



**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 111332	PRINTER SN 099.3586.619	DATE OF INSPECTION 12/01/2020
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LOCATION OF INSTRUMENT (STREET AND CITY) 517 ONEIDA ST. SENECA, MISSOURI	TIME OF INSPECTION 12:44 pm
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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 Airgas LOT # AG014303 EXP. DATE 05/22/2022
- 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  .097	TEST 2  .097	TEST 3  .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	(0-.04)	0	(.05-.09)	0	(.10-.14)	0	(.15-.19)	1	(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).

*Replaced 9v Battery*

**INSPECTING OFFICER**

SIGNATURE 	PRINT NAME Joshua Fort
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TYPE II PERMIT NUMBER/EXPIRATION DATE 200125 03/09/2022	TELEPHONE NUMBER (417) 451-8000
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**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: 111332  
Version no: 532B

TEST RECORD 00867

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

Air Blank:  
12/01/20 12:44 .000  
Calibration Check:  
22 12/01/20 12:44 .097

Subject Name

Test

Subject I.D.

#1

Operator Name, I.D.

Joshua Fort 200125

Location Exp. 3/9/22

303 E. 3<sup>rd</sup> St

Joplin, Mo 64801

AS IV Serial no: 111332  
Version no: 532B

TEST RECORD 00868

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

Air Blank:  
12/01/20 12:46 .000  
Calibration Check:  
22 12/01/20 12:46 .097

Subject Name

Test

Subject I.D.

#2

Operator Name, I.D.

Joshua Fort 200125

Location Exp. 3/9/22

303 E. 3<sup>rd</sup> St

Joplin, Mo 64801

AS IV Serial no: 111332  
Version no: 532B

TEST RECORD 00869

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

Air Blank:  
12/01/20 12:47 .000  
Calibration Check:  
22 12/01/20 12:47 .097

Subject Name

Test

Subject I.D.

#3

Operator Name, I.D.

Joshua Fort 200125

Location Exp. 3/9/22

303 E. 3<sup>rd</sup> St

Joplin, Mo 64801

AS IV Serial no: 111332  
Version no: 532B

TEST RECORD 00870

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

VOID: RFI  
12 12/01/20 12:49

Subject Name

Test

Subject I.D.

RFI

Operator Name, I.D.

Joshua Fort 200125

Location Exp. 3/9/22

303 E. 3<sup>rd</sup> St

Joplin, Mo 64801

AS IV Serial no: 111332  
Version no: 532B

TEST RECORD 00871

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

Air Blank:  
12/01/20 12:50 .000  
Subject Test: Auto  
23 12/01/20 12:50 .000

Subject Name

Test

Subject I.D.

Blank

Operator Name, I.D.

Joshua Fort 200125

Location Exp. 3/9/22

303 E. 3<sup>rd</sup> St

Joplin, Mo 64801



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:** 26-May-2020

**Lot # AG014303 Model 55cacc**

**Exp. Date**

22-May-2022

**Cyl. Type**

55

**Component**

Ethanol

Nitrogen

**Certified Concentration**

0.100 ± 2% BrAC (272 ppm)

Balance

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

**RGM Serial No.**

EB0010581

EB0010570

EB0010285

EB0010561

EB0010681

**Concentration**

392.1 ppm

259.8 ppm

208.0 ppm

103.6 ppm

52.12 ppm

**RGM Serial No.**

EB0010603

EB0010559

EB0010595

EB0010562

EB0010579

**Concentration**

393.0 ppm

258.2 ppm

208.3 ppm

104.2 ppm

52.81 ppm

**CRM Serial No.**

CC434668

CC234503

**Concentration**

800.0 ppm

253.0 ppm

**CRM Serial No.**

0056649

0056662

**Concentration**

390.1 ppm

150.2 ppm

**Analytical Method:**

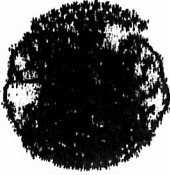
NDIR

Digitally signed by Quality Control  
Date: 2020.05.28 14:56:35 -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**  
**JOSHUA FORT**

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 508.111 through 508.119 RSMo.

DATE 3/9/2020

NUMBER 200125

EXPIRES 3/9/2022

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (RS-10)

MO288-0771 (8-10)

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

**INSTRUMENT OPERATOR CARD**

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

Operator **FORT, JOSHUA**  
 Permit No **200125**  
 Date Issued **3/9/2020**      Date Expires **3/9/2022**