



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
STATE PUBLIC HEALTH LABORATORY

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

**RECEIVED**

By Tracy Crews at 1:39 pm, Jul 21, 2023

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 <b>111776</b>	NAME OF AGENCY <b>Kansas City Police Department</b>	DATE OF INSPECTION <b>07/15/2023</b>
LOCATION OF INSTRUMENT (STREET AND CITY) <b>9701 MARION PARK DR, KANSAS CITY</b>		TIME OF INSPECTION <b>1943</b>

**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 # AG132803 EXP. DATE 11/24/2023

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 ←	<b>.079</b>	TEST 2 ←	<b>.079</b>	TEST 3 ←	<b>.079</b>
----------	-------------	----------	-------------	----------	-------------

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) <b>1</b>	(.05-.09)	(.10-.14) <b>1</b>	(.15-.19)	(OVER .19)
----------	------------------	-----------	--------------------	-----------	------------

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).

Instrument meets all DOHSS standards and guidelines.

**INSPECTING OFFICER**

SIGNATURE

PRINT NAME **Wade Robinson**

TYPE II PERMIT NUMBER/EXPIRATION DATE **210266 - 11/18/2023**

TELEPHONE NUMBER **( ) 816-482-8141**

**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: 111776  
Version no: 532B

TEST RECORD 00363

Temp Date Time <sup>s/</sup> 210L

Air Blank:  
07/15/23 19:43 .000  
Calibration Check:  
31 07/15/23 19:43 .079

Subject Name

TEST 1

Subject I.D.

Operator Name, I.D.

Robinson 210266

Location

AS IV Serial no: 111776  
Version no: 532B

TEST RECORD 00365

Temp Date Time <sup>s/</sup> 210L

Air Blank:  
07/15/23 19:46 .000  
Calibration Check:  
32 07/15/23 19:46 .079

Subject Name

Test 3

Subject I.D.

Operator Name, I.D.

Robinson 210266

Location

AS IV Serial no: 111776  
Version no: 532B

TEST RECORD 00364

Temp Date Time <sup>s/</sup> 210L

Air Blank:  
07/15/23 19:44 .000  
Calibration Check:  
31 07/15/23 19:44 .079

Subject Name

TEST 2

Subject I.D.

Operator Name, I.D.

Robinson 210266

Location

AS IV Serial no: 111776  
Version no: 532B

TEST RECORD 00366

Temp Date Time <sup>s/</sup> 210L

VOID: RFI  
12 07/15/23 19:47

Subject Name

Test - RFI

Subject I.D.

Operator Name, I.D.

Robinson 210266

Location

# AIRGAS

Airgas USA, LLC (LAA)  
3600 Brentwood  
St. Louis, Mo. 63108  
Ph: (314) 533-3100  
Fax: (314) 533-7328

## Certificate of Analysis

Test Date: 29-Nov-2021

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

Lot # AG132803 Model 108

Exp Date  
24-Nov-2023

Cyl. Type  
108

Component  
Ethanol  
Nitrogen  
Certified Concentration  
0.082 ± 0.002 g/m<sup>3</sup> (223 ppm)

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

RGM Serial No.	Concentration
EB0010501	399.1 ppm
EB0010570	258.8 ppm
EB0010205	208.0 ppm
EB0010961	103.4 ppm
EB0010981	52.12 ppm

RGM Serial No.	Concentration
EB0010603	393.0 ppm
EB0010589	258.2 ppm
EB0010595	208.3 ppm
EB0010502	104.2 ppm
EB0010579	52.81 ppm

CRM Serial No.	Concentration
CC434668	800.0 ppm
CC234503	253.0 ppm

CRM Serial No.	Concentration
0056649	390.4 ppm
0056562	150.2 ppm

Analytical Method: NDIR

Intoximeters, Inc. is an Equal Opportunity Employer  
Minority and Female Owned and Operated  
Certified by A2LA, LLC (EEO)  
EEO/AAE/DFW/ADA/504/10823/1242

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

# PERMIT TYPE II

## WADE ROBINSON

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, INTOXILYZER 3000**

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 308.111 through 308.319 RSMo.

DATE 11/19/2021  
NUMBER 210266  
EXPIRES 11/19/2023  
MO 600-0771 (6-11)

*Debra A. Duff*  
DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

*Donald A. Korman*  
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

STATE OF MISSOURI  
DEPARTMENT OF HEALTH AND SENIOR SERVICES  
BUREAU OF PUBLIC HEALTH, DIVISION  
INSTRUMENT OPERATOR CARD

The number of cards authorized to operate an individual instrument shall not exceed the number of instruments for which the instrument operator is certified. This permit is valid only for the instrument and operator listed on this card.

Operator: **ROBINSON, WADE**  
Permit No. **210266**  
Date Expires **11/19/2023**

