



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 087960	NAME OF AGENCY Marceline Police Department	DATE OF INSPECTION 04/14/2021
LOCATION OF INSTRUMENT (STREET AND CITY) 123 E. Santa Fe. Marceline, Mo, 64658		TIME OF INSPECTION 9:56 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 Inc. LOT # AG929601 EXP. DATE 06/23/2021

SIMULATOR TEMPERATURE (34°C ± 0.2°C) _____ SIM. SN _____ SIM. NIST 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 .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).

N/A

INSPECTING OFFICER

SIGNATURE 	PRINT NAME William Barger
TYPE II PERMIT NUMBER/EXPIRATION DATE 210056-04/06/2023	TELEPHONE NUMBER (660) 376-3556

Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office by mail, fax, or email.

MARCELINE POLICE DEPARTMENT-BREATH ALCOHOL PROGRAM

AS IV Serial no: 087960
Version no: 532B

TEST RECORD 00326 s/
Temp Date Time 210L

Air Blank:
04/14/21 21:56 .000
Calibration Check:
23 04/14/21 21:56 .097

Subject Name
TEST #1
Subject I.D.

Operator Name, I.D.
W. BARGER #21005A
Location
123. E. SANTA FE,
MARCELINE, MO,
64658

AS IV Serial no: 087960
Version no: 532B

TEST RECORD 00327 s/
Temp Date Time 210L

Air Blank:
04/14/21 21:59 .000
Calibration Check:
23 04/14/21 21:59 .097

Subject Name
TEST #2
Subject I.D.

Operator Name, I.D.
W. BARGER #210056
Location
123 E. SANTA FE,
MARCELINE, MO
64658

AS IV Serial no: 087960
Version no: 532B

TEST RECORD 00328 s/
Temp Date Time 210L

Air Blank:
04/14/21 22:01 .000
Calibration Check:
23 04/14/21 22:01 .096

Subject Name
TEST #3
Subject I.D.

Operator Name, I.D.
W. BARGER #210056
Location
123 E. SANTA FE,
MARCELINE, MO,
64658

AS IV Serial no: 087960
Version no: 532B

TEST RECORD 00329 s/
Temp Date Time 210L

VOID: RFI
12 04/14/21 22:05

Subject Name
RFI TEST
Subject I.D.

Operator Name, I.D.
W. BARGER #210056
Location
123 E. SANTA FE,
MARCELINE, MO,
64658

TEST# 1

TEST #2

TEST #3

RFI TEST

AS-IV S/N: 087960 Type II Permit Holder: William Barger #210056-Exp: 04/06/2023 Date of Maintenance Report: 04/14/2021

Marceline Police Department AS-IV Monthly Maintenance Report



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: 23-Oct-2019

Lot # AG929601 Model 34cacd

Exp. Date

23-Jun-2021

Cyl. Type

34

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: 2019.10.23 12:59:36 -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
WILLIAM BARGER

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.

DATE 4/6/2021

NUMBER 210056

EXPIRES 4/6/2023

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

 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 BARGER, WILLIAM
 Permit No 210056
 Date Issued 4/6/2021 Date Expires 4/6/2023

