



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
 STATE PUBLIC HEALTH LABORATORY
ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

RECEIVED
 By Carol Day at 10:28 am, Jun 18, 2014

Complete this report in duplicate at the time of the regular monthly preventative maintenance check, and whenever instrument is repaired. Send copy to Department of Health and Senior Services; retain original in department file.

ALCO SENSOR IV SN 21574	PRINTER SN 097.3584.032	DATE OF INSPECTION 06/04/2014
LOCATION OF INSTRUMENT (STREET AND CITY) Midland Empire Alcholo Task Force Breath Alcohol Test Truck		TIME OF INSPECTION 8:12 am

CHECKLIST: Place a mark in the box by each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unmarked items must be corrected before using instrument.

- DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)
- TEMPERATURE OF ALCO SENSOR (10°C - 40°C)
- PRINTER WORKING PROPERLY
- TIME AND DATE DISPLAYING PROPERLY

BREATH ALCOHOL ACCURACY STANDARDS

- SIMULATOR SOLUTION
- COMPRESSED ETHANOL-GAS MIXTURE

STANDARD SUPPLIER Intoximeters LOT # AG228503 EXP. DATE 10/11/2014

SIMULATOR TEMPERATURE (34°C ± 0.2°C) SIMULATOR SN SIMULATOR EXP DATE

- CALIBRATION CHECK – (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE 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. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED)
 - 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE
 - 0.080% STANDARD - MUST READ BETWEEN 0.076% and 0.084% INCLUSIVE
 - 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE

TEST 1 \Rightarrow .099 TEST 2 \Rightarrow .098 TEST 3 \Rightarrow .098

- RFI DETECTOR OPERATING

INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT: (DO NOT INCLUDE SELF-ADMINISTERED TESTS)

REFUSALS	0	(0-.04)	0	(.05-.09)	0	(.10-.14)	0	(.15-.19)	0	(OVER .19)	0
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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).

Instrument operating within all limits set forth by the Missouri Department of Health. 0.100 Dry Gas Standard, Lot #AG228503 Tank 22

INSPECTING OFFICER	
SIGNATURE 	PRINT NAME Larry R. Stobbs Jr.
TYPE OF PERMIT NUMBER/EXPIRATION DATE 230311 12/11/2015	TELEPHONE NUMBER (816) 236-1474

Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office
 2875 James Boulevard
 Poplar Bluff, MO 63901



Airgas Mid America (LABORATORY)
 3500 Bernard Street
 St. Louis, Mo, 63103
 Ph: (314) 633-3100
 Fax: (314) 633-7828

Certificate of Analysis

Customer Name:
 Infoximeters, Inc.
 2081 Craig Road
 St. Louis, Mo 63146

Test Date: 11-Oct-2012

Dear Sir,

This is your Certificate of Analysis:

<u>Exp. Date</u> 10/11/2014	<u>Cyl. Type</u> 108	<u>Component</u> Ethanol Nitrogen	<u>Certified Concentration</u> 0.100 ± 2% BrAC (272 ppm) Balance
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Lot# AG228503

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

<u>Serial No.</u> EB0010581	<u>Concentration</u> 391.5 ppm	<u>Serial No.</u> EB0010603	<u>Concentration</u> 390.0 ppm
EB0010570	253.4 ppm	EB0010559	253.3 ppm
EB0010285	209.9 ppm	EB0010595	209.2 ppm
EB0010561	101.9 ppm	EB0010562	104.9 ppm
EB0010681	53.0 ppm	EB0010579	52.4 ppm

Analytical Method: NDIR

Analyst: *Paul Morgan*

ISO 17025:2005 A2LA accredited. Certificate Number 2889.01

AS IV Serial no: 021574
Version no: 7409

TEST RECORD 01437 s/

Temp Date Time 210L
Air Blank: 06/04/14 08:12 .000
Subject Test: Man
20 06/04/14 08:12 .099

Subject Name

Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 021574
Version no: 7409

TEST RECORD 01438 s/

Temp Date Time 210L
Air Blank: 06/04/14 08:14 .000
Subject Test: Man
21 06/04/14 08:14 .098

Subject Name

Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 021574
Version no: 7409

TEST RECORD 01439 s/

Temp Date Time 210L
Air Blank: 06/04/14 08:17 .000
Subject Test: Man
23 06/04/14 08:17 .098

Subject Name

Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 021574
Version no: 7409

TEST RECORD 01440 s/

Temp Date Time 210L
Ucid: RFI
12 06/04/14 08:18

Subject Name

Subject I.D.

Operator Name, I.D.

Location



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

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PERMIT
TYPE II
LARRY R STOBBS JR

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

ALCO-SENSOR IV WITH PRINTER, DATAMASTER

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 12/11/2013

NUMBER 230311

EXPIRES 12/11/2015

MO 580-0771 (6-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

acting director
 DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (R6-10)

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

INSTRUMENT OPERATOR CARD

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 **STOBBS JR, LARRY**
 Permit No **230311**
 Date Issued **12/11/2013** Date Expires **12/11/2015**