



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

**RECEIVED**  
 By Carol Day at 10:11 am, Feb 22, 2016

REPORT #7

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 087977	PRINTER SN 08C.3527.183	DATE OF INSPECTION 02/19/2016
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LOCATION OF INSTRUMENT (STREET AND CITY) 9928 GRAVOIS ROAD ST. LOUIS	TIME OF INSPECTION 4:05 am
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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 LOT # AG533901 EXP. DATE 08/05/2017
- 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 ● 0.100%	TEST 2 ● 0.100%	TEST 3 ● 0.100%
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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)	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).

Newly assigned instrument.

**INSPECTING OFFICER**

SIGNATURE 	PRINT NAME DONALD M. JACQUIN
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TYPE II PERMIT NUMBER/EXPIRATION DATE 250318 12/28/2017	TELEPHONE NUMBER (314) 677-9921
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**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

ALCO-SENSOR IV MONTHLY MAINTENANCE REPORT

FEBRUARY 2016

UNIT #087977

PRINTER #08C.3527.183

AS IV Serial no: 087977  
Version no: 532B

TEST RECORD 00017

Temp Date Time 210L

Air Blank:  
02/20/16 04:05 .000  
Calibration Check:  
20 02/20/16 04:05 .100

Subject Name

TEST #1

Subject I.D.

N/A

Operator Name, I.D.

JACQUIN, 250318

Location

9928 GRAVOIS RD

PCT 3

AS IV Serial no: 087977  
Version no: 532B

TEST RECORD 00018

Temp Date Time 210L

Air Blank:  
02/20/16 04:07 .000  
Calibration Check:  
21 02/20/16 04:07 .100

Subject Name

TEST #2

Subject I.D.

N/A

Operator Name, I.D.

JACQUIN, 250318

Location

9928 GRAVOIS RD

PCT 3

AS IV Serial no: 087977  
Version no: 532B

TEST RECORD 00019

Temp Date Time 210L

Air Blank:  
02/20/16 04:09 .000  
Calibration Check:  
22 02/20/16 04:09 .100

Subject Name

TEST #3

Subject I.D.

N/A

Operator Name, I.D.

JACQUIN, 250318

Location

9928 GRAVOIS RD

PCT 3

AS IV Serial no: 087977  
Version no: 532B

TEST RECORD 00020

Temp Date Time 210L

VOID: RFI  
12 02/20/16 04:10

Subject Name

RFI

Subject I.D.

N/A

Operator Name, I.D.

JACQUIN, 250318

Location

9928 GRAVOIS RD

PCT 3



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:** 7-Dec-2015

**Lot # AG533901 Model 30cacd**

<b><u>Exp. Date</u></b>	<b><u>Cyl. Type</u></b>	<b><u>Component</u></b>	<b><u>Certified Concentration</u></b>
5-Aug-2017	30	Ethanol Nitrogen	0.100 ± 2% BrAC (272 ppm) Balance

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

<b><u>Serial No.</u></b>	<b><u>Concentration</u></b>	<b><u>Serial No.</u></b>	<b><u>Concentration</u></b>
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: 2015.12.07 14:29:01 -06:00  
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



**PERMIT**  
 TYPE II

**DONALD M JACQUIN**

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 12/28/2015

NUMBER 250318

EXPIRES 12/28/2017

MO-588-0771 (6-10)

*[Signature]*  
 DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (06-10)