



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 7:33 am, Mar 09, 2015

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 30450	PRINTER SN 95.1111.053	DATE OF INSPECTION 3/6/15
LOCATION OF INSTRUMENT (STREET AND CITY) 501 FARAON, ST. JOSEPH		TIME OF INSPECTION 2143

**CHECKLIST:** Place a mark in the box by each item it 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 (1 O-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 # AG428002 EXP. DATE 10-07-2016
- 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 - .102	TEST 2 - .102	TEST 3 - .102
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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)	4	(.15-.19)	5	(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).

<b>INSPECTING OFFICER</b>	
SIGNATURE <i>RP</i>	PRINT NAME ROBERT PAUL
TYPE II PERMIT NUMBER/EXPIRATION DATE 230306 12-11-2015	TELEPHONE NUMBER 816-271-4777

**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: 030450  
Version no: 7410

AS IV Serial no: 030450  
Version no: 7410

TEST RECORD 06029 a/  
Temp Date Time 210L

Air Blank:  
03/06/15 21:44 .000  
Calibration Check:  
22 03/06/15 21:44 .102

Subject Name

Subject I.D.

Operator Name, I.D.

*APAC 5444*  
Location

AS IV Serial no: 030450  
Version no: 7410

TEST RECORD 06030 a/  
Temp Date Time 210L

Air Blank:  
03/06/15 21:47 .000  
Calibration Check:  
23 03/06/15 21:47 .102

Subject Name

Subject I.D.

Operator Name, I.D.

*APAC 5444*  
Location

AS IV Serial no: 030450  
Version no: 7410

TEST RECORD 06031 a/  
Temp Date Time 210L

Air Blank:  
03/06/15 21:50 .000  
Calibration Check:  
24 03/06/15 21:50 .102

Subject Name

Subject I.D.

Operator Name, I.D.

*APAC 5444*  
Location

AS IV Serial no: 030450  
Version no: 7410

TEST RECORD 06032 a/  
Temp Date Time 210L

Void: RPI  
12 03/06/15 21:52

Subject Name

Subject I.D.

Operator Name, I.D.

*APAC 5444*  
Location



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-Oct-2014

Lot # AG428002

**Exp. Date**

7-Oct-2016

**Cyl. Type**

108

**Component**

Ethanol  
Nitrogen

**Certified Concentration**

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: 2014.10.08 12:15:00 -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

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**PERMIT**  
**TYPE II**  
**ROBERT L PAUL**

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 230306

EXPIRES 12/11/2015

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

**acting director**  
 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 cartholder 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 PAUL, ROBERT  
 Permit No 230306  
 Date Issued 12/11/2013 Date Expires 12/11/2015