



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

RECEIVED
 By Carol Day at 8:58 am, Feb 04, 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 107983	PRINTER SN 099.3586.802	DATE OF INSPECTION 02/04/2015
LOCATION OF INSTRUMENT (STREET AND CITY) 12 South Water Street, Liberty		TIME OF INSPECTION 7:43 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 ➤ .098

TEST 2 ➤ .098

TEST 3 ➤ .098

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).

Calibration

INSPECTING OFFICER

SIGNATURE

PRINT NAME
Chad Wilderdyke

TYPE II PERMIT NUMBER/EXPIRATION DATE
2402214/04-30-2016

TELEPHONE NUMBER
(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 00414

Temp Date Time 210L ^{g/}

Air Blank:

02/04/15 07:43 .000

Calibration:

23 02/04/15 07:43 .098

Subject Name

Lea

Subject I.D.

Operator Name, I.D.

W. Dwyke 8170

Location

AS IV Serial no: 107983
Version no: 532B

TEST RECORD 00415

Temp Date Time 210L ^{g/}

Air Blank:

02/04/15 07:46 .000

Calibration Check:

24 02/04/15 07:46 .098

Subject Name

Test #1 Check

Subject I.D.

Operator Name, I.D.

W. Dwyke 8170

Location

AS IV Serial no: 107983
Version no: 532B

TEST RECORD 00417

Temp Date Time 210L ^{g/}

Air Blank:

02/04/15 07:50 .000

Calibration Check:

25 02/04/15 07:50 .098

Subject Name

Test #2

Subject I.D.

Operator Name, I.D.

W. Dwyke 8170

Location

AS IV Serial no: 107983
Version no: 532B

TEST RECORD 00418

Temp Date Time 210L ^{g/}

Air Blank:

02/04/15 07:52 .000

Calibration Check:

25 02/04/15 07:52 .098

Subject Name

Test #3

Subject I.D.

Operator Name, I.D.

W. Dwyke 8170

Location

AS IV Serial no: 107983
Version no: 532B

TEST RECORD 00419

Temp Date Time 210L ^{g/}

VOID: RFI

12 02/04/15 07:53

Subject Name

RFI Test

Subject I.D.

Operator Name, I.D.

W. Dwyke 8170

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: 20-Mar-2014

Lot # AG407801

Exp. Date 19-Mar-2016	Cyl. Type 108	Component Ethanol Nitrogen	Certified Concentration 0.100 ± 2% BrAC (272 ppm) Balance
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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

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PERMIT
TYPE II
CHAD A WILDERDYKE

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 240221

EXPIRES 4/30/2016

MO 580-0771 (6-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

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 **WILDERDYKE, CHAD**
 Permit No **240221**
 Date Issued **4/30/2014** Date Expires **4/30/2016**