



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 11-765	NAME OF AGENCY Jackson County Sheriff's Office	DATE OF INSPECTION 02/08/2023
-----------------------------	---	----------------------------------

LOCATION OF INSTRUMENT (STREET AND CITY) 4001 NE Lakewood Ct., Lee's Summit, MO, 64064	TIME OF INSPECTION 7:00 pm
---	-------------------------------

**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
<input checked="" type="checkbox"/> STANDARD SUPPLIER Intoximeters	LOT # AG114701 EXP. DATE 05/27/2023
<input type="checkbox"/> 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 $\blacktriangleleft$ .102	TEST 2 $\blacktriangleleft$ .100	TEST 3 $\blacktriangleleft$ .100
----------------------------------	----------------------------------	----------------------------------

- 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)	1	(.10-.14)	1	(.15-.19)	0	(OVER .19)	1
----------	---	---------	---	-----------	---	-----------	---	-----------	---	------------	---

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).

<b>INSPECTING OFFICER</b>	
SIGNATURE 	PRINT NAME Dep. S. Stoff #63/0411
TYPE # PERMIT NUMBER/EXPIRATION DATE 220266 12/02/2024	TELEPHONE NUMBER (816) 795-1960

**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: 111765  
Version no: 532B

TEST RECORD 00528

Temp Date Time 210L

Air Blank: 02/08/23 19:30 .000

Calibration Check: 18 02/08/23 19:30 .102

Subject Name

TEST 1

Subject I.D.

Monthly Maint

Operator Name, I.D.

STP EF

Location

NCSD G/HB

AS IV Serial no: 111765  
Version no: 532B

TEST RECORD 00529

Temp Date Time 210L

Air Blank: 02/08/23 19:31 .000

Calibration Check: 19 02/08/23 19:31 .100

Subject Name

TEST 2

Subject I.D.

Monthly Maint

Operator Name, I.D.

STP EF

Location

NCSD G/HB

AS IV Serial no: 111765  
Version no: 532B

TEST RECORD 00530

Temp Date Time 210L

Air Blank: 02/08/23 19:33 .000

Calibration Check: 20 02/08/23 19:33 .100

Subject Name

TEST 3

Subject I.D.

Monthly Maint

Operator Name, I.D.

STP EF

Location

NCSD G/HB

AS IV Serial no: 111765  
Version no: 532B

TEST RECORD 00531

Temp Date Time 210L

VOID: RFI

12 02/08/23 19:35

Subject Name

TEST RFI

Subject I.D.

Monthly Maint

Operator Name, I.D.

STP EF

Location

NCSD G/HB



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:** 1-Jun-2021

**Lot # AG114701 Model 108cacc**

<b>Exp. Date</b> 27-May-2023	<b>Cyl. Type</b> 108	<b>Component</b> Ethanol Nitrogen	<b>Certified Concentration</b> 0.100 ± 2% BrAC (272 ppm) Balance
---------------------------------	-------------------------	---	--

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

<table border="0"> <tr><td><b><u>RGM Serial No.</u></b></td><td><b><u>Concentration</u></b></td></tr> <tr><td>EB0010581</td><td>392.1 ppm</td></tr> <tr><td>EB0010570</td><td>259.8 ppm</td></tr> <tr><td>EB0010285</td><td>208.0 ppm</td></tr> <tr><td>EB0010561</td><td>103.6 ppm</td></tr> <tr><td>EB0010681</td><td>52.12 ppm</td></tr> </table>	<b><u>RGM Serial No.</u></b>	<b><u>Concentration</u></b>	EB0010581	392.1 ppm	EB0010570	259.8 ppm	EB0010285	208.0 ppm	EB0010561	103.6 ppm	EB0010681	52.12 ppm	<table border="0"> <tr><td><b><u>RGM Serial No.</u></b></td><td><b><u>Concentration</u></b></td></tr> <tr><td>EB0010603</td><td>393.0 ppm</td></tr> <tr><td>EB0010559</td><td>258.2 ppm</td></tr> <tr><td>EB0010595</td><td>208.3 ppm</td></tr> <tr><td>EB0010562</td><td>104.2 ppm</td></tr> <tr><td>EB0010579</td><td>52.81 ppm</td></tr> </table>	<b><u>RGM Serial No.</u></b>	<b><u>Concentration</u></b>	EB0010603	393.0 ppm	EB0010559	258.2 ppm	EB0010595	208.3 ppm	EB0010562	104.2 ppm	EB0010579	52.81 ppm
<b><u>RGM Serial No.</u></b>	<b><u>Concentration</u></b>																								
EB0010581	392.1 ppm																								
EB0010570	259.8 ppm																								
EB0010285	208.0 ppm																								
EB0010561	103.6 ppm																								
EB0010681	52.12 ppm																								
<b><u>RGM Serial No.</u></b>	<b><u>Concentration</u></b>																								
EB0010603	393.0 ppm																								
EB0010559	258.2 ppm																								
EB0010595	208.3 ppm																								
EB0010562	104.2 ppm																								
EB0010579	52.81 ppm																								
<table border="0"> <tr><td><b><u>CRM Serial No.</u></b></td><td><b><u>Concentration</u></b></td></tr> <tr><td>CC434668</td><td>800.0 ppm</td></tr> <tr><td>CC234503</td><td>253.0 ppm</td></tr> </table>	<b><u>CRM Serial No.</u></b>	<b><u>Concentration</u></b>	CC434668	800.0 ppm	CC234503	253.0 ppm	<table border="0"> <tr><td><b><u>CRM Serial No.</u></b></td><td><b><u>Concentration</u></b></td></tr> <tr><td>0056649</td><td>390.1 ppm</td></tr> <tr><td>0056662</td><td>150.2 ppm</td></tr> </table>	<b><u>CRM Serial No.</u></b>	<b><u>Concentration</u></b>	0056649	390.1 ppm	0056662	150.2 ppm												
<b><u>CRM Serial No.</u></b>	<b><u>Concentration</u></b>																								
CC434668	800.0 ppm																								
CC234503	253.0 ppm																								
<b><u>CRM Serial No.</u></b>	<b><u>Concentration</u></b>																								
0056649	390.1 ppm																								
0056662	150.2 ppm																								

**Analytical Method:** NDIR

Digitally signed by Quality Control  
 Date: 2021.06.03 17:37:33 -05:00  
 Reason: Dry gas standard certification of analysis  
 Location: Airgas USA LLC (Lab)

Approved for Release: \_\_\_\_\_

*Rod Marsala*  
 \_\_\_\_\_  
 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

2

**PERMIT**  
**TYPE II**  
**SEAN R. STOFF**

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 12/2/2022

*Mike Peterson*

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

NUMBER 220266

*David J. Nielsen*

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

EXPIRES 12/2/2024

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 **STOFF, SEAN**  
 Permit No **220266**  
 Date Issued **12/2/2022** Date Expires **12/2/2024**

