

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

2. 20165644 S.						
Complete this report in duplicate at the tim Send copy to Department of Health and Se	e of the regular monthly p nior Services; retain origin	reventative maintena nal in department file.	ance check, and	l wheneve	r instrument is repaired.	
alco sensor IV sn 105445				DATE OF INSPECTION 08/09/2023		
LOCATION OF INSTRUMENT (STREET AND CITY) 415 Third Street, Platte City, Missouri 64079			TIME OF INSPECTION 9:38 pm			
CHECKLIST: Place a mark in the box by ea	ch item if found to be satist	actory or if operating	within establish	ed 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 PROP						
BREATH ALCOHOL ACCURACY STAND	ARDS					
☐ SIMULATOR SOLUTION ☐ COMPRESSED ETHANOL-GAS MIXTURE						
✓ STANDARD SUPPLIER Intoximeters, Inc. LOT # A			3309501 EXP. DATE 04/05/2025			
☐ SIMULATOR TEMPERATURE (34°C ±	= 0.2°C) SII	M. SN	SIM. NIST EXP DATE		DATE	
less. Check the box corresponding to to the second	AD BETWEEN 0.095% and AD BETWEEN 0.076% and	d 0.105% INCLUSIVI d 0.084% INCLUSIVI	E E			
TEST 1 🕶 .098	ST 1 • .098 TEST 2 • .097		TEST 3 • .097			
✓ RFI DETECTOR OPERATING						
INDICATE THE NUMBER OF BREATH TI (DO NOT INCLUDE SELF-ADMINISTERE		G RANGES SINCE	THE LAST MAI	NTENAN	CE REPORT:	
	(.0509) 2	(.1014)	(.1519)	1	(OVER .19)	
List any new parts and describe any altera established limits (use other side if necess	ation or modification that vary).	was made to restore	the instrument	to operate	e satisfactorily and within	
INSPECTING OFFICER			DOME NAME			
SIGNATURE 2/11/5			PRINT NAME William Bee	ler		
TYPE II PERMIT NUMBER/EXPIRATION DATE 220122 / 05-11-2024			TELEPHONE NUMBER (816) 858-3521			
Return completed report to the: Breath	Alcohol Program, MO De	partment of Health a	J.		heast District Office	
by ma	il, fax, or email.					

AS IV Serial no: 105445 532B Version no: TEST RECORD 01225 9/ Time 210L Temp Date Temp Air Blank: 08/09/23 21:38 .000 Calibration Check: 21 08/09/23 21:38 .098 Subject Name Test #1 Subject I.D. Operator Name, I.D. 5111/2027 Location

AS IV Serial no: 105445 532B Version no: TEST RECORD 01226 Time 210L Date Air Blank: 08/09/23 21:40 .000 Calibration Check: 22 08/09/23 21:40 .097 Subject Name Task # Subject I.D. Operator Name, I.D. 220122 W. Beals Location

AS IV Serial no: 105445
Version no: 532B

TEST RECORD 01227

Yellow Part Time 210L

Air Blank:
08/09/23 21:45 .000
Calibration Check:
23 08/09/23 21:45 .097

Subject Name

Test # 3
Subject I.D.

Operator Name: I.D.
V. Beelt still 2014
Location

415 There St



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: 5-Apr-2023

Lot # AG309501 Model 108

Exp Date 5-Apr-2025 Cyl. Type 108

Component

Certified Concentration

Ethanol

Nitrogen

 $0.100 \pm 2\%$ BrAC (272 ppm)

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

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

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

CRM Serial No. CC727481 CC727496

Concentration 800.0 ppm 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:04.05.2023 17:34

Approved for Release:

Rod Marsala

Roll Marsola

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

WILLIAM BEELER

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 DMT

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.

DATE5/11/2022	Laura G Nay			
DAIE	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY			
NUMBER 220122	Daves J. Nichelson			
EXPIRES 5/11/2024	former s. I ferrelle			
EAFINES SHITZUZA	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES			

MO 580-0771 (6-10)

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 in Missouri.

Operator BEELER, WILLIAM

Permit No 220122

Date Issued 5/11/2022 Date Expires 5/11/2024

