



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

-2000								
Complete this report in duplicate a Send copy to Department of Healt		_				d whene	ver instrume	nt is repaired.
ALCO SENSOR IV SN 094804		PRINTER SN 097.3584.33	34			DATE OF 12/16	INSPECTION /2019	
LOCATION OF INSTRUMENT (STREET AN 9701 Marion Park Dr, Kansas						TIME OF 11:00	INSPECTION pm	
CHECKLIST: Place a mark in the					ng within establi	shed lim	its. (Write in	observed val-
ues where determined.) Unmarked items must be corrected before using instrument.								
☑ DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)								
PRINTER WORKING PROPERLY								
TIME AND DATE DISPLAYING	G PROPER	RLY						
BREATH ALCOHOL ACCURACY	STANDAF	RDS						
☐ SIMULATOR SOLUTION ☐ COMPRESSED ETHANOL-GAS MIXTURE								
STANDARD SUPPLIER INTOXIMETERS			LOT # AG90	LOT # AG905605 EXP. DATE 02/25/2021				
SIMULATOR TEMPERATURE	(34°C ± 0	.2°C)	SIMULATOR SN	I	SIMUL	_ATOR E	EXP DATE _	
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 🕶 .079		TEST 2 082			TEST 3 .080			
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 (004)		(.0509)	(.1014)		(.1519)		OVER .19	·)
List any new parts and describe a established limits (use other side if TESTED AND CERTIFIED	-	on or modification t		restore		o opera	J	
INSPECTING OFFICER								
SIGNATURE	4577		180275/	9-2530	PRINT NAME Jeremy White) , .		
TYPE II PERMIT NUMBER/EXPIRATION DATE 280275 09/05/2020					TELEPHONE NUMBER (816) 482-814			
Return completed report to the:	2875 Jan	cohol Program, MC nes Boulevard uff, MO 63901	Department of I	Health ar	nd Senior Servic	es, Sout	heast Distric	t Office



STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES BREATH ALCOHOL PROGRAM







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 30s.111 through 30s.119 RSMo.

DATE ___9/5/2018.

12 25

DIRECTOR OF STATE PUBLIC HEALTH LABORATOR

EXPIRES 9/5/2020 NUMBER 280275

(d1-8) 1750-081 GM



Airgas USA LLC (LAB)

3500 Bernard Street St. Louis, Mo. 63103 Fax: (314) 533-7328 Ph: (314) 533-3100

Certiflicate of Analysis

Customer Name Exclusive Supplier

Test Date: 26-Feb-2019

Lot # AG905605 Model 108cacd

oximeters, Inc.	B1 Craig Road	Louis, Mo 63146
Infoxin	2081	St. Lo

Certified Concentration 0.082 ± 0.002 BrAC (223 ppm) Balance

Component Ethanol Nitrogen

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

Concentration 393.0 ppm 258.2 ppm 208.3 ppm 104.2 ppm 52.81 ppm	Concentration 390.1 ppm 150.2 ppm
RGM Serial No. EB0070663 EB0070559 EB0070555 EB0070562 EB0070579	<u>CRW Serial No.</u> 0056649 0056662
Concentration 392.1 ppm 259.8 ppm 208.0 ppm 103.6 ppm 52.12 ppm	Concentration 800.0 ppm 253.0 ppm
<u>RGM Serial No.</u> EB0010581 EB0010570 EB0010285 EB0010561 EB0010681	CRM Serial No. CC434668 CC234503

NDIR Analytical Wethod: Digitally signed by Quality Control
Digitally signed by Quality Control
Reason: Dry gas standard certification of analysis
Location: Alrgas USA LLC (Lab)

Approved for Release:

The nemed cardholder is authorized to operate an evidential breath elocitol of sistement for the determination of the elocholis content in breath form of expired in sistems.

Operator WHITE, JEREMY Permit No 280275 Dato Issued 9/5/2018 Date Expires 9/5/2020

INSTRUMENT OPERATOR CARD STATE OF MISSOUR! DEPARTMENT OF HEALTH AND SENIOR SERVICES BREATH ALGOHOL PROGRAM

ISO 17025:2005 A2LA accredited. Certificate Number 3082.06 ISO 17034:2016 A2LA accredited. Certificate Number 3082.07

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AS IV Serial no: 094804 Version no: 532B

TEST RECORD 00540

Temp Date Time 210I

Air Blank: 01/16/20 23:01 .000 Calibration Check: 21 81/16/20 23:01 .079

Subject Name

Test #

Operator Name: I.D. 200275 Location 09/05/2020 AS IV Serial no: 094804 Version no: 532B

TEST RECORD 00541

Temp Date Time 210L Air Blank:

01/16/20 23:04 .000 Calibration Check: 21 01/16/20 23:04 .082

Subject Name

Test#2

Operator Name: I.D.
White 280275
Location 09/05/2020

AS IV Serial no: 094804 Version no: 5328

TEST REDUED 08542

Temp Date Time 218L

Air Blank; 01/16/20 23:06 .900 Calibration Check; 22 01/16/20 23:06 .090

Subject Name TeSt #3

Subject I.D.

Operator Name, I.D.

White of

09/05/2020

AS IV Serial no: 094804 Version no: 532B

TEST RECORD 00543

Temp Date Time 218L

VOID: **RFI** -12-01/16<mark>/20-23:1</mark>0

Subject Hame

RFI Test

Operator Name, I.D.
White 280275
Location 09/05/2020