



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

**RECEIVED** REPORT #7  
 By Carol Day at 10:05 am, Dec 30, 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 087967	PRINTER SN 08C.3556.200	DATE OF INSPECTION 12/28/2014
LOCATION OF INSTRUMENT (STREET AND CITY) 303 E. 3rd Street Joplin		TIME OF INSPECTION 9:57 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, Inc. LOT # AG319103 EXP. DATE 03/10/2015

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 $\bullet$ .103	TEST 2 $\bullet$ .104	TEST 3 $\bullet$ .103
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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	3	(0-.04)	0	(.05-.09)	3	(.10-.14)	1	(.15-.19)	1	(OVER .19)	2
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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).

**INSPECTING OFFICER**

SIGNATURE <i>Brett Davis</i>	PRINT NAME Brett Davis
TYPE II PERMIT NUMBER/EXPIRATION DATE 230157/ 08-14-2015	TELEPHONE NUMBER (417) 623-3131

**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



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

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**PERMIT**  
**TYPE II**  
**BRETT DAVIS**

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

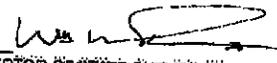
**INTOXILYZER 5000, INTOXILYZER 8000, ALCO-SENSOR IV  
 W/PRINTER**

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: 8/14/2013

NUMBER: 230157

EXPIRES: 8/14/2015

  
 DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

*David Voster*  
 acting director  
 DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (9-10)

LAB-4 (06-10)

 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 DAVIS, BRETT  
 Permit No 230157  
 Date issued 8/14/2013 Date Expires 8/14/2015



Airgas USA LLC (LAB)  
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-Jul-2013

**Lot #** AG319103

<u>Exp. Date</u>	<u>Cyl. Type</u>	<u>Component</u>	<u>Certified Concentration</u>
10-Mar-2015	30	Ethanol Nitrogen	0.100 ± 2% BrAC (272 ppm) Balance

**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	391.8 ppm	EB0010603	392.5 ppm
EB0010570	259.8 ppm	EB0010559	258.9 ppm
EB0010285	209.0 ppm	EB0010595	208.9 ppm
EB0010561	103.7 ppm	EB0010562	104.9 ppm
EB0010681	52.22 ppm	EB0010579	52.94 ppm

**Analytical Method:** NDIR

Digitally signed by Quality Control  
Date: 2013.07.11 10:33:53 -05:00  
Reason: Dry gas standard certification of analysis  
Location: Airgas USA LLC (Lab)

**Analyst:** \_\_\_\_\_

*Rod Marsala*  
Rod Marsala

**ISO 17025:2005 A2LA accredited. Certificate Number 2989.01**

AS IV Serial no: 087967  
Version no: 532B

TEST RECORD 00181

Temp Date Time <sup>a/</sup> 210L

Air Blank:  
12/28/14 21:57 .000  
Calibration Check:  
18 12/28/14 21:57 .103

Subject Name

Subject I.D.

Operator Name, I.D.

*B. P. 9004*  
Location

*Joplin Jail*

AS IV Serial no: 087967  
Version no: 532B

TEST RECORD 00183

Temp Date Time <sup>a/</sup> 210L

Air Blank:  
12/28/14 22:01 .000  
Calibration Check:  
19 12/28/14 22:01 .103

Subject Name

Subject I.D.

Operator Name, I.D.

*B. P. 9004*  
Location

*Joplin Jail*

AS IV Serial no: 087967  
Version no: 532B

TEST RECORD 00182

Temp Date Time <sup>a/</sup> 210L

Air Blank:  
12/28/14 21:59 .000  
Calibration Check:  
18 12/28/14 21:59 .104

Subject Name

Subject I.D.

Operator Name, I.D.

*B. P. 9004*  
Location

*Joplin Jail*

AS IV Serial no: 087967  
Version no: 532B

TEST RECORD 00184

Temp Date Time <sup>a/</sup> 210L

VOID: RFI  
12 12/28/14 22:02

Subject Name

Subject I.D.

Operator Name, I.D.

*B. P. 9004*  
Location

*Joplin Jail*