

## MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

# RECEIVED By Tracy Crews at 10:47 am, May 12, 2021

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

Complete this report in dup				nce check, and	whenever instrument is repaired.
ALCO SENSOR IV SN NAME		NAME OF AGENCY Greene County Sh	NAME OF AGENCY Greene County Sheriff's Office		DATE OF INSPECTION D5/03/2021
LOCATION OF INSTRUMENT (ST 1000 North Boonville Av	, Missouri 65802			TIME OF INSPECTION 9:23 am	
				within establishe	d limits. (Write in observed values
where determined.) Unmai	ked items must be o	corrected before using in	nstrument.		
DIGITAL READOUT (A	ALL ELEMENTS OP	ERATIONAL)			
✓ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)					
PRINTER WORKING	PROPERLY				
✓ TIME AND DATE DIS	PLAYING PROPERI	_Y			
BREATH ALCOHOL ACC	URACY STANDARI	DS			
☐ SIMULATOR SOLUTI	ON		☑ COMPRESSED ETHANOL-GAS MIXTURE		
☑ STANDARD SUPPLIE	R Intoximeters	LC	OT # AG027403	EXP. DATE	09/30/2022
☐ SIMULATOR TEMPE	RATURE (34°C ± 0.5	2°C) SIM	I. SN	SIM. N	IST EXP DATE
☐ 0.080% STANDA	RD - MUST READ I	BETWEEN 0.095% and BETWEEN 0.076% and BETWEEN 0.038% and	0.084% INCLUSIVE		
TEST 1 ● .102%	Т	EST 2 • .102%	111	TEST 3 • .10	1%
☑ RFI DETECTOR OPE	RATING				
INDICATE THE NUMBER (DO NOT INCLUDE SELI			G RANGES SINCE	THE LAST MAIN	NTENANCE REPORT:
REFUSALS	(004)	(.0509)	(.1014)	(.1519)	(OVER .19)
List any new parts and de established limits (use oth			as made to restore	the instrument to	o operate satisfactorily and within
INSPECTING OFFICER SIGNATURE TYPE II PERMIT NUMBER/EXPIRATI 200259 09/24/2022	M los	2		PRINT NAME Kyle Winchell TELEPHONE NUMBER (417) 868-404	R
Return completed repor		cohol Program, MO Dep	partment of Health a		ees, Southeast District Office

AS IV Serial no: 097416 Version no: 532B	AS IV Serial no: 097410 Version no: 532B	6 AS IV Seria Version no:	l no: 097416 532B
TEST RECORD 00779	TEST RECORD 00780	, TEST REC	ORD 00781
Temp Date Time 210L	Temp Date Time 21		9/ Time 210L
Air Blank: 05/03/21 09:23 .000 Calibration Check: 18 05/03/21 09:23 .102	Air Blank: 05/03/21 09:25 .00 Calibration Check: 19 05/03/21 09:25 .10	calibration	:1 09:27 .000 Check: 1 09:27 .101
Subject Name	Subject Name Test 2	Subject Nam	~
Subject I.D.	Subject I.D.	— <u> </u>	
Operator Name, I.D.  Location	Operator Name, I.D.  2 2 2 1080 Location	Operator Na Location	me, I.D. Woll 1882
-			
AS IV Serial no Version no: 5	110 21	) Serial no: 097416 ion no: 532B	
TEST RECORD	00782 TH	EST RECORD 00783	
Temp Date	Time 210L Temp	9/ Date Time 210L	
VOID: RFI 12 05/03/21 0	9:29	Blank: 85/03/21 09:30 .000	
Subject Name	21 (	ect Test: Auto 05/03/21 09:30 .000	
Test 4 / Subject I.D.		ect Name St 5/ Sobe	
Operator Name,	I.D. Subje	ect I.D.	
Location	l lost Oper	ator Name, I.D.	
	Loca	tion	

area name n



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: 1-Oct-2020

Lot # AG027403 Model 108cacd

Exp. Date 30-Sep-2022 Cyl. Type

Component Ethanol Certified Concentration

Nitrogen

0.100 ± 2% BrAC (272 ppm)

Balance

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

RGM Serial No.	Concentration	RGM Serial No.	<b>Concentration</b>
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 Quality Control Date: 2020.10.02 12:22:16 -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

### **KYLE R. WINCHELL**

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 EC/IR II

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 9/24/2020	when
DATE	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 200259	
EXPIRES 9/24/2022	for ville
	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

LAB-4 (R6-10)



The named cardholder is authorized to operate an evidential breath alcohol instrument for the determination of the alcoholic content in breath form of expired ali in Missouri

Operator WINCHELL, KYLE

ed 9/24/2020 Date Expires 9/24/2022

