



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 111745	PRINTER SN 09B.3589.503	DATE OF INSPECTION 02/20/2020
LOCATION OF INSTRUMENT (STREET AND CITY) 601 E. Broadway Ashland		TIME OF INSPECTION 6:12 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.

<input checked="" type="checkbox"/> DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)
<input checked="" type="checkbox"/> TEMPERATURE OF ALCO SENSOR (10°C - 40°C)
<input checked="" type="checkbox"/> PRINTER WORKING PROPERLY
<input checked="" type="checkbox"/> 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>AG904301</u> EXP. DATE <u>02/21/2021</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)

<input type="checkbox"/> 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE
<input checked="" type="checkbox"/> 0.080% STANDARD - MUST READ BETWEEN 0.076% and 0.084% INCLUSIVE
<input type="checkbox"/> 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE

TEST 1 .083	TEST 2 .083	TEST 3 .083
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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	1	(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).

INSPECTING OFFICER	
SIGNATURE	PRINT NAME Gabe Edwards
TYPE / PERMIT NUMBER / EXPIRATION DATE 280101 / 02-21-2020	TELEPHONE NUMBER (573) 657-9062

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: 111745
Version no: 532B

TEST RECORD 00158 s/
Temp Date Time 210L

Air Blank: 02/20/20 18:12 .000
Calibration Check: 25 02/20/20 18:12 .003

Subject Name
Maintenance
Subject I.D.

Operator Name, I.D.
G. Edwards 280101
Location
601 E. Broadway

Ashland

AS IV Serial no: 111745
Version no: 532B

TEST RECORD 00159 s/
Temp Date Time 210L

Air Blank: 02/20/20 18:13 .000
Calibration Check: 26 02/20/20 18:13 .003

Subject Name
Maintenance
Subject I.D.

Operator Name, I.D.
G. Edwards 280101
Location
601 E. Broadway

Ashland

AS IV Serial no: 111745
Version no: 532B

TEST RECORD 00160 s/
Temp Date Time 210L

Air Blank: 02/20/20 18:15 .000
Calibration Check: 26 02/20/20 18:15 .003

Subject Name
Maintenance
Subject I.D.

Operator Name, I.D.
G. Edwards 280101
Location
601 E. Broadway

Ashland

AS IV Serial no: 111745
Version no: 532B

TEST RECORD 00161 s/
Temp Date Time 210L

VOID: RFI
12 02/20/20 18:17

Subject Name
Maintenance
Subject I.D.

Operator Name, I.D.
G. Edwards 280101
Location
601 E. Broadway

Ashland

Airgas

Airgas USA, LLC (LAB)
3600 Bernard Street
St. Louis, Mo. 63103
Ph: (314) 533-3100
Fax: (314) 533-7328

Certificate of Analysis

Test Date: 12-Feb-2019

Customer Name
Exclusive Supplier
Intoximeters, Inc.
2081 Craig Road
St. Louis, Mo 63146

Lot # AG904301 Model 108cacc

Exp. Date 12-Feb-2021
Cyl. Type 108
Component Ethanol
Balance Nitrogen
Certified Concentration 0.080 ± 0.002 BtA/C (218 ppm)

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

RGM Serial No.	Concentration	RGM Serial No.	Concentration
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
CRM Serial No.	Concentration	CRM Serial No.	Concentration
CC434668	800.0 ppm	0056649	390.1 ppm
CC234503	253.0 ppm	0056662	150.2 ppm

Analytical Method: NDIR

Digitally signed by Garry Cahill
DN: cn=Garry Cahill, o=Airgas
Reason: I am a certified analyst
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

GABRIEL A EDWARDS

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, INTOX DMT

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 2/21/2018
NUMBER 280101
EXPIRES 2/21/2020
DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES
LDA-- (RS-10)

STATE OF MISSOURI
DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM
INSTRUMENT OPERATOR CARD

The named candidate is authorized to use the following instrument for the determination of the alcoholic content in breath form of a person in Missouri.

Operator: EDWARDS, GABRIEL
Permit No: 280101
Date Issued: 2/21/2018
Date Expires: 2/21/2020

