



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 7:37 am, Jul 02, 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 097432 PRINTER SN 84.9324.045 DATE OF INSPECTION 07-01-2014

LOCATION OF INSTRUMENT (STREET AND CITY) 101 SHERIFF DIEKEL CT. O'FALLON TIME OF INSPECTION 0940

**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) PASSED
- TEMPERATURE OF ALCO SENSOR (10°C - 40°C) 23°C
- PRINTER WORKING PROPERLY PASSED
- TIME AND DATE DISPLAYING PROPERLY 0949 07-01-2014

**BREATH ALCOHOL ACCURACY STANDARDS**

- SIMULATOR SOLUTION  COMPRESSED ETHANOL-GAS MIXTURE
- STANDARD SUPPLIER INTOXIMETERS, INC. LOT # AG402703 EXP. DATE 01-27-2016
- 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 • .078 TEST 2 • .077 TEST 3 • .077

- RFI DETECTOR OPERATING PASSED

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) 3 (.10-.14) 1 (.15-.19) 1 (OVER .19) 2

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).

TRUCAL .078

**INSPECTING OFFICER**

SIGNATURE [Signature] PRINT NAME DEPUTY FOURNELL, D.

TYPE II PERMIT NUMBER/EXPIRATION DATE 240274 06-13-2016 TELEPHONE NUMBER 636-949-0809

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 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:** 28-Jan-2014

**Lot #** AG402703

<u>Exp. Date</u>	<u>Cyl. Type</u>	<u>Component</u>	<u>Certified Concentration</u>
27-Jan-2016	108	Ethanol Nitrogen	0.080 ± 0.002 BrAC (218 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: 2014.01.28 12:39:44 -06:00  
Reason: Dry gas standard certification of analysis  
Location: Airgas USA LLC (Lab)

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

Rod Marsala

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



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

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**PERMIT  
TYPE II**

**DAVID FOURNELL**

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, INTOXILYZER 5000**

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 6/13/2014

NUMBER 240274

EXPIRES 6/13/2016

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

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 FURNELL, DAVID  
Permit No 240274  
Date Issued 6/13/2014 Date Expires 6/13/2016

AS IV Serial no: 897482  
Version no: 5328

TEST RECORD 22046

Temp Date Time 210L

Air Blank: 07/01/14 09:49 .000  
Calibration Check: 29 07/01/14 09:49 .078

Subject Name

Subject I.D.

Operator Name, I.D.

Fournell 570  
Location

101 SHERIFF DIERKER CT

AS IV Serial no: 897482  
Version no: 5328

TEST RECORD 20847

Temp Date Time 210L

Air Blank: 07/01/14 09:54 .000  
Calibration Check: 29 07/01/14 09:54 .077

Subject Name

Subject I.D.

Operator Name, I.D.

Fournell 570  
Location

101 SHERIFF DIERKER CT

AS IV Serial no: 897482  
Version no: 5328

TEST RECORD 00048

Temp Date Time 210L

Air Blank: 07/01/14 09:57 .000  
Calibration Check: 24 07/01/14 09:57 .077

Subject Name

Subject I.D.

Operator Name, I.D.

Fournell 570  
Location

101 SHERIFF DIERKER CT

AS IV Serial no: 897482  
Version no: 5328

TEST RECORD 80049

Temp Date Time 210L

VOID: 831  
12 07/01/14 09:59

Subject Name

Subject I.D.

Fournell 570

Operator Name, I.D.

101 SHERIFF DIERKER CT  
Location