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By Tracy Crews at 12:12 pm, Jul 09, 2021



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 <b>094804</b>	NAME OF AGENCY <b>Kansas City MO PD</b>	DATE OF INSPECTION <b>6/18/21</b>
LOCATION OF INSTRUMENT (STREET AND CITY) <b>9701 Marion Park Drive, Kansas City MO 64137</b>		TIME OF INSPECTION <b>2021</b>

**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 # AG010103 EXP. DATE 04/10/2022

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 ←	<b>.078</b>	TEST 2 ←	<b>.080</b>	TEST 3 ←	<b>.078</b>
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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	(0-.04)	(.05-.09)	(.10-.14)	(.15-.19)	(OVER .19)
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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).

**TESTED AND CERTIFIED**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**INSPECTING OFFICER**

SIGNATURE <i>[Signature]</i>	PRINT NAME <b>PO Jeremy White</b>
TYPE II PERMIT NUMBER/EXPIRATION DATE <b>200231 08/20/2022</b>	TELEPHONE NUMBER <b>( ) 816-482-8141</b>

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

AS IV Serial no: 094804  
Version no: 532B

TEST RECORD 00764

Temp Date Time <sup>at</sup> 210L

Air Blank:  
06/18/21 20:21 .000  
Calibration Check:  
26 06/18/21 20:21 .078

Subject Name

*White 5771*  
Subject I.D.  
*200231*

Operator Name, I.D.

*08/20/2022*

Location

*TEST #1*

AS IV Serial no: 094804  
Version no: 532B

TEST RECORD 00765

Temp Date Time <sup>at</sup> 210L

Air Blank:  
06/18/21 20:24 .000  
Subject Test: Man  
27 06/18/21 20:24 .080

*White 5771*  
Subject Name  
Subject I.D.

*200231*

Operator Name, I.D.

*08/20/2022*

Location

*TEST #2*

AS IV Serial no: 094804  
Version no: 532B

TEST RECORD 00766

Temp Date Time <sup>at</sup> 210L

Air Blank:  
06/18/21 20:26 .000  
Subject Test: Man  
27 06/18/21 20:26 .078

*White 5771*  
Subject Name  
Subject I.D.

*200231*

Operator Name, I.D.

*08/20/2022*

Location

*TEST #3*

AS IV Serial no: 094804  
Version no: 532B

TEST RECORD 00767

Temp Date Time <sup>at</sup> 210L

VOID: RFJ  
12 06/18/21 20:43

*White 5771*  
Subject Name  
Subject I.D.

*200231*

Operator Name, I.D.

*08/20/2022*

Location

*RFJ Test*



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.  
208 - Craig Road  
St. Louis, MO 63146

Test Date: 13-Apr-2020

Lot # AG010103 Model 108cacc

Exp. Date	Cyl. Type	Component	Certified Concentration
10-Apr-2022	108	Ethanol	0.082 ± 0.002 BrAC (223 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	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	0058649	390.1 ppm
CC224503	253.0 ppm	0058662	150.2 ppm

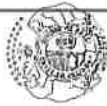
Analytical Method: NDIR

Digitally signed by Chelly Cortiel  
Date: 2020.04.14 12:17:01 -0500  
Reason: I am a certified 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



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



**PERMIT  
TYPE II**

**JEREMY A. WHITE**

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, INTOXILYZER 8000**

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 8/20/2020  
NUMBER 200231  
EXPIRES 8/20/2022  
MO 88-0771 (8-10)

*[Signature]*  
DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

*[Signature]*  
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

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STATE OF MISSOURI SENIOR SERVICES  
BREATH ALCOHOL PROGRAM  
**INSTRUMENT OPERATOR CARD**

The owner/operator is authorized for use of the above instrument for the determination of the alcoholic content of breath from or expired air in Missouri.

Operator: WHITE, JEREMY  
Permit No.: 200231  
Date Issued: 8/20/2020 Date Expires: 8/20/2022