



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

RECEIVED
 By Carol Day at 4:19 pm, Aug 08, 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 111655 (Poplar Bluff PD)	PRINTER SN 09B.3589.464	DATE OF INSPECTION 08/04/2016
LOCATION OF INSTRUMENT (STREET AND CITY) 1200 South Holden Street Warrensburg		TIME OF INSPECTION 10:26 am

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 # AG535002 EXP. DATE 12/16/2017
- 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 0.077	TEST 2 0.077	TEST 3 0.077
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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).

New Instrument assigned to Poplar Bluff Police Department.

INSPECTING OFFICER	
SIGNATURE 	PRINT NAME Dan Lucas
TYPE II PERMIT NUMBER/EXPIRATION DATE 250138 06/15/2017	TELEPHONE NUMBER (660) 543-4573

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: 111655
Version no: 532B

TEST RECORD 00005

Temp Date Time ^{9/} 210L

Air Blank:
08/04/16 10:26 .000
Calibration Check:
25 08/04/16 10:26 .077

Subject Name

Test

Subject I.D.

#1

Operator Name, I.D.

Dan Lucas 250138

Location EXP: 04/15/2017

1200 S Holden Street

Warrensburg MO 64093

AS IV Serial no: 111655
Version no: 532B

TEST RECORD 00006

Temp Date Time ^{9/} 210L

Air Blank:
08/04/16 10:30 .000
Calibration Check:
26 08/04/16 10:30 .077

Subject Name

Test

Subject I.D.

#2

Operator Name, I.D.

Dan Lucas 250138

Location EXP: 04/15/2017

1200 S Holden Street

Warrensburg MO 64093

AS IV Serial no: 111655
Version no: 532B

TEST RECORD 00007

Temp Date Time ^{9/} 210L

Air Blank:
08/04/16 10:33 .000
Calibration Check:
26 08/04/16 10:33 .077

Subject Name

Test

Subject I.D.

#3

Operator Name, I.D.

Dan Lucas

Location

1200 S Holden Street

Warrensburg MO 64093

AS IV Serial no: 111655
Version no: 532B

TEST RECORD 00008

Temp Date Time ^{9/} 210L

VOID: RFI
12 08/04/16 10:35

Subject Name

RFI

Subject I.D.

Test

Operator Name, I.D.

Dan Lucas 250138

Location EXP: 04/15/2017

1200 S Holden Street

Warrensburg MO 64093

AS IV Serial no: 111655
Version no: 532B

TEST RECORD 00009

Temp Date Time ^{9/} 210L

Air Blank:
08/04/16 10:43 .000
Subject Test: Auto
25 08/04/16 10:43 .000

Subject Name

Blank

Subject I.D.

Test

Operator Name, I.D.

Dan Lucas 250138

Location

1200 S Holden Street

Warrensburg MO 64093



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: 21-Dec-2015

Lot # AG535002 Model 108caccd

Exp. Date

16-Dec-2017

Cyl. Type

108

Component

Ethanol
Nitrogen

Certified Concentration

0.080 ± 0.002 BrAC (218 ppm)
Balance

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

Serial No.

EB0010581

EB0010570

EB0010285

EB0010561

EB0010681

Concentration

391.8 ppm

259.8 ppm

209.0 ppm

103.7 ppm

52.22 ppm

Serial No.

EB0010603

EB0010559

EB0010595

EB0010562

EB0010579

Concentration

392.5 ppm

258.9 ppm

208.9 ppm

104.9 ppm

52.94 ppm

Analytical Method:

NDIR

Digitally signed by Quality Control
Date: 2015.12.21 14:02:23 -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**

DAN R LUCAS

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

DATAMASTER, INTOX DMT, INTOX 8000, INTOX EC/IR II, ASIV W/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 6/15/2015

NUMBER 250138

EXPIRES 6/15/2017

[Handwritten Signature]

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

[Handwritten Signature]

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES