



ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

	duplicate at the time	e of the regular month	ly preventative ma	aintenance check, and	whenever instrument is repair	
Complete this report in Send copy to Departm	ent of Health and Se	enior Services: retain or	iginal in departme	nt file		
ALCO SENSOR IV SN		NAME OF AGENCY O'Fallon PD			DATE OF INSPECTION	
LOCATION OF INSTRUMENT (STREET AND CITY) 1019 Bryan Road, O'Fallon, MO		10.4101112			8-11-2023 TIME OF INSPECTION 1835	
CHECKLIST: Place a n where determined.) Un	nark in the box by ead marked items must I	ch item if found to be sa	tisfactory or if ope	rating within establishe	ed limits. (Write in observed valu	
	JT (ALL ELEMENTS					
TEMPERATURE C	OF ALCO SENSOR (10°C - 40°C)				
✓ PRINTER WORKII	NG PROPERLY					
✓ TIME AND DATE [ERLY				
BREATH ALCOHOL A						
SIMULATOR SOLU	JTION		✓ COMPRE	SSED ETHANOL-GA	S MIXTURE	
✓ STANDARD SUPP	LIER Intoximeter	s, Inc.	LOT # AG310	LOT # AG310305 EXP. DATE 04-13-2025		
SIMULATOR TEMP	PERATURE (34°C ±	0.2°C) §				
less. Check the box	ng a standard solutio corresponding to the DARD - MUST READ	n. All three tests must e standard solution beir D BETWEEN 0.095% a	be within ±5% of ng used. (PRINTC nd 0.105% INCLL	OUT ATTACHED) JSIVE	d must have a spread of .005 o	
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AS IV Serial no: 104641 Version no: 532B	AS IV Serial no: 104641 Version no: 532B	AS IV Serial no: 104641 Version no: 532B	
TEST RECORD 01383	TEST RECORD 01384		
Temp Date Time 210L	9/	TEST RECORD 01385	
Air Blank:	Temp Date Time 210L	Temp Date Time 210I	
08/11/23 18:39 .000 Calibration Check: 22 08/11/23 18:39 .078	Air Blank: 08/11/23 18:41 .000 Calibration Check: 23 08/11/23 18:41 .078	Air Blank: 08/11/23 18:43 .000 Calibration Check:	
Subject Name	Subject Name	24 08/11/23 18:43 .077	
TRST	TEST 2	Subject Name	
Subject I.D.	Subject I.D.	Subject I.D.	
Operator Name, I.D.	Operator Name, I.D.	Operator Name, I.D.	
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Location	Location	Location 339	
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Version no:	l no: 104641 532B	AS IV Serial no: 104641 Version no: 532B	
TEST RECO	ORD 01386	TEST RECORD 01387	
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Operator Nam	e, I.D.	Subject I.D.	
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	and the control of th	Location	



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: 18-Apr-2023

Lot # AG310305 Model 108

Exp Date

Cyl. Type

Component

Certified Concentration

 0.080 ± 0.002 BrAC (218 ppm)

13-Apr-2025

108

Ethanol Nitrogen

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

RGM Serial No. Concentration EB0010581 391.8 ppm EB0010570 259.8 ppm EB0010285 209.0 ppm EB0010561 103.7 ppm EB0010681 52.22 ppm

RGM Serial No. Concentration 392.5 ppm EB0010603 EB0010559 258.9 ppm EB0010562 104.2 ppm EB0010579 52.94 ppm

CRM Serial No.

CC727481 CC727496

Concentration mqq 0.008

253.0 ppm

CRM Serial No.

CC727493 CC727498 Concentration

390.0 ppm 150.0 ppm

Analytical Method: NDIR

Digitally signed by:Quality Control Reason:Dry gas standard certification of analysis Location:Airgas USA LLC (Lab) Date:04.19.2023 17:13

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**



PERMIT TYPE II **CHRIS SINNOKRAK**

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.

DATE12/14/2022	Mile Mason
220271	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 220271	
EXPIRES 12/14/2024	Davla J. Nichelson
MO 580-0771 (6-10)	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (R6-10)



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

Operator SINNOKRAK, CHRIS Permit No

220271

Date Issued 12/14/2022 Date Expires 12/14/2024

