



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 111320	NAME OF AGENCY ST. LOUIS COUNTY POLICE DEPARTMENT	DATE OF INSPECTION 12/01/2020
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LOCATION OF INSTRUMENT (STREET AND CITY) 14301 SOUTH OUTER 40 RD, CHESTERFIELD	TIME OF INSPECTION 8:30 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 # AG3015503 EXP. DATE 06/03/2022
- 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 • 0.096	TEST 2 • 0.097	TEST 3 • 0.097
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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-.04)	(.05-.09)	(.10-.14)	(.15-.19)	(OVER .19)
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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 <i>P.O. Maloney 4427</i>	PRINT NAME PO M. MALONEY, DSN 4427
TYPE II PERMIT NUMBER/EXPIRATION DATE 290063 / 03-08-2021	TELEPHONE NUMBER (636) 529-8210

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: 111320
Version no: 532B

TEST RECORD 00400

Temp	Date	Time	^{g/} 210L
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Air Blank:
12/01/20 08:30 .000
Calibration Check:
24 12/01/20 08:30 .096

Subject Name

Test # 1

Subject I.D.

N/A

Operator Name, I.D.

Maloney 4427

Location

14301 South Outer

40Rd

AS IV Serial no: 111320
Version no: 532B

TEST RECORD 00401

Temp	Date	Time	^{g/} 210L
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Air Blank:
12/01/20 08:33 .000
Calibration Check:
25 12/01/20 08:33 .097

Subject Name

Test # 2

Subject I.D.

N/A

Operator Name, I.D.

Maloney 4427

Location

14301 South Outer 40Rd

AS IV Serial no: 111320
Version no: 532B

TEST RECORD 00402

Temp	Date	Time	^{g/} 210L
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Air Blank:
12/01/20 08:36 .000
Calibration Check:
25 12/01/20 08:36 .097

Subject Name

Test # 3

Subject I.D.

N/A

Operator Name, I.D.

Maloney 4427

Location

14301 South Outer 40Rd

AS IV Serial no: 111320
Version no: 532B

TEST RECORD 00403

Temp	Date	Time	^{g/} 210L
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VOID: RFI
12 12/01/20 08:37

Subject Name

RFI

Subject I.D.

N/A

Operator Name, I.D.

Maloney 4427

Location

14301 South Outer 40Rd



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: 8-Jun-2020

Lot # AG015503 Model 108cacc

Exp. Date 3-Jun-2022	Cyl. Type 108	Component Ethanol Nitrogen	Certified Concentration 0.100 ± 2% BrAC (272 ppm) Balance
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Certification Traceable to N.I.S.T. RGM and to CRM Ethanol Standards:

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Analytical Method: NDIR

Digitally signed by Quality Control
 Date: 2020.06.10 14:11:39 -05:00
 Reason: Dry gas standard certification of analysis
 Location: Airgas USA LLC (Lab)

Approved for Release: _____

Rod Marsala
 Rod Marsala

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



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



**PERMIT
 TYPE II**

MICHAEL P MALONEY

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 606.111 through 606.119 RSMo.

DATE 3/8/2019

NUMBER 290063

EXPIRES 3/8/2021

MO 690-077 (9-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4.076-10