


 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 111743	PRINTER SN 09B.3589.517	DATE OF INSPECTION 06/02/2020
LOCATION OF INSTRUMENT (STREET AND CITY) 115 E. 69 Highway, Claycomo, MO 64119		TIME OF INSPECTION 9:57 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 # AG012204 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 → .103

TEST 2 → .103

TEST 3 → .102

 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 operating within MO DOHSS standards and guidelines.

INSPECTING OFFICER

SIGNATURE

PRINT NAME

Sgt. Jeffrey Kirk

TYPE II PERMIT NUMBER EXPIRATION DATE

200130 / 03/09/22

TELEPHONE NUMBER

(816) 452-4613

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: 111743
Version no: 532B

TEST RECORD 00517

Temp Date Time ^{s/} 210L

Air Blank:
06/02/20 21:57 .000
Calibration Check:
21 06/02/20 21:57 .103

Subject Name

TEST #1

Subject I.D.

Operator Name, I.D. 200130

Jeffrey Kirk

Location Claycomo P.D

115 E US 69 Hwy

Claycomo, mo 64119

AS IV Serial no: 111743
Version no: 532B

TEST RECORD 00518

Temp Date Time ^{s/} 210L

Air Blank:
06/02/20 22:00 .000
Calibration Check:
21 06/02/20 22:00 .103

Subject Name

TEST #2

Subject I.D.

Operator Name, I.D. 200130

Jeffrey Kirk

Location Claycomo P.D

115 E US 69 Hwy

Claycomo, mo 64119

AS IV Serial no: 111743
Version no: 532B

TEST RECORD 00519

Temp Date Time ^{s/} 210L

Air Blank:
06/02/20 22:02 .000
Calibration Check:
22 06/02/20 22:02 .102

Subject Name

TEST #3

Subject I.D.

Operator Name, I.D. 200130

Jeffrey Kirk

Location Claycomo P.D

115 E US 69 Hwy

Claycomo, mo 64119

AS IV Serial no: 111743
Version no: 532B

TEST RECORD 00520

Temp Date Time ^{s/} 210L

VOID: RFI
12 06/02/20 22:07

Subject Name

RFI

Subject I.D.

Operator Name, I.D. 200130

Jeffrey Kirk

Location Claycomo P.D

115 E US 69 Hwy

Claycomo, mo 64119

AS IV Serial no: 111743
Version no: 532B

TEST RECORD 00521

Temp Date Time ^{s/} 210L

Air Blank:
06/02/20 22:11 .000
Subject Test: Auto
23 06/02/20 22:11 .000

Subject Name

self TOL

Subject I.D.

Operator Name, I.D. 200130

Jeffrey Kirk

Location Claycomo P.D

115 F US 69 Hwy

Claycomo, mo 64119



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 108cadd

<u>Exp. Date</u> 2-May-2021	<u>Cyl. Type</u> 108	<u>Component</u> Ethanol Nitrogen	<u>Certified Concentration</u> 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