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By Tracy Crews at 1:14 pm, Mar 28, 2025



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

INTOX DMT MAINTENANCE REPORT

REPORT #1

INTOX BILL IN THE LEGICAL	0_ 11_ 0111			
Complete this report at the time of the regular m Complete this report whenever the instrument is Retain the original and send a copy within 15 da	serviced or repaired and w	henever it is placed ir		
INTOX DMT SN NAME OF AGENCY Missouri Sta				
LOCATION OF INSTRUMENT (STREET AND CITY) 802 Main St, Princeton, MO			TIME OF INSPECTION 18:42:33	
CHECKLIST: Place a mark in the box by each values where determined). Unmarked items mu	item if found to be satisfact st be corrected before usin	ory or is operating with g instrument.	nin established limits. (Write	in observed
☑ DIAGNOSTIC RECORD				
DATE AND TIME 03/17/2025 18:42:36		DETECTOR		
☑ PROGRAM		FILTER 1		
SAMPLE CHAMBER 48.8°C	FILTER 2			
☑ BREATH TUBE 48.1°C	FILTER 3			
□ PUMP	INTERNAL STAND	NAL STANDARD		
BREATH ANALYZER ACCURACY STANDA	RDS			
☐ SIMULATOR STANDARD	☐ SIMULATOR STANDARD		RESSED ETHANOL-GAS MIXTURE	
STANDARD SUPPLIER INTOXIMETER	LOT#_F	AG320501	EXP. DATE <u>07/24</u>	4/2025
☐ SIMULATOR TEMP (34°C ± 0.2°C)	SIM. SN_		SIM. NIST EXP DATE	
 CALIBRATION CHECK - (ONLY ONE STRUN three tests using a standard. All three of .005 or less. Mark the box correspondin □ 0.10% STANDARD - MUST READ □ 0.08% STANDARD - MUST READ □ 0.04% STANDARD - MUST READ 	g to the standard being use D BETWEEN 0.095% AND D BETWEEN 0.076% AND	ed. 0.105% INCLUSIVE 0.084% INCLUSIVE		
TEST 1: 0.100	TEST 2: 0.099		TEST 3: 0.100	
PERFORM R.F.I. TEST				
INDICATE THE NUMBER OF BREATH TES	STS IN THE FOLLOWING	RANGES SINCE T	HE LAST MAINTENANCE	E REPORT:
REFUSALS: 0 004: 0	.0509: 0	.1014: 0	.1519: 0	OVER .19: 0
LIST ANY NEW PARTS AND DESCRIBE ANY ALTERATION OR MO	ODIFICATION THAT WAS MADE TO R	ESTORE THE INSTRUMENT TO	D OPERATE SATISFACTORILY AND W	VITHIN
INSPECTING OFFICER SIGNATURE		PRINT FULL NAME JAMES C ACREE	=	
TYPE II PERMIT MOMBER 240102	EXPIRATION DATE 05/13/2026	TELEPHONE NU. 816-387-	IMBER	
RETURN COMPLETED REPORT TO THE			of Health and Senior Servic	es
	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 Graig Road St. Louis, Mo 63146

Test Date: 26-Jul-2023

Lot # AG320501 Model 108

Exp Date 24-Jul-2025 Cyl. Type

Component

Certified Concentration

108

Ethanol

0.100 ± 2% BrAC (260 ppm)

Nitrogen

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

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

RGM Serial No. EB0010603 EB0010559 EB0010562

392.5 ppm 258.9 ppm 104.2 ppm

Concentration

EB0010579

52.94 ppm

CRM Serial No.

Concentration

CRM Serial No.

Concentration

CC727481 CC727496 mag 0.008 253.0 ppm CC727493 CC727498 mag 0.098 150.0 ppm

Analytical Method: NDIR

Digitally signed by Quality Control Reason Dry gas standard certification of analysis Location Airgas USA LEC (Lab) Date 07:26-2023;12:45

Approved for Release:

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 JAMES C. ACREE

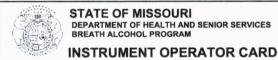
is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

INTOX DMT for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo. DATE 5/13/2024 DIRECTOR OF STATE PUBLIC HEALTH LABORATORY NUMBER 240102 EXPIRES 5/13/2026

MO 580-0771 (6-10)

LAB-4 (R6-10)

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES



The named cardholder is authorized to operate an evidential breath alcohol instrument for the determination of the alcoholic content in breath form of expired ai in Missouri.

Operator ACREE, JAMES

Permit No 240102

Date Issued 5/13/2024 Date Expires 5/13/2026

