



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 111751	PRINTER SN 09B.3589.476	DATE OF INSPECTION 06/17/2020
LOCATION OF INSTRUMENT (STREET AND CITY) 2121 E. County Dr, Columbia		TIME OF INSPECTION 4:06 am

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 # AG928303 EXP. DATE 10/10/2021

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 .097

TEST 2 .096

TEST 3 .096

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 satisfactorily and within established limits.

INSPECTING OFFICER

SIGNATURE <i>Steven H. Verble</i>	PRINT NAME Steven H. Verble
TYPE II PERMIT NUMBER/EXPIRATION DATE 290102, 05/03/2021	TELEPHONE NUMBER (573) 875-1111

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: 111751
Version no: 5328

TEST RECORD 00317 ^{s/}

Temp Date Time 210L

Air Blank: 06/17/20 04:19
Calibration Check: 23 06/17/20 04:19

Subject Name
RFI
Subject I.D.

Operator Name, I.D.
Verble, 290102
Location
2121 E. County Dr
Columbin

AS IV Serial no: 111751
Version no: 5328

TEST RECORD 00316 ^{s/}

Temp Date Time 210L

Air Blank: 06/17/20 04:14 .000
Calibration Check: 23 06/17/20 04:14 .096

Subject Name
Test 3
Subject I.D.

Operator Name, I.D.
Verble, 290102
Location
2121 E. County Dr
Columbin

AS IV Serial no: 111751
Version no: 5328

TEST RECORD 00315 ^{s/}

Temp Date Time 210L

Air Blank: 06/17/20 04:10 .000
Calibration Check: 22 06/17/20 04:10 .096

Subject Name
Test 2
Subject I.D.

Operator Name, I.D.
Verble, 290102
Location
2121 E. County Dr
Columbin

AS IV Serial no: 111751
Version no: 5328

TEST RECORD 00314 ^{s/}

Temp Date Time 210L

Air Blank: 06/17/20 04:07 .000
Calibration Check: 22 06/17/20 04:07 .097

Subject Name
Test 1
Subject I.D.

Operator Name, I.D.
Verble, 290102
Location
2121 E. County Dr
Columbin



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



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



Certificate of Analysis

**PERMIT
 TYPE II**

Test Date: 11-Oct-2019

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

STEVEN H VERBLE

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

Lot # AG928303 Model 108cacd

Exp. Date	Cyl. Type	Component	Certified Concentration
10-Oct-2021	108	Ethanol	0.100 ± 2% BrAC (272 ppm)
		Nitrogen	Balance

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	EB0010586	208.3 ppm
EB0010561	103.9 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 Quality Control
 Date: 2019.10.11 17:27:05 -0500
 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

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 5/3/2019 NUMBER 290102 EXPIRES 5/3/2021
 DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
 DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES
 LAG-4 (PIS-10)

STATE OF MISSOURI
 DEPARTMENT OF HEALTH AND SENIOR SERVICES
 BREATH ALCOHOL PROGRAM
INSTRUMENT OPERATOR CARD
 The permit holder is authorized to use the alcohol instrument for the determination of the alcoholic content of breath from or expired air in Missouri.
 Operator: VERBLE, STEVEN
 Permit No: 290102
 Date Issued: 5/3/2019 Date Expires: 5/3/2021