



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
 STATE PUBLIC HEALTH LABORATORY
ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

RECEIVED
 By Tracy Crews at 7:48 am, Oct 16, 2020

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 102456	NAME OF AGENCY Columbia Police Department	DATE OF INSPECTION 10/14/2020
LOCATION OF INSTRUMENT (STREET AND CITY) 600 East Walnut Columbia		TIME OF INSPECTION 7:24 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 # AG020401 EXP. DATE 07/22/2022

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 ← **.099**

TEST 2 ← **.099**

TEST 3 ← **.099**

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 **1** | (0-.04) **0** | (.05-.09) **0** | (.10-.14) **2** | (.15-.19) **0** | (OVER .19) **2**

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).

Monthly Maintenance

INSPECTING OFFICER

SIGNATURE ▶ <i>Mark D. Hoehne 2028</i>	PRINT NAME Mark D. Hoehne
TYPE II PERMIT NUMBER/EXPIRATION DATE 200187 06/15/2022	TELEPHONE NUMBER (573-874-7585)

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: 102456
Version no: 532B

TEST RECORD 00979

Temp Date Time ^{s/} 210L

Air Blank:
10/14/20 19:28 .000
Calibration Check:
21 10/14/20 19:28 .099

Subject Name

Test # 1

Subject I.D.

Hoehne, Mark D. 2078
Operator Name, I.D.

Location

AS IV Serial no: 102456
Version no: 532B

TEST RECORD 00980

Temp Date Time ^{s/} 210L

Air Blank:
10/14/20 19:30 .000
Calibration Check:
21 10/14/20 19:30 .099

Subject Name

Test # 2

Subject I.D.

Hoehne, Mark D. 2078
Operator Name, I.D.

Location

AS IV Serial no: 102456
Version no: 532B

TEST RECORD 00981

Temp Date Time ^{s/} 210L

Air Blank:
10/14/20 19:32 .000
Calibration Check:
22 10/14/20 19:32 .099

Subject Name

Test # 3

Subject I.D.

Hoehne, Mark D. 2078
Operator Name, I.D.

Location

AS IV Serial no: 102456
Version no: 532B

TEST RECORD 00982

Temp Date Time ^{s/} 210L

UOJD: RFI
12 10/14/20 19:33

Subject Name

RFI Check

Subject I.D.

Hoehne, Mark D. 2078
Operator Name, I.D.

Location

AS IV Serial no: 102456
Version no: 532B

TEST RECORD 00983

Temp Date Time ^{s/} 210L

Air Blank:
10/14/20 19:34 .000
Subject Test: Auto
23 10/14/20 19:34 .000

Subject Name

Self Test

Subject I.D.

Hoehne, Mark D. 2078
Operator Name, I.D.

Location



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

Certificate of Analysis

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

Test Date: 22-Jul-2020

Lot # AG020401 **Model** 108cacc

<u>Exp. Date</u>	<u>Cyl. Type</u>	<u>Component</u>	<u>Certified Concentration</u>
22-Jul-2022	108	Ethanol Nitrogen	0.100 ± 2% BrAC (272 ppm) Balance

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

<u>RGM Serial No.</u>	<u>Concentration</u>	<u>RGM Serial No.</u>	<u>Concentration</u>
EB0010581	392.1 ppm	EB0010603	393.0 ppm
EB0010570	259.8 ppm	EB0010559	258.2 ppm
EB0010285	208.0 ppm	EB0010595	208.3 ppm
EB0010561	103.6 ppm	EB0010562	104.2 ppm
EB0010681	52.12 ppm	EB0010579	52.81 ppm

<u>CRM Serial No.</u>	<u>Concentration</u>	<u>CRM Serial No.</u>	<u>Concentration</u>
CC434668	800.0 ppm	0056649	390.1 ppm
CC234503	253.0 ppm	0056662	150.2 ppm

Analytical Method: NDIR

Digitally signed by Quality Control
Date: 2020.07.22 18:29:45 -05:00
Reason: Dry gas standard certification of analysis
Location: Airgas USA LLC (Lab)

Approved for Release:

Rod Marsala

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

PERMIT
TYPE II

MARK D HOEHNE

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, INTOX DMT

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 6/15/2020

NUMBER 200187

EXPIRES 6/15/2022

MO SPD 0771 (6-19)



DIRECTOR OF STATE PUBLIC HEALTH LABORATORY



DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (16-10)



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 HOEHNE, MARK

Permit No 200187

Date Issued 6/15/2020 Date Expires 6/15/2022

