



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 111769 | NAME OF AGENCY Columbia Police Department | DATE OF INSPECTION 03/22/2023 |
| LOCATION OF INSTRUMENT (STREET AND CITY) 600 E. Walnut St Columbia | | TIME OF INSPECTION 8:34 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 <u>Intoximeters</u> | LOT # <u>AG209701</u> EXP. DATE <u>04/07/2024</u> |
| <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 .100 | TEST 2 .100 | TEST 3 .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 | 1 | (0-.04) | 0 | (.05-.09) | 0 | (.10-.14) | 3 | (.15-.19) | 1 | (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).

Monthly Maintenance

INSPECTING OFFICER

| | |
|--|------------------------------------|
| SIGNATURE | PRINT NAME Mark D. Hoehne |
| TYPE II PERMIT NUMBER/EXPIRATION DATE 220158 06/14/2024 | TELEPHONE NUMBER (573) 874-7585 |

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: 111769
Version no: 532B

TEST RECORD 00347

Temp Date Time ^{a/} 210L

Air Blank:
03/22/23 20:34 .000
Calibration Check:
22 03/22/23 20:34 .100

Subject Name

Test #1

Subject I.D.

Hochne, Mark D. 2078
Operator Name, I.D.

Location

AS IV Serial no: 111769
Version no: 532B

TEST RECORD 00348

Temp Date Time ^{a/} 210L

Air Blank:
03/22/23 20:36 .000
Calibration Check:
22 03/22/23 20:36 .100

Subject Name

Test #2

Subject I.D.

Hochne, Mark D. 2078
Operator Name, I.D.

Location

AS IV Serial no: 111769
Version no: 532B

TEST RECORD 00349

Temp Date Time ^{a/} 210L

Air Blank:
03/22/23 20:38 .000
Calibration Check:
22 03/22/23 20:38 .100

Subject Name

Test #3

Subject I.D.

Hochne, Mark D. 2078
Operator Name, I.D.

Location

AS IV Serial no: 111769
Version no: 532B

TEST RECORD 00350

Temp Date Time ^{a/} 210L

VOID: RFI
12 03/22/23 20:40

Subject Name

RFI check

Subject I.D.

Hochne, Mark D. 2078
Operator Name, I.D.

Location

AS IV Serial no: 111769
Version no: 532B

TEST RECORD 00351

Temp Date Time ^{a/} 210L

Air Blank:
03/22/23 20:41 .000
Subject Test: Auto
23 03/22/23 20:41 .000

Subject Name

Self Test

Subject I.D.

Hochne, Mark D. 2078
Operator Name, I.D.

Location



Airgas USA LLC (L.A.S.)
 8600 Bernard Street
 St. Louis, Mo. 63103
 PH: (314) 638-8100
 FAX: (314) 638-7323

Certificate of Analysis

Customer Name
 Executive Supplier
 Intexneters, Inc.
 2061 Craig Road
 St. Louis, Mo 63148

Test Date: 11-Apr-2022

Lot # AG209701 Model 108

Exp Date: 7-Apr-2024 Cyl. Type: 108 Component: Ethanol Nitrogen Certified Concentration: 0.100 ± 2% EtAO (272 ppm)

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

| RGM Serial No. | Concentration | RGM Serial No. | Concentration |
|----------------|---------------|----------------|---------------|
| RB0010607 | 381.8 ppm | RB0010609 | 392.5 ppm |
| RB0010679 | 280.8 ppm | RB0010660 | 285.9 ppm |
| RB0010200 | 200.8 ppm | RB0010662 | 164.2 ppm |
| RB0010661 | 103.7 ppm | RB0010678 | 82.81 ppm |
| RB0010661 | 82.22 ppm | | |

| CRM Serial No. | Concentration | CRM Serial No. | Concentration |
|----------------|---------------|----------------|---------------|
| CC727401 | 300.0 ppm | CC727403 | 300.8 ppm |
| CC727402 | 283.0 ppm | CC727404 | 180.8 ppm |

Analytical Methods: NDIR

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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

MARK D HOEHNE

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 577.080 through 577.041, RSMo and 808.171 through 808.119 RSMo.

DATE 6/14/2022

NUMBER 220158

EXPIRES 6/14/2024

MSD 019-024 (6-04)

Mike Morrison

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Donald W. Richardson

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LSH-4 (05-10)

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

INSTRUMENT OPERATOR CARD

This record card is to be completed by operators and instructors in the field of breath alcohol analysis for the determination of the alcoholic content of expired air.

Operator: **MARK D HOEHNE**
 Permit No: **220158**
 Date Issued: **6/14/2022** Date Expires: **6/14/2024**

