



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
STATE PUBLIC HEALTH LABORATORY  
**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 111326	PRINTER SN 099.3586.615	DATE OF INSPECTION 09/08/2020
LOCATION OF INSTRUMENT (STREET AND CITY) Richland PD 201 South Chestnut Street Richland Missouri 65556		TIME OF INSPECTION 12:36 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 # AG912204 EXP. DATE 05/02/2021
- 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 ← .100	TEST 2 ← 0.101	TEST 3 ← .099
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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) 480-4144

**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

AS IV Serial no: 111326  
Version no: 532B

TEST RECORD 00675

Temp Date Time <sup>a/</sup> 210L

Air Blank:  
09/08/20 12:36 .000  
Subject Test: Man  
22 09/08/20 12:36 .000

Subject Name  
BLANK TEST  
Subject I.D.

Operator Name, I.D.  
DAVID MDSER 280293  
Location  
RICHLAND PD

AS IV Serial no: 111326  
Version no: 532B

TEST RECORD 00677

Temp Date Time <sup>a/</sup> 210L

Air Blank:  
09/08/20 12:40 .000  
Subject Test: Man  
23 09/08/20 12:40 .100

Subject Name  
TEST 1  
Subject I.D.

Operator Name, I.D.  
DAVID MDSER 280293  
Location  
RICHLAND PD

AS IV Serial no: 111326  
Version no: 532B

TEST RECORD 00678

Temp Date Time <sup>a/</sup> 210L

Air Blank:  
09/08/20 12:41 .000  
Subject Test: Man  
23 09/08/20 12:41 .101

Subject Name  
TEST 2  
Subject I.D.

Operator Name, I.D.  
DAVID MDSER 280293  
Location  
RICHLAND PD

AS IV Serial no: 111326  
Version no: 532B

TEST RECORD 00679

Temp Date Time <sup>a/</sup> 210L

Air Blank:  
09/08/20 12:43 .000  
Subject Test: Man  
23 09/08/20 12:43 .099

Subject Name  
TEST 3  
Subject I.D.

Operator Name, I.D.  
DAVID MDSER 280293  
Location  
RICHLAND PD

AS IV Serial no: 111326  
Version no: 532B

TEST RECORD 00680

Temp Date Time <sup>a/</sup> 210L

VOID: RFI  
12 09/08/20 12:44

Subject Name  
RFI TEST  
Subject I.D.

Operator Name, I.D.  
DAVID MDSER 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 108cacc**

<u>Exp. Date</u>	<u>Cyl. Type</u>	<u>Component</u>	<u>Certified Concentration</u>
2-May-2021	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: 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*  
 \_\_\_\_\_  
 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

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

NUMBER 280293

EXPIRES 10/4/2020

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (5-10)

LAB-4 (R5-10)

 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

