



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

				nei oni #/	
Complete this report in duplicate at the time of Send copy to Department of Health and Senior	the regular monthly pro Services; retain origina	eventative mai Il in departmer	ntenance check, and	d whenever instrument is repaired.	
ALCO SENSOR IV SN 0 97424	NAME OF AGENCY Wentzullle	Police 1	Department	DATE OF INSPECTION 07/01/2021	
LOCATION OF INSTRUMENT (STREET AND CITY) 1019 Schroeder Creek Bluc	1. Wentzville	MO 62	3385	TIME OF INSPECTION	
CHECKLIST: Place a mark in the box by each it where determined.) Unmarked items must be c	em if found to be satisfa	ctory or if opera	ating within establish	ned limits. (Write in observed values	
DIGITAL READOUT (ALL ELEMENTS OPI		istrument.			
TEMPERATURE OF ALCO SENSOR (10°C - 40°C)					
PRINTER WORKING PROPERLY					
TIME AND DATE DISPLAYING PROPERLY	Y		7,404		
BREATH ALCOHOL ACCURACY STANDARD	S	··			
☐ SIMULATOR SOLUTION		COMPRE	SSED ETHANOL-G	AS MIXTURE	
STANDARD SUPPLIER Intoxime	ters Lo	T# <u>AGOI</u>	7 <i>403</i> EXP. DATE	06/22/2022	
SIMULATOR TEMPERATURE (34°C ± 0.2°	°C) SIM.	SN	SIM. I	NIST EXP DATE	
Run three tests using a standard solution. A less Check the box corresponding to the st 0.100% STANDARD - MUST READ BI 0.080% STANDARD - MUST READ BI 0.040% STANDARD - MUST READ BI	andard solution being u ETWEEN 0.095% and (ETWEEN 0.076% and (sed. (PRINTO).105% INCLU).084% INCLU	UT ATTACHED) SIVE SIVE SIVE	AG 7	
M RFI DETECTOR OPERATING	3124 607	/	TEST 3 🖝	0011	
	THE FOLLOWING	DAMOSO 000			
INDICATE THE NUMBER OF BREATH TESTS (DO NOT INCLUDE SELF-ADMINISTERED TO		KANGES SIN	CE THE LAST MAI	NIENANCE REPORT:	
REFUSALS (004)	(.0509)	1014)	(.1519)	OVER .19)	
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).					
Tru-Cal II: 000	098			·	
INSPECTING OFFICER					
SIGNATURE X-73			PRINT NAME	o Branco	
TYPE II PERMIT NUMBER/EXPIRATION DATE 290236	10-03-20	021	TELEPHONE NUMBER	207-5105	
The state of the s	hol Program, MO Depa		th and Senior Service	res, Southeast District Office	

S IV Serial no: 097424 Persion no: 532B	AS IV Serial no: 097424 Version no: 532B		
TEST RECORD 01329			
Gemp Date Time 210L	TEST RECORD 01330		
	Temp Date Time 2101		
nir Blank: 07/01/21 09:43 .000	Air Blank:		
talibration Check:	07/01/21 09:45 .000		
24 07/01/21 09:43 .097	Calibration Check: 24 07/01/21 09:45 .097		
Subject Name	Subject Name		
7 T			
Subject I.D.	Subject I.D.		
Operator Name, I.D.			
	Operator Name: I.D.		
Location	Location		
	gocat I wi		
AS IV Serial no: 097424	AS IU Serial no: 097424		
Version no: 532B	AS IV Serial no: 097424 Version no: 532B		
Version no: 532B TEST RECORD 01331 9/	AS IV Serial no: 097424 Version no: 532B TEST RECORD 01332		
Version no: 532B TEST RECORD 01331 a/ Temp Date Time 210L	Version no: 532B TEST RECORD 01332 9/		
9/ Temp Date Time 210L Air Blank:	Version no: 532B TEST RECORD 01332 9/ Temp Date Time 210 VOID: RFI		
Version no: 532B TEST RECORD 01331 9/ Temp Date Time 210L Air Blank: 07/01/21 09:47 .000 Calibration Check:	Version no: 532B TEST RECORD 01332 9/ Temp Date Time 210		
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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: 24-Jun-2020

Lot # AG017403 Model 108cacd

Exp. Date 22-Jun-2022

Cyl. Type 108 <u>Component</u> 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.	<u>Concentration</u>	RGM Serial No.	<u>Concentration</u>
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.	<u>Concentration</u>	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: 2020.09.08 12:54:46 -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 T BRUNS

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.

DATE10/3/2019	white		
	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY		
NUMBER 290236			
EXPIRES 10/3/2021	for white		
	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES		

MO 580-0771 (6-10)

LAB-4 (R6-10)



BRUNS, KYLE Operator Permit No 290236

Date Expires 10/3/2021 Date Issued 10/3/2019

