



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
 STATE PUBLIC HEALTH LABORATORY
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
 Send copy to Department of Health and Senior Services; retain original in department file.

RECEIVED ired.
 By Tracy Crews at 8:41 a

ALCO SENSOR IV SN 111322	NAME OF AGENCY EDMUNDSON PD	DATE OF INSPECTION 06/01/2023
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LOCATION OF INSTRUMENT (STREET AND CITY) 4430 Holman Lane, Edmundson, Mo, 63134	TIME OF INSPECTION 12:37 am
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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
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<input checked="" type="checkbox"/> STANDARD SUPPLIER <u>Intoximeters, INC</u> LOT # <u>AG231902</u> EXP. DATE <u>11/15/2024</u>
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<input type="checkbox"/> SIMULATOR TEMPERATURE (34°C ± 0.2°C) SIM. SN SIM. NIST EXP DATE
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- 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 ➡ .099	TEST 2 ➡ .098	TEST 3 ➡ .098
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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).

INSPECTING OFFICER	
SIGNATURE 	PRINT NAME Patrolman Brandon Lange DSN 74
TYPE II PERMIT NUMBER/EXPIRATION DATE 210148 7/23/2023	TELEPHONE NUMBER (314) 428-5477

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

AS IV Serial no: 111322
Version no: 532B

TEST RECORD 00480

Temp Date Time ^{g/} 210L

Air Blank:
06/01/23 00:37 .000
Calibration Check:
22 06/01/23 00:37 .099

Subject Name

maint I

Subject I.D.

NA

Operator Name, I.D.

Samy 24

Location

ERD

AS IV Serial no: 111322
Version no: 532B

TEST RECORD 00481

Temp Date Time ^{g/} 210L

Air Blank:
06/01/23 00:39 .000
Calibration Check:
23 06/01/23 00:39 .098

Subject Name

Maint 2

Subject I.D.

NA

Operator Name, I.D.

Samy 24

Location

ERD

AS IV Serial no: 111322
Version no: 532B

TEST RECORD 00482

Temp Date Time ^{g/} 210L

Air Blank:
06/01/23 00:40 .000
Calibration Check:
23 06/01/23 00:40 .098

Subject Name

Maint 3

Subject I.D.

NA

Operator Name, I.D.

Samy 24

Location

ERD

AS IV Serial no: 111322
Version no: 532B

TEST RECORD 00483

Temp Date Time ^{g/} 210L

VOID: RFI
12 06/01/23 00:42

Subject Name

RFI

Subject I.D.

NA

Operator Name, I.D.

Samy 24

Location

ERD

AS IV Serial no: 111322
Version no: 532B

TEST RECORD 00484

Temp Date Time ^{g/} 210L

Air Blank:
06/01/23 00:43 .000
Subject Test: Auto
24 06/01/23 00:43 .000

Subject Name

Samy

Subject I.D.

24

Operator Name, I.D.

Samy 24

Location

ERD



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

Certificate of Analysis

Test Date: 17-Nov-2022

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

Lot # AG231902 **Model** 108

Exp Date 15-Nov-2024	Cyl. Type 108	Component Ethanol Nitrogen	Certified Concentration 0.100 ± 2% BrAC (272 ppm)
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Certification Traceable to N.I.S.T. RGM and to CRM Ethanol Standards:

RGM Serial No.	Concentration	RGM Serial No.	Concentration
EB0010581	391.8 ppm	EB0010603	392.5 ppm
EB0010570	259.8 ppm	EB0010559	258.9 ppm
EB0010285	209.0 ppm	EB0010562	104.2 ppm
EB0010561	103.7 ppm	EB0010579	52.94 ppm
EB0010681	52.22 ppm		

CRM Serial No.	Concentration	CRM Serial No.	Concentration
CC727481	800.0 ppm	CC727493	390.0 ppm
CC727496	253.0 ppm	CC727498	150.0 ppm

Analytical Method: NDIR

Digitally signed by:Quality Control
 Reason:Dry gas standard certification of analysis
 Location:Airgas USA LLC (Lab)
 Date:11.17.2022 20:17

Approved for Release: 
 Rod Marsala

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

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**PERMIT
TYPE II**

BRANDON W. LANGE

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 7/23/2021

Laura Q. Way
DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

NUMBER 210148

Robt. K. Kuehl

EXPIRES 7/23/2023

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES
LAB-4 (R6-10)

MO-580-0771 (6-10)

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

INSTRUMENT OPERATOR CARD

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 LANGE, BRANDON
Permit No 210148
Date issued 7/23/2021 Date Expires 7/23/2023

