



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

**RECEIVED**  
 By Carol Day at 8:55 am, Sep 15, 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 102471	PRINTER SN 8A.3539.008	DATE OF INSPECTION 09/12/2014
LOCATION OF INSTRUMENT (STREET AND CITY) 2111 County Drive, Columbia		TIME OF INSPECTION 3:58 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 # AG412701 EXP. DATE 05/07/2016
- 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  .080	TEST 2  .080	TEST 3  .080
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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).  
 Dry Gas Tank #021

**INSPECTING OFFICER**

SIGNATURE 	PRINT NAME Sgt. Brian Leer # 5629
TYPE II PERMIT NUMBER/EXPIRATION DATE 220300 / 09-25-2014	TELEPHONE NUMBER (573) 875-1111

**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

AS IU Serial no: 102471  
Version no: 592B

TEST RECORD 00057

Temp	Date	Time	%
Air Blank:	09/12/14	15:58	.000
Calibration Check:	25	09/12/14	15:58 .000

Subject Name

Accuracy Check #1 - Maint.

Subject I.D.

N/A

Operator Name, I.D.

Brian Leer Permit # 230300

Exp. 9/25/2014

Location

2111 County Drive  
Columbia, MO 65202  
(BCSD Annex)

AS IU Serial no: 102471  
Version no: 592B

TEST RECORD 00058

Temp	Date	Time	%
Air Blank:	09/12/14	16:00	.000
Calibration Check:	25	09/12/14	16:00 .000

Subject Name

Accuracy Check #2 - Maint

Subject I.D.

N/A

Operator Name, I.D.

Brian Leer Permit # 230300

Exp. 9/25/2014

Location

2111 County Drive  
Columbia, MO 65202  
(BCSD Annex)

AS IU Serial no: 102471  
Version no: 592B

TEST RECORD 00059

Temp	Date	Time	%
Air Blank:	09/12/14	16:02	.000
Calibration Check:	25	09/12/14	16:02 .000

Subject Name

Accuracy Check #3 - Maint

Subject I.D.

N/A

Operator Name, I.D.

Brian Leer Permit # 230300

Exp. 9/25/2014

Location

2111 County Drive  
Columbia, MO 65202  
(BCSD Annex)

AS IU Serial no: 102471  
Version no: 592B

TEST RECORD 00060

Temp	Date	Time	%	
UNIT: RFI	12	09/12/14	16:04	

Subject Name

RFI Test - Maint

Subject I.D.

N/A

Operator Name, I.D.

Brian Leer Permit # 230300

Exp. 9/25/2014

Location

2111 County Drive  
Columbia, MO 65202  
(BCSD Annex)

State of Missouri  
DEPARTMENT OF HEALTH



P E R M I T  
TYPE II



BRIAN S LEER

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

**DATAMASTER; ALCO-SENSOR IV W/PRINTER**

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

Date 09/25/2012

Number **220300**

Expires 09/25/2014

MO 580-0771 (7-88)

Director of State Public Health Laboratory

Director, Department of Health

Lab. 4 (R7-88)



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:** 8-May-2014

**Lot #** AG412701

<u>Exp. Date</u>	<u>Cyl. Type</u>	<u>Component</u>	<u>Certified Concentration</u>
7-May-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: 2014.05.08 12:12:39 -05:00  
Reason: Dry gas standard certification of analysis  
Location: Airgas USA LLC (Lab)

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

Rod Marsala

ISO 17025:2005 A2LA accredited. Certificate Number 2989.01