



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

Complete this report in c Send copy to Departmen					whenever instrument is repaired.	
ALCO SENSOR IV SN 111670		NAME OF AGENCY Vernon county Sheriff Office		1	ATE OF INSPECTION 10/22/2020	
LOCATION OF INSTRUMENT (STREET AND CITY) 2040 E. Hunter Nevada MO.		vernon county offerin office		TI	IME OF INSPECTION	
CHECKLIST: Place a ma where determined.) Unm				within established	I limits. (Write in observed values	
✓ DIGITAL READOUT	(ALL ELEMENTS	OPERATIONAL)				
▼ TEMPERATURE OF	ALCO SENSOR (10°C - 40°C)				
PRINTER WORKING	G PROPERLY					
TIME AND DATE DI	SPLAYING PROPE	RLY				
BREATH ALCOHOL AC	CURACY STANDA	RDS				
SIMULATOR SOLUT	ΓΙΟΝ		✓ COMPRESSE	D ETHANOL-GAS	MIXTURE	
STANDARD SUPPLIER intoximeters LOT # AG019902 EXP. DATE 07/17/2022				7/17/2022		
SIMULATOR TEMPE	ERATURE (34°C ±	0.2°C) SI	M. SN	SIM. NIS	ST EXP DATE	
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 ☞ .082		TEST 2 ☞ .081		TEST 3 ☞ .080		
✓RFI DETECTOR OPE	ERATING					
INDICATE THE NUMBER (DO NOT INCLUDE SEL			G RANGES SINCE	THE LAST MAINT	ENANCE REPORT:	
REFUSALS 2	(004) 0	(.0509) 1	(.1014) 1	(.1519)	(OVER .19) ⁰	
List any new parts and d established limits (use oth	escribe any alterati	on or modification that v			operate satisfactorily and within	
INSPECTING OFFICER SIGNATURE		, ,		PRINT NAME		
· 0//		= #277		A. St	imson	
туре II репінт и имвег/ехріпатіом бате 290101 05/23/2021				TELEPHONE NUMBER (417-28)3-4400		
Return completed repor		Icohol Program, MO Del fax, or email.	partment of Health ar	nd Senior Services	s, Southeast District Office	

AS IU Serial no: 111670 Version no: 532B TEST RECORD 86197 Temr Date Time 216L		Subsect I.D. OPerator Name: I.D.	Location	
AS IV Serial no: 111670 Version no: 5328 TEST RECORD 00196	Air Blank: 10/22/20 06:22 .000 Calibration Check: 23 10/22/20 06:22 .080 Subject Name	Subject I.D. Operator Name, I.D.	Location	
AS IV Serial no: 111670 Version no: 532B TEST RECORD 00195 9/	Air Blank: 10/22/20 06:21 .000 Calibration Check: 22 10/22/20 06:21 .001		Operator Name, 1.8. Location	
ST RECORD 00194 Jene Date Time 210L Air Blank:	18/22/20 06:19 .000 Calibration Check: 21 10/22/20 06:19 .082 Subject Name	Subject I.D. Operator Name, I.D.	Location	



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

Certificate of Analysis

Gustomer Name Exclusive Supplier Intoximeters, Inc. 2081 Graig Road St. Louis, Mo 63146 Test Date: 21-Jul-2020

Lot # AG019902 Model 108cacd

Exp. Date 17-Jul-2022 Cyl. Type 108

Component Ethanol

Certified Concentration 0.080 ± 0.002 BrAC (208 ppm)

Nitrogen

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	EB0010595 EB0010562	Concentration 393.0 ppm 258.2 ppm 208.3 ppm 104.2 ppm 52.81 ppm
EB0010681	52.12 ppm	EB0010579	52.81 ppm

Concentration CRM Serial No. CRM Serial No. 800.0 ppm 0056649 CC434668 0056662 CC234503 253.0 ppm

Concentration 390.1 ppm 150.2 ppm

Analytical Method:

NDIR

Digitally signed by Quality Control Date: 2020,07.22 16:48:30 -05:00 Reason: Dry gas standard certification of analysis Location: Airgas USA LLC (Lab)

Approved for Release:

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

ALEXANDER K STIMSON

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.

DATE5/3/2019	We was
DATE	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 290101	
EXPIRES 5/3/2021	for of the little
EAFINES SISIEUEL	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES
	1 40 4 (00:10

MO 580-0771 (6-10)

LAB-4 (H6-10)



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 STIMSON, ALEXANDER

Permit No 290101

Date Issued 5/3/2019 Date Expires 5/3/2021

