



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

**RECEIVED**

Complete this report in duplicate at the time of the regular monthly preventive maintenance check, and whenever instrument is repaired. Send copy to Department of Health and Senior Services; retain original.

By Carol Day at 3:38 pm, Apr 01, 2016

|                             |                           |                                  |
|-----------------------------|---------------------------|----------------------------------|
| ALCO SENSOR IV SN<br>030810 | PRINTER SN<br>84.9324.143 | DATE OF INSPECTION<br>04/01/2016 |
|-----------------------------|---------------------------|----------------------------------|

|   |                                |
|---|--------------------------------|
| LOCATION OF INSTRUMENT (STREET AND CITY)<br>300 North Clark Street Moberly Missouri 65270 | TIME OF INSPECTION<br>12:56 pm |
|---|--------------------------------|

**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 Intoximeter LOT # AG602301 EXP. DATE 01/23/2018

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

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<br>  | PRINT NAME<br>Anthony Bowne        |
| TYPE II PERMIT NUMBER/EXPIRATION DATE<br>260098 EXP 02/22/2018 | TELEPHONE NUMBER<br>(660) 263-0346 |

**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: 030810  
Version no: 004C

TEST RECORD 00236

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

Air Blank: 04/01/16 12:54 .000  
Calibration Check: 24 04/01/16 12:54 .098

Subject Name

Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 030810  
Version no: 004C

TEST RECORD 00237

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

Air Blank: 04/01/16 12:56 .000  
Calibration Check: 25 04/01/16 12:56 .098

Subject Name

Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 030810  
Version no: 004C

TEST RECORD 00240

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

Air Blank: 04/01/16 13:00 .000  
Subject Test: Auto 25 04/01/16 13:00 .000

Subject Name

Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 030810  
Version no: 004C

TEST RECORD 00238

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

Air Blank: 04/01/16 12:58 .000  
Calibration Check: 25 04/01/16 12:58 .098

Subject Name

Subject I.D.

Operator Name, I.D.

Location

Operator Name, I.D.  
Location

Operator Name, I.D.  
Location

Operator Name, I.D.  
Location

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

2

PERMIT  
TYPE II

ANTHONY BOWNE

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 2/22/2016

NUMBER 260098

EXPIRES 2/22/2018

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (R6-10)

MO 680-0771 (6-10)

**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 **BOWNE, ANTHONY**  
Permit No **260098**  
Date Issued **2/22/2016** Date Expires **2/22/2018**



Airgas USA LLC (LAB)

3500 Bernard Street

St. Louis, Mo. 63103

Ph: (314) 533-3100

Fax: (314) 533-7328

Certificate of Analysis

Customer Name

Exclusive Supplier  
Intoximeters, Inc.  
2081 Craig Road  
St. Louis, Mo 63146

Test Date: 24-Jan-2016

Lot # AG602301 Model 108cadd

Exp. Date  
23-Jan-2018

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: 2016.01.25 09:20:21 -06:00  
Reason: Dry gas standard certification of analysis  
Location: Airgas USA LLC (Lab)

Analyst: Rod Marsala  
Rod Marsala

ISO 17025:2005 A2LA accredited. Certificate Number 2989.01