



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

**RECEIVED**  
 By Carol Day at 10:40 am, Feb 04, 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 111335	PRINTER SN 099.3586.571	DATE OF INSPECTION 01/30/2016
LOCATION OF INSTRUMENT (STREET AND CITY) 9928 GRAVOIS ROAD ST. LOUIS		TIME OF INSPECTION 10:39 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**

<input type="checkbox"/> SIMULATOR SOLUTION	<input checked="" type="checkbox"/> COMPRESSED ETHANOL-GAS MIXTURE
<input checked="" type="checkbox"/> STANDARD SUPPLIER <u>INTOXIMETERS</u>	LOT # <u>AG533901</u> EXP. DATE <u>08/05/2017</u>
<input type="checkbox"/> 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 • 0.093	TEST 2 • 0.094	TEST 3 • 0.095
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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)	17	(.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).

17 TESTS OF (0-.04) WERE TRAINING TESTS

**INSPECTING OFFICER**

SIGNATURE <i>Sgt. D. J. 3096</i>	PRINT NAME DONALD M. JACQUIN
TYPE II PERMIT NUMBER/EXPIRATION DATE 250318 12/28/2017	TELEPHONE NUMBER (314) 677-9921

**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

JANUARY 2016

UNIT #111335

PRINTER #099.3586.571

AS IV Serial no: 111335  
Version no: 532B

AS IV Serial no: 111335  
Version no: 532B

AS IV Serial no: 111335  
Version no: 532B

TEST RECORD 00040

TEST RECORD 00041

TEST RECORD 00042

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

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

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

Air Blank:  
01/30/16 22:39 .000  
Subject Test: Auto  
19 01/30/16 22:39 .000

Air Blank:  
01/30/16 22:41 .000  
Calibration Check:  
19 01/30/16 22:41 .093

Air Blank:  
01/30/16 22:43 .000  
Subject Test: Man  
21 01/30/16 22:43 .094

Subject Name

SOBER TEST

Subject Name

TEST #1

Subject Name

TEST #2

Subject I.D.

N/A

Subject I.D.

N/A

Subject I.D.

N/A

Operator Name, I.D.

JACQUIN 250318

Operator Name, I.D.

JACQUIN, 250318

Operator Name, I.D.

JACQUIN, 250318

Location

9928 GRAVOIS RD

Location

9928 GRAVOIS RD

Location

9928 GRAVOIS RD

PCT 3

PCT 3

PCT 3

AS IV Serial no: 111335  
Version no: 532B

AS IV Serial no: 111335  
Version no: 532B

TEST RECORD 00043

TEST RECORD 00044

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

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

Air Blank:  
01/30/16 22:45 .000  
Calibration Check:  
21 01/30/16 22:45 .095

VOID: RFI  
12 01/30/16 22:46

Subject Name

TEST #3

Subject Name

RFI

Subject I.D.

N/A

Subject I.D.

N/A

Operator Name, I.D.

JACQUIN, 250318

Operator Name, I.D.

JACQUIN, 250318

Location

9928 GRAVOIS RD

Location

9928 GRAVOIS RD

PCT 3

PCT 3



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

  
 DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

  
 DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES



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 30cacc**

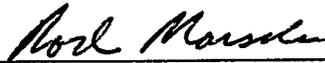
<b>Exp. Date</b> 5-Aug-2017	<b>Cyl. Type</b> 30	<b>Component</b> Ethanol Nitrogen	<b>Certified Concentration</b> 0.100 ± 2% BrAC (272 ppm) Balance
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Certification Traceable to N.I.S.T. RGM Ethanol Standards:

<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: 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**