



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE

RECEIVED

REPORT #7

By Carol Day at 3:37 pm, Apr 01, 2016

Complete this report in duplicate at the time of the regular monthly maintenance. If repaired, send copy to Department of Health and Senior Services; retain original in department file.

ALCO SENSOR IV SN 111324	PRINTER SN 099.3586.574	DATE OF INSPECTION 04/01/2016
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LOCATION OF INSTRUMENT (STREET AND CITY) 300 North Clark Street Moberly Missouri 65270	TIME OF INSPECTION 1:00 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 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 .104

TEST 2 .104

TEST 3 .104

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).

INSPECTING OFFICER

SIGNATURE

PRINT NAME
Anthony Bowne

TYPE II PERMIT NUMBER/EXPIRATION DATE
260098 Expires 02/22/2018

TELEPHONE NUMBER
(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: 111324
Version no: 532B

TEST RECORD 00040 s/
Temp Date Time 210L

Air Blank:
04/01/16 13:03 .000
Calibration Check:
20 04/01/16 13:03 .104

Subject Name

Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 111324
Version no: 532B

TEST RECORD 00044 s/
Temp Date Time 210L

VOID: RFI
12 04/01/16 13:09

Subject Name

Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 111324
Version no: 532B

TEST RECORD 00041 s/
Temp Date Time 210L

Air Blank:
04/01/16 13:05 .000
Calibration Check:
21 04/01/16 13:05 .104

Subject Name

Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 111324
Version no: 532B

TEST RECORD 00045 s/
Temp Date Time 210L

Air Blank:
04/01/16 13:10 .000
Subject Test: Auto
24 04/01/16 13:10 .000

Subject Name

Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 111324
Version no: 532B

TEST RECORD 00042 s/
Temp Date Time 210L

Air Blank:
04/01/16 13:07 .000
Calibration Check:
22 04/01/16 13:07 .104

Subject Name

Subject I.D.

Operator Name, I.D.

Location

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

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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 (R8-10)

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** 108cacc

Exp. Date 23-Jan-2018	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: 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