



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 111780	NAME OF AGENCY KANSAS CITY MISSOURI POLICE DEPT	DATE OF INSPECTION 06/04/2023
LOCATION OF INSTRUMENT (STREET AND CITY) 9701 MARION PARK DRIVE, KANSAS CITY, MO 64137		TIME OF INSPECTION 8:44 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**

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  .081	TEST 2  .080	TEST 3  .080
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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	5	(0-.04)	1	(.05-.09)	1	(.10-.14)	4	(.15-.19)	4	(OVER .19)	3
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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).

INSTRUMENT MEETS ALL DHSS STANDARDS AND GUIDELINES.

**INSPECTING OFFICER**

SIGNATURE #5844	PRINT NAME P.O. MATTHEW FRANCOIS #5844
TYPE II PERMIT NUMBER/EXPIRATION DATE 220275-12/21/2024	TELEPHONE NUMBER (816) 482-8143

**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: 111780  
Version no: 532B

TEST RECORD 00828

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

Air Blank:  
06/04/23 20:44 .000  
Calibration Check:  
37 06/04/23 20:44 .081

Subject Name

TEST

Subject I.D.

1

Operator Name, I.D.

FRANCOIS 220275

Location

9701 MARION PARK DR

AS IV Serial no: 111780  
Version no: 532B

TEST RECORD 00829

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

Air Blank:  
06/04/23 20:45 .000  
Calibration Check:  
36 06/04/23 20:45 .080

Subject Name

TEST

Subject I.D.

2

Operator Name, I.D.

FRANCOIS 220275

Location

9701 MARION PARK DR

AS IV Serial no: 111780  
Version no: 532B

TEST RECORD 00830

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

Air Blank:  
06/04/23 20:47 .000  
Calibration Check:  
35 06/04/23 20:47 .080

Subject Name

TEST

Subject I.D.

3

Operator Name, I.D.

FRANCOIS 220275

Location

9701 MARION PARK DR

AS IV Serial no: 111780  
Version no: 532B

TEST RECORD 00831

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

VOID: RFI  
12 06/04/23 20:49

Subject Name

TEST

Subject I.D.

4

Operator Name, I.D.

FRANCOIS 220275

Location

9701 MARION PARK DR



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



**PERMIT**  
TYPE II

**MATTHEW FRANCOIS**

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 8000**

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 12/21/2022

NUMBER 220275

EXPIRES 12/21/2024

MSD 980-0771 (6-18)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

*David I. Richards*

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-1 (RHS-10)

STATE OF MISSOURI  
DEPARTMENT OF HEALTH AND SENIOR SERVICES  
BREATH ALCOHOL PROGRAM  
**INSTRUMENT OPERATOR CARD**

The owner of an analyzer is authorized to operate an individual instrument only in Missouri. The user must be a Missouri resident and must be at least 18 years of age. The owner of an analyzer is authorized to operate an individual instrument only in Missouri. The user must be a Missouri resident and must be at least 18 years of age.

Operator: **FRANCOIS, MATTHEW**  
Permit No: **220275**  
Date Issued: **12/21/2022**  
Date Expires: **12/21/2024**



Certificate of Analysis

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

Test Date: 29-Nov-2021

Lot # AG132803 Model 108

Exp Date  
24-Nov-2023

Cyl. Type  
108

Component  
Ethanol  
Nitrogen

Certified Concentration  
0.062 ± 0.002 BFAc (223 ppm)

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

RGM Serial No.	Concentration	RGM Serial No.	Concentration
EB0010581	392.1 ppm	EB0010503	393.0 ppm
EB0010570	259.8 ppm	EB0010559	288.2 ppm
EB0010295	208.0 ppm	EB0010595	208.3 ppm
EB0010581	103.6 ppm	EB0010562	104.2 ppm
EB0010681	52.12 ppm	EB0010579	52.81 ppm

  

CRM Serial No.	Concentration	CRM Serial No.	Concentration
CC434868	800.0 ppm	0038649	390.1 ppm
CC234903	253.0 ppm	0038652	150.2 ppm

Analytical Method: NDIR

Quality Control  
Laboratory USA, LLC (LNU)  
One, 1362821 1542

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