



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

RECEIVED

REPORT #7

Complete this report in duplicate at the time of the regular monthly preventative maintenance. Send copy to Department of Health and Senior Services; retain original in department file. *By Brian Lutmer at 9:17 am, Nov 04, 2015*

ALCO SENSOR IV SN 097406	PRINTER SN 84.9324.050	DATE OF INSPECTION 10/31/2015
LOCATION OF INSTRUMENT (STREET AND CITY) 111 E. Kelling Ave, Waverly, MO 64096		TIME OF INSPECTION 10:41 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 # AG510002 EXP. DATE 04/10/2017

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 *✶* .098

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
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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).

Meets DOH Standards

Monthly Accuracy Check

INSPECTING OFFICER

SIGNATURE *[Signature]*

PRINT NAME
Greg A. Andrews

TYPE II PERMIT NUMBER/EXPIRATION DATE
240419 11/24/2016

TELEPHONE NUMBER
(660) 493-2914

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: 097406
Version no: 532B

TEST RECORD 00260

Temp Date Time 210L ^{s/}

Air Blank:
10/31/15 10:44 .000
Calibration Check:
20 10/31/15 10:44 .097

Subject Name
Test #3

Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 097406
Version no: 532B

TEST RECORD 00259

Temp Date Time 210L ^{s/}

Air Blank:
10/31/15 10:43 .000
Calibration Check:
19 10/31/15 10:43 .098

Subject Name
Test #2

Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 097406
Version no: 532B

TEST RECORD 00258

Temp Date Time 210L ^{s/}

Air Blank:
10/31/15 10:41 .000
Calibration Check:
19 10/31/15 10:41 .097

Subject Name
Test #1

Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 097406
Version no: 532B

TEST RECORD 00261

Temp Date Time 210L ^{s/}

VOID: REI
12 10/31/15 10:46

Subject Name
RFL

Subject I.D.

Operator Name, I.D.

Location



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

2

**PERMIT
TYPE II**

GREG A ANDREWS

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

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 11/24/2014

NUMBER 240419

EXPIRES 11/24/2016

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

acting director

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580 0771 (0-10)

LAB-4 (R8-10)

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 ANDREWS, GREG
Permit No 240419
Date Issued 11/24/2014 Date Expires 11/24/2016

Intoximeters

0.100 BrAC

Dry Gas Standard
(Ethanol, Balance Nitrogen)

Standard content equivalent to: **0.100 ± 2% BrAC (272 ppm)**

at a level (pressure of 760 mm of Hg) when used with Intoximeters products.

See altitude chart, or use a TRUE-CAL for conversion.

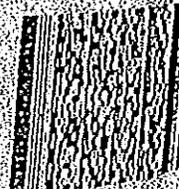
Gasification: Traceable to N.I.S.T. RGM Ethanol Standards.

CONTENTS: 108 LITERS @ 1200 psig @ 70 F

Manufactured by Mid-America Airgas for:

Intoximeters

2081 Craig Road
Saint Louis, MO 63146
Phone: (314) 429-4000
Fax: (314) 429-4170



DEV CODE
KM8H6

Expiration Date: 10 Apr 2017

Part No. 22-0770-00 Lot No. AG510002 Tank No. 030

COA Analysis available online: www.intox.com/COA True-Trade