



ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

RECEIVED

By Tracy Crews at 2:08 pm, Feb 05, 2024

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 100289	NAME OF AGENCY Kansas City Police Department	DATE OF INSPECTION 01-27-24
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LOCATION OF INSTRUMENT (STREET AND CITY) 9701 MARION PARK DR, KANSAS CITY	TIME OF INSPECTION 2245
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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 # AG324501 EXP. DATE 09-02-2025

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	.083	TEST 2	.083	TEST 3	.083
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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	0	(0-.04)	0	(.05-.09)	0	(.10-.14)	2	(.15-.19)	0	(OVER .19)	1
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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 DOHSS standards and guidelines.

INSPECTING OFFICER

SIGNATURE
P. O. Infranca

PRINT NAME
P.O. Infranca 5670

TYPE II PERMIT NUMBER/EXPIRATION DATE
230118 06/07/2025

TELEPHONE NUMBER
() 816-382-5897

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 100289
Version no: 23

TEST RECD 21051 9/

Temp Date Time 210L

Air Blank: 01/27/24 22:39 .000
Calibration 21 01/27/24 22:39 .083

Subject Name

Test #1

Subject I.D.

Operator Nam I.D.

Inference 230118

Location KCPD Traffic

AS IV Serial 100289
Version no: 22

TEST RECD 21052 9/

Temp Date Time 210L

Air Blank: 01/27/24 22:41 .000
Calibration 22 01/27/24 22:41 .083

Subject Name

Test #2

Subject I.D.

Operator Nam I.D.

Inference 230118

Location KCPD Traffic

AS IV Serial 100289
Version no: 23

TEST RECD 21053 9/

Temp Date Time 210L

Air Blank: 01/27/24 22:43 .000
Calibration 23 01/27/24 22:43 .083

Subject Name

Test #3

Subject I.D.

Operator Nam I.D.

Inference 230118

Location KCPD Traffic

AS IV Serial 100289
Version no: 23

TEST RECD 21054 9/

Temp Date Time 210L

VOID: RPI
12 01/27/24 22:45

Subject Name

RPI

Subject I.D.

Operator Nam I.D.

Inference 230118

Location KCPD Traffic



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



Airgas

Certificate of Analysis

Airgas USA, LLC (LAE)
3500 Bernard Street
St. Louis, Mo 63103
Ph: (314) 553-3100
Fax: (314) 533-7329

Test Date: 5-Sep-2023

JORDAN INFRANCA

PERMIT
TYPE II

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 6/7/2023

NUMBER 230118

EXPIRES 6/7/2025

MO 968-9771 (6-16)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Paul J. Robinson

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAD-4 (Rev. 10)

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

Lot # AG324501 Model 108

Exp Date 2-Sep-2025 Cyl. Type 108 Component Ethanol Nitrogen Certified Concentration 0.082 ± 0.002 BAC (223 ppm)

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

RGM Serial No.	Concentration	RGM Serial No.	Concentration
EB0010581	391.8 ppm	EB0010603	392.5 ppm
EB0010570	259.8 ppm	EB0010559	258.9 ppm
EB0010285	209.0 ppm	EB0010582	104.2 ppm
EB0010561	103.7 ppm	EB0010579	52.94 ppm
EB0010681	52.22 ppm		

CRM Serial No.	Concentration	CRM Serial No.	Concentration
CC727481	800.0 ppm	CC727493	390.0 ppm
CC727496	253.0 ppm	CC727498	150.0 ppm

Analytical Method: NDIR



Operator: Infranca, Jordan
Permit No: 230118
Date Issued: 6/7/2023
Date Expires: 6/7/2025

Approved for Release:

Yusef Woods
Yusef Woods

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