



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

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 097432	PRINTER SN 84.9324.045	DATE OF INSPECTION 03/14/2016
LOCATION OF INSTRUMENT (STREET AND CITY) 101 Sheriff Dierker Ct., O'Fallon		TIME OF INSPECTION 3:40 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.

<input checked="" type="checkbox"/> DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)	Passed
<input checked="" type="checkbox"/> TEMPERATURE OF ALCO SENSOR (10°C - 40°C)	27°C
<input checked="" type="checkbox"/> PRINTER WORKING PROPERLY	Passed
<input checked="" type="checkbox"/> TIME AND DATE DISPLAYING PROPERLY	03/14/2016 15:40

**BREATH ALCOHOL ACCURACY STANDARDS**

SIMULATOR SOLUTION  COMPRESSED ETHANOL-GAS MIXTURE

STANDARD SUPPLIER Intoximeters, Inc. LOT # AG525303 EXP. DATE 09/10/2017

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 ← .077	TEST 2 ← .076	TEST 3 ← .076
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RFI DETECTOR OPERATING *Passed*

**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).

Adjusted time for daylight savings.

**INSPECTING OFFICER**

SIGNATURE <i>PO [Signature] 620</i>	PRINT NAME Officer, S. Ginnever DSN 620
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TYPE II PERMIT NUMBER/EXPIRATION DATE 250185 - 08/18/2017	TELEPHONE NUMBER (636) 949-3000
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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



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:** 14-Sep-2015

**Lot #** AG525303 **Model** 108cacc

<u>Exp. Date</u>	<u>Cyl. Type</u>	<u>Component</u>	<u>Certified Concentration</u>
10-Sep-2017	108	Ethanol Nitrogen	0.080 ± 0.002 BrAC (218 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: 2015.09.14 14:59:00 -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



PERMIT  
TYPE II

SCOTT R GINNEVER

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 508.111 through 508.119 RSMo.

DATE 8/18/2015

NUMBER 250185

EXPIRES 8/18/2017

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB 4100109

MOSS0007416100

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: GINNEVER, SCOTT  
Permit No: 250185  
Date Issued 8/18/2015 Date Expires 8/18/2017

**ST. CHARLES COUNTY POLICE DEPARTMENT - BREATH ALCOHOL PROGRAM**

AS IV Serial no: 097432  
Version no: 532B

TEST RECORD 00275

Temp Date Time 210L

Air Blank: 03/14/16 15:40 .000

Calibration Check: 27 03/14/16 15:40 .077

Subject Name

Test

Subject I.D.

Ginniver 620

Operator Name, I.D.

101 Sheriff Dieker-CT

Location

O'Fallon MO 63366  
620

AS IV Serial no: 097432  
Version no: 532B

TEST RECORD 00276

Temp Date Time 210L

Air Blank: 03/14/16 15:42 .000

Calibration Check: 27 03/14/16 15:42 .076

Subject Name

Test

Subject I.D.

Ginniver 620

Operator Name, I.D.

101 Sheriff Dieker-CT

Location

O'Fallon MO 63366  
620

AS IV Serial no: 097432  
Version no: 532B

TEST RECORD - REPRINT

TEST RECORD 00277

Temp Date Time 210L

Air Blank: 03/14/16 15:43 .000

Calibration Check: 27 03/14/16 15:43 .076

Subject Name

Test

Subject I.D.

Ginniver 620

Operator Name, I.D.

101 Sheriff Dieker-CT

Location

O'Fallon MO 63366  
620

AS IV Serial no: 097432  
Version no: 532B

TEST RECORD 00278

Temp Date Time 210L

VOID: RFI 12 03/14/16 15:45

Subject Name

Test

Subject I.D.

Ginniver 620

Operator Name, I.D.

101 Sheriff Dieker-CT

Location

O'Fallon MO 63366  
620

**TICKET #1**

**TICKET #2**

**TICKET #3**

ASIV S/N: 097432

TYPE II: Ginniver 620

DATE: 03/14/2016