



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

RECEIVED
By Tracy Crews at 9:58 am, Jan 17, 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 111326	PRINTER SN 099.3586.615	DATE OF INSPECTION 01/16/2020
LOCATION OF INSTRUMENT (STREET AND CITY) Richland PD 201 South Chestnut Street Richland, Missouri 65556		TIME OF INSPECTION 4:37 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

<input type="checkbox"/> SIMULATOR SOLUTION	<input checked="" type="checkbox"/> COMPRESSED ETHANOL-GAS MIXTURE
<input checked="" type="checkbox"/> STANDARD SUPPLIER <u>Intoximeters</u>	LOT # <u>AG912204</u> EXP. DATE <u>05/02/2021</u>
<input type="checkbox"/> 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 ← .104	TEST 2 ← .103	TEST 3 ← .103
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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 is operating within established limits.

INSPECTING OFFICER

SIGNATURE <i>David Moser</i>	PRINT NAME David Moser
TYPE II PERMIT NUMBER/EXPIRATION DATE 280293 10/4/20	TELEPHONE NUMBER (573) 765-4144

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

JAN/16/2020 THU 06:52 PM Richland PD FAX No. 573 765 3093 P. 002

AS IV Serial no: 111326
Version no: 532B

TEST RECORD 00574

Temp Date Time ^{s/} 210L

Air Blank:
01/16/20 16:37 .000
Calibration Check:
21 01/16/20 16:37 .000

Subject Name

BLAWIK TEST

Subject I.D.

Operator Name, I.D.

DMOSER 280293

Location

RICHLAND PD

AS IV Serial no: 111326
Version no: 532B

TEST RECORD 00575

Temp Date Time ^{s/} 210L

Air Blank:
01/16/20 16:39 .000
Subject Test: Man
21 01/16/20 16:39 .104

Subject Name

TEST 1

Subject I.D.

Operator Name, I.D.

DMOSER 280293

Location

RICHLAND PD

AS IV Serial no: 111326
Version no: 532B

TEST RECORD 00576

Temp Date Time ^{s/} 210L

Air Blank:
01/16/20 16:40 .000
Subject Test: Man
21 01/16/20 16:40 .103

Subject Name

TEST 2

Subject I.D.

Operator Name, I.D.

DMOSER 280293

Location

RICHLAND PD

AS IV Serial no: 111326
Version no: 532B

TEST RECORD 00577

Temp Date Time ^{s/} 210L

Air Blank:
01/16/20 16:41 .000
Subject Test: Man
22 01/16/20 16:41 .103

Subject Name

TOT 3

Subject I.D.

Operator Name, I.D.

DMOSER 280293

Location

AS IV Serial no: 111326
Version no: 532B

TEST RECORD 00579

Temp Date Time ^{s/} 210L

VOID: RFI
12 01/16/20 16:44

Subject Name

TEST RFI

Subject I.D.

Operator Name, I.D.

DMOSER 280293

Location

RICHLAND PD



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: 6-May-2019

Lot # AG912204 Model 108cacd

Exp. Date 2-May-2021	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:

<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: 2019.05.17 12:35:24 -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



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



PERMIT
TYPE II
DAVID L. MOSER

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 10/4/2018

NUMBER 280293

EXPIRES 10/4/2020

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MQ 590-0771 (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 MOSER, DAVID
 Permit No 280293
 Date Issued 10/4/2018 Date Expires 10/4/2020

