



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 097443	PRINTER SN 096.3580.953	DATE OF INSPECTION 08/22/2020
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LOCATION OF INSTRUMENT (STREET AND CITY) SCCPD / 101 Sheriff Dierker Court, O'Fallon, Missouri 63366	TIME OF INSPECTION 8:55 am
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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 # AG824102 EXP. DATE 08/29/2020

SIMULATOR TEMPERATURE (34°C ± 0.2°C) _____ SIMULATOR SN _____ SIMULATOR 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 ➔ .080

TEST 2 ➔ .080

TEST 3 ➔ .079

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).

INSPECTING OFFICER

SIGNATURE

PRINT NAME
Scott Ronald

TYPE II PERMIT NUMBER/EXPIRATION DATE
200202 / July 8, 2022

TELEPHONE NUMBER
(636) 949-3000

Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office
2875 James Boulevard
Poplar Bluff, MO 63901

Airgas

Airgas USA LLC (LAW)

10000 West Street

St. Louis, Mo. 63103

Phone: 314-533-3100

Fax: 314-634-7328

Certificate of Analysis

Customer Name
Exclusive Supplier
Intoximeters, Inc.
2061 Craig Road
St. Louis, Mo 63146

Date: 28-Aug-2018

Lot# AG824102 Model 106-5106

Exp. Date	Cyl. Type	Component	Concentration
29-Aug-2020	106	Ethanol	218 ppm BrAC (218 ppm)
		Not Open	

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

Serial No.	Concentration	Serial No.	Concentration
EB0010531	392.1 ppm	EB0010533	393.0 ppm
EB0010570	259.8 ppm	EB0010535	258.2 ppm
EB0010235	208.0 ppm	EB0010537	208.3 ppm
EB0010581	103.5 ppm	EB0010532	104.2 ppm
EB0010583	52.12 ppm	EB0010534	52.91 ppm

Analytical Method: NDR

Digitally signed by Quality Control
Date: 2018.08.28 14:38:28 -0500
Reason: Dry gas standard certification of analysis
Location: Airgas USA LLC (LAW)

Approved for Release: _____

Rod Marsala
Rod Marsala

ISO 17025:2005 A2LA accredited. Certificate Number 3012.06



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

2

**PERMIT
 TYPE II
 SCOTT RONALD**

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

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 7/8/2020

NUMBER 200202

EXPIRES 7/8/2022

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

LAB-4 (R6-10)



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

INSTRUMENT OPERATOR CARD

The named cardholder is authorized to operate an evidential breath alcohol instrument for the determination of the alcoholic content in breath form of expired air in Missouri.

Operator RONALD, SCOTT
 Permit No 200202
 Date Issued 7/8/2020 Date Expires 7/8/2022



AS IV Serial no: 097443
Version no: 532B

TEST RECORD 01052

Temp Date Time 210L
s/

Air Blank:
08/22/20 08:55 .000
Calibration Check:
22 08/22/20 08:55 .080

Subject Name

TEST

Subject I.D.

1

Operator Name, I.D.

SMPDCR 200202

Location

SCCPD

AS IV Serial no: 097443
Version no: 532B

TEST RECORD 01053

Temp Date Time 210L
s/

Air Blank:
08/22/20 08:57 .000
Calibration Check:
23 08/22/20 08:57 .080

Subject Name

TEST

Subject I.D.

2

Operator Name, I.D.

SMPDCR 200202

Location

SCCPD

AS IV Serial no: 097443
Version no: 532B

TEST RECORD 01054

Temp Date Time 210L
s/

Air Blank:
08/22/20 09:00 .000
Calibration Check:
24 08/22/20 09:00 .079

Subject Name

TEST

Subject I.D.

3

Operator Name, I.D.

SMPDCR 200202

Location

SCCPD

AS IV Serial no: 097443
Version no: 532B

TEST RECORD 01055

Temp Date Time 210L
s/

VOID: RFI
12 08/22/20 09:02

Subject Name

TEST VOID

Subject I.D.

RFI

Operator Name, I.D.

SMPDCR 200202

Location

SCCPD

AS IV Serial no: 097443
Version no: 532B

TEST RECORD 01056

Temp Date Time 210L
s/

Air Blank:
08/22/20 09:03 .000
Subject Test: Auto
25 08/22/20 09:03 .000

Subject Name

SELF

Subject I.D.

TEST

Operator Name, I.D.

SMPDCR 200202

Location

SCCPD