



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
STATE PUBLIC HEALTH LABORATORY

RECEIVED

By Tracy Crews at 7:11 am, Jul 18, 2023

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 097438	NAME OF AGENCY Kansas City Police Department	DATE OF INSPECTION 06-17-23
LOCATION OF INSTRUMENT (STREET AND CITY) 9701 MARION PARK DR, KANSAS CITY		TIME OF INSPECTION 0018

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 # AG132803 EXP. DATE 11/24/2023

SIMULATOR TEMPERATURE (34°C ± 0.2°C) _____ SIM. SN _____ SIM. NIST 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	.079	TEST 2	.078	TEST 3	.079
--------	-------------	--------	-------------	--------	-------------

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	2	(0-.04)	0	(.05-.09)	0	(.10-.14)	3	(.15-.19)	1	(OVER .19)	0
----------	----------	---------	----------	-----------	----------	-----------	----------	-----------	----------	------------	----------

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).

Instrument meets all DOHSS standards and guidelines.

INSPECTING OFFICER

SIGNATURE 	PRINT NAME P.O. Infranca 5670
TYPE II PERMIT NUMBER/EXPIRATION DATE 210128 06/21/2023	TELEPHONE NUMBER () 816-382-5897

Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office by mail, fax, or email.

6-17-2023 ASIV

AS IV Serial no: 897439
Version no: 532B

TEST RECORD 00419
Temp Date Time 210L

Air Blank: 06/17/23 00:13 .065
Calibration Check: 24 06/17/23 00:13 .079

Subject Name
Test #1
Subject I.D.

Operator Name, I.D.
230118 6-7-23
Location
Kcpd traffic

AS IV Serial no: 897438
Version no: 532B

TEST RECORD 00420
Temp Date Time 210L

Air Blank: 06/17/23 00:15 .000
Calibration Check: 24 06/17/23 00:15 .078

Subject Name
Test #2
Subject I.D.

Operator Name, I.D.
230118 6-7-23
Location
Kcpd traffic

AS IV Serial no: 897438
Version no: 532B

TEST RECORD 00421
Temp Date Time 210L

Air Blank: 06/17/23 00:17 .000
Calibration Check: 24 06/17/23 00:17 .079

Subject Name
Test #3
Subject I.D.

Operator Name, I.D.
230118 6-7-23
Location
Kcpd traffic

AS IV Serial no: 897438
Version no: 532B

TEST RECORD 00422
Temp Date Time 210L

VOID: RFI
12 06/17/23 00:18

Subject Name
RFI
Subject I.D.

Operator Name, I.D.
230118 6-7-23
Location
Kcpd traffic



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



PERMIT
TYPE II

JORDAN INFRANCA

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, INTOXILYZER 8000

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.

Miles Magnum
DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Doreen J. Nicholson
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

DATE 6/7/2023
NUMBER 230118
EXPIRES 6/7/2025
MO 580-0771 (6-10)



Airgas USA, LLC (LAB)
3500 Bernard Street
St. Louis, Mo. 63103
Ph: (314) 533-3100
Fax: (314) 533-7328

Certificate of Analysis

Test Date: 29-Nov-2021

Customer Name
Exclusive Supplier
Intoximeters, Inc.
2081 Craig Road
St. Louis, Mo 63146

Lot # AG132803 Model 108

Exp Date 24-Nov-2023
Cyl. Type 108
Component Ethanol Nitrogen
Certified Concentration 0.082 ± 0.002 BrAC (223 ppm)

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

RGM Serial No.	Concentration	RGM Serial No.	Concentration
EB0010581	392.1 ppm	EB0010603	393.0 ppm
EB0010570	259.8 ppm	EB0010659	258.2 ppm
EB0010285	206.0 ppm	EB0010595	206.3 ppm
EB0010561	103.6 ppm	EB0010562	104.2 ppm
EB0010681	52.12 ppm	EB0010579	52.81 ppm

CRM Serial No.	Concentration	CRM Serial No.	Concentration
CC434668	800.0 ppm	0056649	390.1 ppm
CC234503	253.0 ppm	0056662	150.2 ppm

Analytical Method: NDIR

Digitally signed by Rod Marsala
DN: cn=Rod Marsala, o=Airgas USA, LLC (LAB)
Serial: 136, 2021.12.4.2

Rod Marsala
Rod Marsala

Approved for Release:

ISO 17025:2017 A2LA accredited. Certificate Number 3082.06
ISO 17034:2016 A2LA accredited. Certificate Number 3082.07

STATE OF MISSOURI
DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM
INSTRUMENT OPERATOR CARD

The named calibrator is authorized to operate an evidential breath alcohol instrument for the administration of the alcoholic content of a breath sample of expired air in Missouri.

Operator: **INFRANCA, JORDAN**
Permit No. **230118**
Date Issued **6/7/2023** Date Expires **6/7/2025**