

# MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

#### **ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT**

REPORT #7

Complete this report in dup Send copy to Department o		_			nce check, and	whenev	ver instrument is	repaired.
ALCO SENSOR IV SN 111673		NAME OF AGENCY St. Louis County Police Departmen				DATE OF INSPECTION 03/05/2023		
LOCATION OF INSTRUMENT (STREET AND CITY) 14301 South Outer 40 Rd, Chesterfield					TIME OF INSPECTION 9:44 am			
CHECKLIST: Place a mark i				erating	within establishe	d limits.	(Write in observ	ed values
where determined.) Unmark	red items must be	e corrected before	using instrument.					
DIGITAL READOUT (A	LL ELEMENTS (	PERATIONAL)						
▼ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)								
PRINTER WORKING F	PROPERLY							
☑ TIME AND DATE DISPLAYING PROPERLY								
BREATH ALCOHOL ACCU	IRACY STANDA	RDS						
☐ SIMULATOR SOLUTION ☐ COMPRESSED ETHANOL-GAS MIXTURE								
☑ STANDARD SUPPLIEF	LOT # AG204801 EXP. DATE 02/17/2024							
☐ SIMULATOR TEMPER	).2°C)	_ SIM. SN		SIM. NIST EXP DATE _				
<ul><li>✓ 0.100% STANDAR</li><li>☐ 0.080% STANDAR</li><li>☐ 0.040% STANDAR</li></ul>	ID - MUST READ	BETWEEN 0.076	% and 0.084% INC	LUSIVE		-		
TEST 1 .101		TEST 2 <b>▼</b> .101			TEST 3 ■ .101			
RFI DETECTOR OPER	ATING							
INDICATE THE NUMBER ( (DO NOT INCLUDE SELF-)			OWING RANGES	SINCE T	HE LAST MAIN	ITENAN	ICE REPORT:	
REFUSALS 0 (0		1	(.1014)	0	(.1519)	0	(OVER .19)	0
List any new parts and desestablished limits (use other	cribe any alterati	on or modification						and within
established lithits (use other	Side ii fiecessai	y)·						:
					•			
							•	
INSPECTING OFFICER								
SIGNATURE  1 4553					PRINT NAME PO Tosie DSN 4553			
TYPE II PERMIT NUMBER/EXPIRATION DATE  220173 / 06/24/2024					TELEPHONE NUMBER (636) 529-8210			
Return completed report t		lcohol Program, Mi fax, or email.	O Department of H	ealth an	d Senior Service	es, Sout	heast District O	ffice
		the state of the s						

AS IV Serial no: 111673 Version no: 532B

TEST RECORD 00423

-97 Temp Date Time 210L Air Blank: 93/95/23 89:44 .000

Calibration Check: 21 03/05/23 09:44 .101

Subject Name

est #

Operator Mame, I.D.

1.0. Tosk 4553

Location

MODOT TMC

AS IV Serial no: 111673 Version no: 5329

TEST RECORD 09425

Time 210L and the second s

Air Blankt 93,485,423 89948 .809 Calibration Check:

2. 33/30/23 29 69 .101

Skir Josef - Myrige

Mano, I.D.

Tosse 455

AS IV Serial no: 111673 " Version no: 532B

TEST RECORD 00424

90 Time 219L Temp Date

Air Blank 23/25/23 29:46 .000 Calibration Check 21 03/05/23 20:46 .101

Subject Kame

Subject

: Operator Mamos I.D.

05/8 Ro.

Location

MONOT

AS IV Serial no: 111673 Version no: 5328

TAST RECORD 69426

97 Time Temp Date A TENTON TO THE PROPERTY OF THE PARTY OF THE

COIDS DEL

12 83/85/23 99169

Sue Jock New

Sub-Secti

Consider Vanco I.V.



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: 19-Feb-2022

Lot # AG204801 Model 108

**Exp Date** 

Cyl. Type

Component

**Certified Concentration** 

17-Feb-2024

108

Ethanol Nitrogen 0.100 ± 2% BrAC (272 ppm)

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 52.22 ppm EB0010681

**RGM Serial No.** EB0010603 EB0010559 EB0010562

Concentration 392.5 ppm 258.9 ppm 104.2 ppm 52.94 ppm

**CRM Serial No.** 

Concentration mag 0.008

CRM Serial No.

Concentration

CC727481 CC727496

253.0 ppm

CC727493 CC727498

EB0010579

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) Dato:02.22.2022 19:37

Approved for Release:

Rod Marsala

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



MO 680-0771 (8-10)

### STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM



# PERMIT TYPE II

## ROBERT TOSIE

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 sam	ple of expired air. Permit issued under the provisions of sections
577.020 through 577.041, RSMo and 306.111 through 306.119 F	Mile Massime
DATE 6/24/2022	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 220173	Davis J. Nie Delson
EXPIRES 6/24/2024	DIRECTOR OF DEPARTMENT OF HEALTHAND SENIOR SERVICES
AND THE PROPERTY OF THE PROPER	ĹAB <sup>1</sup> 4 (FØ-T0)