



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 instrument is repaired. Send copy to Department of Health and Senior Services; retain original in department file.

ALCO SENSOR IV SN 111638	NAME OF AGENCY Smithville Police Department	DATE OF INSPECTION 01/05/2023
LOCATION OF INSTRUMENT (STREET AND CITY) 107 W Main St, Smithville, MO 64089		TIME OF INSPECTION 0302

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 # AG113801 EXP. DATE 05/18/2023

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 **0.098**

TEST 2 **0.098**

TEST 3 **0.098**

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-.04)	(.05-.09)	(.10-.14)	(.15-.19)	(OVER .19)
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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
Daniel Gearhart

TYPE II PERMIT NUMBER/EXPIRATION DATE
2200126 05/11/2024

TELEPHONE NUMBER
(816)532-0500

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: 111638
Version no: 532B

TEST RECORD 00141

Temp Date Time ^{s/} 210L

Air Blank:
01/05/23 03:03 .000
Calibration Check:
22 01/05/23 03:03 .098

Subject Name

MAINTENANCE

Subject I.D.

TEST #1

Operator Name, I.D.

GEARHART 220126

Location

107 W MAIN ST

SMETHVILLE, MO 64089

AS IV Serial no: 111638
Version no: 532B

TEST RECORD 00142

Temp Date Time ^{s/} 210L

Air Blank:
01/05/23 03:04 .000
Calibration Check:
23 01/05/23 03:04 .098

Subject Name

MAINTENANCE

Subject I.D.

TEST #2

Operator Name, I.D.

GEARHART 220126

Location

107 W. MAIN ST

SMETHVILLE, MO 64089

AS IV Serial no: 111638
Version no: 532B

TEST RECORD 00143

Temp Date Time ^{s/} 210L

Air Blank:
01/05/23 03:06 .000
Calibration Check:
23 01/05/23 03:06 .098

Subject Name

MAINTENANCE

Subject I.D.

TEST #3

Operator Name, I.D.

GEARHART 220126

Location

107 W MAIN ST

SMETHVILLE, MO 64089

AS IV Serial no: 111638
Version no: 532B

TEST RECORD 00144

Temp Date Time ^{s/} 210L

VOID: RFI
12 01/05/23 03:07

Subject Name

MAINTENANCE

Subject I.D.

TEST #4 - RFI

Operator Name, I.D.

GEARHART 220126

Location

107 W MAIN ST

SMETHVILLE, MO 64089



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-May-2021

Lot # AG113801 Model 108cadd

<u>Exp. Date</u> 18-May-2023	<u>Cvl. Type</u> 108	<u>Component</u> Ethanol Nitrogen	<u>Certified Concentration</u> 0.100 ± 2% BrAC (272 ppm) Balance
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Certification Traceable to N.I.S.T. RGM and to CRM Ethanol Standards:

<u>RGM Serial No.</u>	<u>Concentration</u>	<u>RGM Serial No.</u>	<u>Concentration</u>
EB0010581	392.1 ppm	EB0010603	393.0 ppm
EB0010570	259.8 ppm	EB0010559	258.2 ppm
EB0010285	208.0 ppm	EB0010595	208.3 ppm
EB0010561	103.6 ppm	EB0010562	104.2 ppm
EB0010681	52.12 ppm	EB0010579	52.81 ppm

<u>CRM Serial No.</u>	<u>Concentration</u>	<u>CRM Serial No.</u>	<u>Concentration</u>
CC434668	800.0 ppm	0056649	390.1 ppm
CC234503	253.0 ppm	0056662	150.2 ppm

Analytical Method: NDIR

Digitally signed by Quality Control
 Date: 2021.05.19 13:49:52 -05:00
 Reason: Dry gas standard certification of analysis
 Location: Airgas USA LLC (Lab)

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
DANIEL GEARHART

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.

DATE 5/11/2022

NUMBER 220126

EXPIRES 5/11/2024

Laura C. Day

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Daniel J. Nielsen

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

LAB-4 (R6-10)

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 GEARHART, DANIEL
 Permit No 220126
 Date Issued 5/11/2022 Date Expires 5/11/2024

