RECEIVED

By Tracy Crews at 2:03 pm, Apr 23, 2021



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

1-0200						
Complete this report in duplicate at the ti Send copy to Department of Health and S	•	- 1		ver instrument is repaired.		
ALCO SENSOR IV SN 102457	NAME OF AGEN	cy olice Department	DATE OF 04/18/	INSPECTION 2021		
LOCATION OF INSTRUMENT (STREET AND CITY) 600 E Walnut St Columbia		,	TIME OF 1:56 p	INSPECTION M		
CHECKLIST: Place a mark in the box by e			ng within established limits	. (Write in observed values		
where determined.) Unmarked items mus		using instrument.				
DIGITAL READOUT (ALL ELEMENT	S OPERATIONAL)					
✓ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)						
PRINTER WORKING PROPERLY						
✓ TIME AND DATE DISPLAYING PROPERLY						
BREATH ALCOHOL ACCURACY STAN	DARDS					
☐ SIMULATOR SOLUTION	ATOR SOLUTION COMPRESSED ETHANOL-GAS MIXTURE					
STANDARD SUPPLIER Intoximeter	rs	LOT # AG020401	EXP. DATE 07/22/	2022		
☐ SIMULATOR TEMPERATURE (34°C	± 0.2°C)	SIM. SN	SIM. NIST EX	P DATE		
less. Check the box corresponding to 0.100% STANDARD - MUST RE 0.080% STANDARD - MUST RE 0.040% STANDARD - MUST RE	EAD BETWEEN 0.095 EAD BETWEEN 0.076	% and 0.105% INCLUSI % and 0.084% INCLUSI	VE VE			
TEST 1 .100	TEST 2 🖛 .101		TEST 3 ■ .101			
RFI DETECTOR OPERATING						
INDICATE THE NUMBER OF BREATH 1 (DO NOT INCLUDE SELF-ADMINISTER		OWING RANGES SINCE	THE LAST MAINTENA	NCE REPORT:		
REFUSALS 0 (004) 0	(.0509) 0	(.1014) 2	(.1519) 4	(OVER .19)		
List any new parts and describe any alte established limits (use other side if neces		that was made to restor	e the instrument to opera	ate satisfactorily and within		
NSPECTING OFFICER			POINT NAME			
BIGNATURE #/93 9			Lori Simpson			
190095 04/22/2021			TELEPHONE NUMBER (573) 874-7652			
Return completed report to the: Breatl	h Alcohol Program, M ail, fax, or email.	O Department of Health	and Senior Services, Sou	utheast District Office		

Simpson CPO Tens Date Time 2181

**In \$1ark:
84/18/21 14:81 .888

Calibration Check:
25 84/18/21 14:81 .181

Fig. 1.5.

Cherator Name: 1.5.

Cherator Name: 1.5.

Cherator Name: 1.5.

Cherator Name: 1.5. AS IV Serial no: 102457 Version no: 532B SENIOR CHOCK TORK

Temp Date Time 2181
UDID RET
12 94/19/21 14:00
Subject Name
RFI
Subject Na

Customer Name Exclusive Supplier Intoximeters, Inc. 2081 Craig Road St. Louis, Mo 63146 Test Date: 22-Jul 2020

Lot # AG020401 Model 108cacd

Exp. Date 22-Jul-2022 Cyl, Type 108

Component Ethanol

Certified Concentration $0.100 \pm 2\%$ BrAC (272 ppm)

Nitrogen

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.	Concentration	CRM Serial No.	Concentration
CC434668	800.0 ppm	0056649	390.1 ppm
CC234503	253.0 ppm	0056662	150.2 ppm

Analytical Method:

NDIR

Dignolly signed by Quality Control Date, 2020.07, 22 18:29:45 -00:50 Reason: Dry gas standard certification of analysis Excation Airgos USA LLC (Lab)

Approved for Release:

Avel Marsola 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

LORI A SIMPSON

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 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

4/22/2019

NUMBER 290095

EXPIRES 4/22/2021

MC 589-0271 (6-10)

lus hasain

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

full ville

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAR4 (R6-10)



Operator SIMPSON, LORI

Permit No 290095 Date Issued 4/22/2019 Date Expires

2/2019 Date Expires 4/22/2021

