD						
DATE AND TIME 02/28/2	2025 12:09:45]	X DETE	CTOR		
☑ PROGRAM]	X FILTE	₹ 1		
	48.7°C	1	X FILTE	₹ 2		
☑ BREATH TUBE 47.9°	С]	X FILTE	₹3		
☑ PUMP		1	X INTER	NAL STANDA	RD	
BREATH ANALYZER ACCUR	ACY STANDARDS					
☐ SIMULATOR STANDA	RD		X COMP	RESSED ETH	ANOL-GAS MIXTURE	
STANDARD SUPPLIER IN	TOXIMETERS	LOT#	AG33530)3	EXP. DATE 12/1	9/2025
☐ SIMULATOR TEMP (34°C:	± 0.2°C)	SIM. SN		s	IM. NIST EXP DATE	
of .005 or less. Mark the bo ☑ 0.10% STANDARD ☐ 0.08% STANDARD ☐ 0.04% STANDARD) - MUST READ BET\) - MUST READ BET\	WEEN 0.095% AND WEEN 0.076% AND	0.105% 0.084%	INCLUSIVE		
TEST 1: 0.098	TES	ST 2: 0.098			TEST 3: 0.098	
PERFORM R.F.I. TEST						
INDICATE THE NUMBER OF	BREATH TESTS IN	THE FOLLOWING	G RANGE	S SINCE THE	E LAST MAINTENANC	E REPORT:
REFUSALS: 0 004: (0 .05-	.09: 0	.1014:	1	.1519: 0	OVER .19: 1
LIST ANY NEW PARTS AND DESCRIBE ANY ESTABLISHED LIMITS (USE OTHER SIDE IF		ION THAT WAS MADE TO F	RESTORE THE	INSTRUMENT TO C	PERATE SATISFACTORILY AND V	WITHIN
INSPECTING OFFICER SIGNATURE OLLOW			PRINT FULL JOSHU	NAME JA L WHITE		
TYPE II PERMIT NUMBER 230328		EXPIRATION DATE 12/21/2025		TELEPHONE NUMB 417-895-68		
RETURN COMPLETED REP	ORT TO THE Breatl		Missouri F		Health and Senior Service	200
	by ma	ail, fax, or email		- Spartment Of I	TOURT AND SERVICE	



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: 19-Dec-2023

Lot # AG335303 Model 108

Exp Date 19-Dec-2025 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
EB0010631	52.22 ppm		

CRM Serial No.	Concentration	CRM Serial No.	Concentration
CC727481	799.4 ppm	CC727493	389.8 ppm
CC727496	253.4 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:12.21.2023 20:20

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

JOSHUA L. WHITE

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

for the determination of the alcoholic content of blood from a sample of ex	xpired air. Permit issued under the provisions of sections
577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.	

DATE 12/21/2023

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

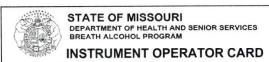
NUMBER 230328

EXPIRES 12/21/2025

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

LAB-4 (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 WHITE, JOSHUA

Permit No 230328

Date Issued 12/21/2023 Date Expires 12/21/2025

