



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 8:06 am, Jul 11, 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<br>107983  | PRINTER SN<br>099.3586.802 | DATE OF INSPECTION<br>07/10/2014 |
| LOCATION OF INSTRUMENT (STREET AND CITY)<br>12 South Water Street, Liberty |                            | TIME OF INSPECTION<br>0:51 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 # AG407801 EXP. DATE 03/19/2016
- 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 ➡ .097 | TEST 2 ➡ .097 | TEST 3 ➡ .097 |
|---------------|---------------|---------------|

- 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 |
|----------|---|---------|---|-----------|---|-----------|---|-----------|---|------------|---|

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).

|  |                                    |
|--|------------------------------------|
| <b>INSPECTING OFFICER</b>  |                                    |
| SIGNATURE<br> | PRINT NAME<br>Jason L. Jarvis      |
| TYPE II PERMIT NUMBER/EXPIRATION DATE<br>240203 / 04-30-2016                                     | TELEPHONE NUMBER<br>(816) 407-3700 |

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 IV Serial no: 107983  
Version no: 532B

TEST RECORD 00290

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

VOID: RFI  
12 07/10/14 01:31

Subject Name

Subject I.D.

JARVIS #8128

Operator Name, I.D.

Location

RFI CHECK

AS IV Serial no: 107983  
Version no: 532B

TEST RECORD 00291

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

Air Blank:  
07/10/14 01:33 .000  
Calibration Check:  
23 07/10/14 01:33 .098

Subject Name

Subject I.D.

JARVIS #8128

Operator Name, I.D.

Location

CAL CHECK

AS IV Serial no: 107983  
Version no: 532B

TEST RECORD 00292

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

Air Blank:  
07/10/14 01:35 .000  
Calibration Check:  
24 07/10/14 01:35 .097

Subject Name

Subject I.D.

JARVIS #8128

Operator Name, I.D.

Location

CAL CHECK

AS IV Serial no: 107983  
Version no: 532B

TEST RECORD 00293

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

Air Blank:  
07/10/14 01:37 .000  
Subject Test: Man  
24 07/10/14 01:37 .097

Subject Name

Subject I.D.

JARVIS #8128

Operator Name, I.D.

Location

TEST #1

AS IV Serial no: 107983  
Version no: 532B

TEST RECORD 00294

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

Air Blank:  
07/10/14 01:39 .000  
Subject Test: Man  
24 07/10/14 01:39 .097

Subject Name

Subject I.D.

JARVIS #8128

Operator Name, I.D.

Location

TEST #2

AS IV Serial no: 107983  
Version no: 532B

TEST RECORD 00295

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

Air Blank:  
07/10/14 01:41 .000  
Subject Test: Man  
24 07/10/14 01:41 .097

Subject Name

Subject I.D.

JARVIS #8128

Operator Name, I.D.

Location

TEST #3



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: 20-Mar-2014

Lot # AG407801

| <u>Exp. Date</u> | <u>Cyl. Type</u> | <u>Component</u>    | <u>Certified Concentration</u>       |
|------------------|------------------|---------------------|--------------------------------------|
| 19-Mar-2016      | 108              | Ethanol<br>Nitrogen | 0.100 ± 2% BrAC (272 ppm)<br>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: 2014.03.20 17:26:10 -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



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

2

**PERMIT**  
**TYPE II**

**JASON L JARVIS**

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, INTOX EC/IR II**

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: 4/30/2014

NUMBER 240203

EXPIRES 4/30/2016

MO-580-0774 (8-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (R6-10)