



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

RECEIVED
 By Carol Day at 3:41 pm, Oct 14, 2014
 REPORT #7

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 10/06/2014
LOCATION OF INSTRUMENT (STREET AND CITY) Midland Empire Alcoholo Task Force Breath Alcohol Test Truck		TIME OF INSPECTION 1:30 pm

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 .096	TEST 2 .096	TEST 3 .095
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- 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 II 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) 533-3100

Fax: (314) 533-7328

Certificate of Analysis

Customer Name

Intoximeters, 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>	<u>Cyl. Type</u>	<u>Component</u>	<u>Certified Concentration</u>
10/11/2014	108	Ethanol Nitrogen	0.100 ± 2% BrAC (272 ppm) Balance

Lot # AG228503

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

<u>Serial No.</u>	<u>Concentration</u>	<u>Serial No.</u>	<u>Concentration</u>
EB0010581	391.5 ppm	EB0010603	390.9 ppm
EB0010570	258.4 ppm	EB0010559	258.3 ppm
EB0010285	208.9 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: *Pod Marine*

ISO 17025:2005 A2LA accredited. Certificate Number 2989.01

AS IV Serial no: 021574
Version no: 7409
TEST RECORD 01454 s/
Temp Date Time 210L
Air Blank: 10/06/14 13:30 .000
Subject Test: Man
21 10/06/14 13:30 .096
Subject Name
Subject I.D.
Operator Name, I.D.
Location

AS IV Serial no: 021574
Version no: 7409
TEST RECORD 01455 s/
Temp Date Time 210L
Air Blank: 10/06/14 13:32 .000
Subject Test: Man
21 10/06/14 13:32 .096
Subject Name
Subject I.D.
Operator Name, I.D.
Location

AS IV Serial no: 021574
Version no: 7409
TEST RECORD 01456 s/
Temp Date Time 210L
Air Blank: 10/06/14 13:34 .000
Subject Test: Man
22 10/06/14 13:34 .095
Subject Name
Subject I.D.
Operator Name, I.D.
Location

AS IV Serial no: 021574
Version no: 7409
TEST RECORD 01457 s/
Temp Date Time 210L
Void: RFI
12 10/06/14 13:36
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