



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

RECEIVED
and whenever instrument is repaired
By Carol Day at 10:52 am, Apr 02, 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 107997	PRINTER SN 099.3586.792	DATE OF INSPECTION 04/01/2015
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LOCATION OF INSTRUMENT (STREET AND CITY) 2111 County Drive Columbia	TIME OF INSPECTION 4:10 pm
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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 (AirGas) 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 .077

TEST 2 .078

TEST 3 .078

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)	3	(.15-.19)	2	(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).

INSPECTING OFFICER

SIGNATURE #5629

PRINT NAME
Sgt. Brian Leer #5629

TYPE II PERMIT NUMBER/EXPIRATION DATE
Permit # 240339 Expiration 09/22/2016

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 IV Serial no: 107997
Version no: 532B

TEST RECORD 00038

Temp Date Time 210L
Air Blank: 04/01/15 16:10 .000
Calibration Check: 23 04/01/15 16:10 .077

Subject Name
Calibration Check #1
Subject I.D.
N/A

Operator Name, I.D.
Brian Leer #240339

Location
2111 County Drive
Columbia, MO 65202

AS IV Serial no: 107997
Version no: 532B

TEST RECORD 00039

Temp Date Time 210L
Air Blank: 04/01/15 16:12 .000
Calibration Check: 24 04/01/15 16:12 .078

Subject Name
Calibration Check #2
Subject I.D.
N/A

Operator Name, I.D.
Brian Leer #240339

Location
2111 County Drive
Columbia, MO 65202

AS IV Serial no: 107997
Version no: 532B

TEST RECORD 00040

Temp Date Time 210L
Air Blank: 04/01/15 16:14 .000
Subject Test: Man 25 04/01/15 16:14 .078

Subject Name
Calibration Check #3
Subject I.D.
N/A

Operator Name, I.D.
Brian Leer #240339

Location
2111 County Drive
Columbia, MO 65202

AS IV Serial no: 107997
Version no: 532B

TEST RECORD - REPRINT

Temp Date Time 210L
VOID: RFI
12 04/01/15 16:15

Subject Name
RFI Check #1
Subject I.D.
N/A

Operator Name, I.D.
Brian Leer #240339

Location
2111 County Drive
Columbia, MO 65202

AS IV Serial no: 107997
Version no: 532B

TEST RECORD 00042

Temp Date Time 210L

VOID: RFI
12 04/01/15 16:21

Subject Name
RFI Test #2
Subject I.D.
N/A

Operator Name, I.D.
Brian Leer #240339
Location
2111 County Drive
Columbia, MO 65202

AS IV Serial no: 107997
Version no: 532B

TEST RECORD 00043

Temp Date Time 210L

Air Blank: 04/01/15 16:22 .000
Subject Test: Auto 26 04/01/15 16:22 .000

Subject Name
Brian Leer - Self-Test
Subject I.D.
5629

Operator Name, I.D.
Brian Leer #240339
Location
2111 County Drive
Columbia, MO 65202



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

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**PERMIT
TYPE II**

BRIAN S LEER

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

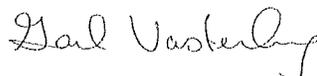
for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE 9/22/2014

NUMBER 240339

EXPIRES 9/22/2016


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 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 LEER, BRIAN
Permit No 240339
Date Issued 9/22/2014 Date Expires 9/22/2016



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

Exp. Date

7-May-2016

Cyl. Type

108

Component

Ethanol
Nitrogen

Certified Concentration

0.080 ± 0.002 BrAC (218 ppm)
Balance

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

Serial No.

EB0010581
EB0010570
EB0010285
EB0010561
EB0010681

Concentration

391.8 ppm
259.8 ppm
209.0 ppm
103.7 ppm
52.22 ppm

Serial No.

EB0010603
EB0010559
EB0010595
EB0010562
EB0010579

Concentration

392.5 ppm
258.9 ppm
208.9 ppm
104.9 ppm
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