





MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

Complete this report in dup				nce check, and whene	ver instrument is repaired.
Send copy to Department of Health and Senior ALCO SENSOR IV SN 102472		NAME OF AGENCY Greene County Sheriff's Office		DATE OF 11/17/2	INSPECTION 2021
LOCATION OF INSTRUMENT (STREET AND CITY) 1010 North Boonville Avenue Springfield, Missouri 65802			0	TIME OF 9:29 at	INSPECTION M
CHECKLIST: Place a mark				vithin established limits	. (Write in observed values
where determined.) Unmar			strument.		
DIGITAL READOUT (A	ALL ELEMENTS OF	PERATIONAL)	n		
✓ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)					
✓ PRINTER WORKING PROPERLY					
✓ TIME AND DATE DISF	PLAYING PROPER	LY			
BREATH ALCOHOL ACCU	URACY STANDAR	DS			
☐ SIMULATOR SOLUTION	☐ SIMULATOR SOLUTION ☑ COMPRESSED ETHANOL-GAS MIXTURE				TURE
STANDARD SUPPLIER Intoximeters  LOT # AG027403 EXP. DATE 09/30/2022			2022		
☐ SIMULATOR TEMPERATURE (34°C ± 0.2°C) SIM. SN SIM. NIST EXP DATE			P DATE		
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>☞</b> .098	-	TEST 2 <b>☞</b> .098		TEST 3 ● .098	
☑ RFI DETECTOR OPER	RATING	9			
INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT: (DO NOT INCLUDE SELF-ADMINISTERED TESTS)					
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).					
INSPECTING OFFICER SIGNATURE	A TOWN TO BE		<b>第</b> 1878年	PRINT NAME	
136	rd	1082	11	Kyle Winchell	2 X.H. 3- 1
TYPE IL FERMIT NUMBER/EXPIRATION DATE 200259 09/24/2022				TELEPHONE NUMBER (417) 868-4040	
Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office by mail, fax, or email.					utheast District Office

AS IV Serial no: 102472 Version no: 532B	AS IV Serial no: 102472 Version no: 532B	AS IV Serial no: 102472 Version no: 532B
TEST RECORD 01646	TEST RECORD 01647	TEST RECORD 01648
Temp Date Time 210L	Temp Date Time 210L	9/ Temp Date Time 210L
Air Blank: 11/17/21 09:29 .000 Calibration Check: 25 11/17/21 09:29 .098	Air Blank: 11/17/21 09:31 .000 Calibration Check: 25 11/17/21 09:31 .098	Air Blank: 11/17/21 09:33 .000 Calibration Check: 26 11/17/21 09:33 .098
Subject Name	Subject Name	Subject Name
Test   Subject I.D.	Test Z Subject I.D.	Test 3 Subject I.D.
Operator Name, I.D.  Mullippe Description	Operator Name: I.D.  26  Location	Operator Name, I.D.  J. Zwell  Location

AS IV Serial no: 182472 Version no: 532B
TEST RECORD 01649
Temp Date Time 210L
VOID: RFI 12 11/17/21 09:34
Subject Name Test 4/ RPI Subject I.D.
Operator Name, I.D.
JC WM Location
kalan minus ya yanguning ya disabahalan ya pamanan albaha makan ya pamanan ya garan ya kanan kanan ya garan ya

T RECU	RD 016	50 9/
Date	Time	2101
	00:05	989
t Test	: Auto	
		V
		,
or Nam	re: I.D	/
	Date ank: /17/21 t Test /17/21 t Name + 5/	T RECORD 016  Date Time  ank: /17/21 09:35 t Test: Auto /17/21 09:35 t Name + 5 / Sob t I.D.



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

Cyl. Type

Component

**Certified Concentration** 

30-Sep-2022

108

Ethanol Nitrogen 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.	<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:

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	white		
DAIL	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY		
NUMBER 200259			
EXPIRES 9/24/2022	for Ullellen		
	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 air in Missouri.

Operator WINCHELL, KYLE Permit No 200259

Date Issued 9/24/2020 Date Expires 9/24/2022

