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By Tracy Crews at 2:51 pm, Mar 29, 2024



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 111633	NAME OF AGENCY Kansas City Police Department	DATE OF INSPECTION 03/20/2024
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LOCATION OF INSTRUMENT (STREET AND CITY) 9701 MARION PARK DR, KANSAS CITY	TIME OF INSPECTION 2345
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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 ➡ .081	TEST 2 ➡ .081	TEST 3 ➡ .081
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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)	0	(.15-.19)	0	(OVER .19)	0
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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 	PRINT NAME Wade Robinson
TYPE II PERMIT NUMBER/EXPIRATION DATE 230228 - 10/23/2025	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: 111633
Version no: 532B

TEST RECORD 00651

Temp Date Time ^{a/} 210L

Air Blank:
03/20/24 23:45 .000
Calibration Check:
21 03/20/24 23:45 .001

Subject Name

TEST 1

Subject I.D.

Operator Name, I.D.

Robinson 230288

Location

AS IV Serial no: 111633
Version no: 532B

TEST RECORD 00653

Temp Date Time ^{a/} 210L

Air Blank:
03/20/24 23:48 .000
Calibration Check:
23 03/20/24 23:48 .001

Subject Name

TEST 3

Subject I.D.

Operator Name, I.D.

Robinson 230288

Location

AS IV Serial no: 111633
Version no: 532B

TEST RECORD 00652

Temp Date Time ^{a/} 210L

Air Blank:
03/20/24 23:46 .000
Calibration Check:
22 03/20/24 23:46 .001

Subject Name

TEST 2

Subject I.D.

Operator Name, I.D.

Robinson 230288

Location

AS IV Serial no: 111633
Version no: 532B

TEST RECORD 00654

Temp Date Time ^{a/} 210L

VOID: RFI
12 03/20/24 23:49

Subject Name

RFI TEST

Subject I.D.

Operator Name, I.D.

Location

Robinson 230288

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 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 10/23/2023
NUMBER 23022R
EXPIRES 10/23/2025
MO 580-5771 (8-10)

Miles Mason
DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Douglas J. Robinson
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LUB-4 (8/1-10)

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

This permit authorizes the instrument operator to operate an alcohol breathalyzer instrument for the determination of the alcoholic content in breath form of expired air in Missouri.

Operator: **ROBINSON, WADE**
Data Issued: **10/23/2023** Date Expires: **10/23/2025**



Certificate of Analysis

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

Airgas USA LLC (LAB)
3500 Bernard Street
St. Louis, Mo. 63103
Ph: (314) 533-3700
Fax: (314) 533-7328

Test Date: 5-Sep-2023

Lot # AG324501 Model 108

Exp. Date
2-Sep-2025

Cyl. Type
106

Component
Ethanol
Nitrogen

Certified Concentration
0.082 ± 0.002 BrAC (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	EB0010562	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

Quality Assurance Control
Laboratory of Airgas USA LLC (Lab)
Date: 09/27/2023 11:21

Yusef Woods

Approved for Release: Yusef Woods

ISO 17025:2017 A2LA accredited. Certificate Number 3082.06
ISO 17034:2016 A2LA accredited. Certificate Number 3082.07