

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

A CONTRACTOR OF THE PROPERTY O					
Complete this report in duplicate at the time Send copy to Department of Health and Seni	of the regular monthly proor Services; retain original	eventative maintenal al in department file.			is repaired.
alco sensor IV sn 104293	NAME OF AGENCY GLADSTONE PD			DATE OF INSPECTION 11/18/2021	
LOCATION OF INSTRUMENT (STREET AND CITY) 7010 N HOLMES ST GLADSTONE, MC				TIME OF INSPECTION 1:37 am	
CHECKLIST: Place a mark in the box by each	item if found to be satisfa	actory or if operating	within establishe	ed limits. (Write in obse	rved values
where determined.) Unmarked items must be	e corrected before using i	nstrument.			
☑ DIGITAL READOUT (ALL ELEMENTS C	PERATIONAL)				
	0°C - 40°C)				
PRINTER WORKING PROPERLY					
☑ TIME AND DATE DISPLAYING PROPE	RLY				
BREATH ALCOHOL ACCURACY STANDA	RDS				
☐ SIMULATOR SOLUTION		☑ COMPRESSE	D ETHANOL-GA	AS MIXTURE	
☑ STANDARD SUPPLIER INTOXIMETE	ERS LO	OT # AG102503	EXP. DATE	01/25/2023	
☐ SIMULATOR TEMPERATURE (34°C ±		л. SN	SIM. N	NIST EXP DATE	
less. Check the box corresponding to th O.100% STANDARD - MUST REAL 0.080% STANDARD - MUST REAL 0.040% STANDARD - MUST REAL	D BETWEEN 0.095% and D BETWEEN 0.076% and	1 0.105% INCLUSIVI 1 0.084% INCLUSIVI	E E		
TEST 1 .102	TEST 2 .100		TEST 3 🕶 .10	00	
RFI DETECTOR OPERATING					
INDICATE THE NUMBER OF BREATH TE	STS IN THE FOLLOWIN	G RANGES SINCE	THE LAST MAI	NTENANCE REPORT	ľ:
(DO NOT INCLUDE SELF-ADMINISTERE	T	Î	ľ		0
REFUSALS 0 (004) 0	(.0509)	(.1014)	(.1519)	0 (OVER .19)	
List any new parts and describe any altera established limits (use other side if necessary)	tion or modification that v	was made to restore	the instrument	to operate satisfactor	ily and within
ALL MAINTENANCE CONDUCTED W	/ITH DHSS STANDAR	DS. TIME WAS CH	HANGED ON I	NSTRUMENT TO R	REFLECT
TIME CHANGE.					
INSPECTING OFFICER	5 Trees of 1800 at 1				
SIGNATURE			PRINT NAME	CHRISTOPHER	
1/12/1600			TELEPHONE NUMB		
TYPE II PERMIT NUMBER/EXPIRATION DATE 210203			(816) 436-3		
Return completed report to the: Breath	Alcohol Program, MO De	epartment of Health	and Senior Serv	rices, Southeast Distric	ct Office
by mai	I, fax, or email.				LAD



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: 15-Jun-2021

Lot # AG116504 Model 108cacd

Exp. Date 14-Jun-2023 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.	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. CC434668 CC234503	Concentration 800.0 ppm 253.0 ppm	CRM Serial No. 0056649 0056662	Concentration 390.1 ppm 150.2 ppm

Analytical Method:

NDIR

Digitally signed by Quality Control Date: 2021.06.15 18:48:16 -05:00 Reason: Dry gas standard certification of analysis Location: Airgas USA LLC (Lab)

Approved for Release:

Rod Marsala

ISO 17025:2017 A2LA accredited. Certificate Number 3082.06 ISO 17034:2016 A2LA accredited. Certificate Number 3082.07

Temp Date Time 210L

Air Blank:
 11/18/21 01:37 .000
Calibration Check:
 22 11/18/21 01:37 .182

Subject Name

TEST

Enciect L.D.

Z

Operator Name: 1.D.

BENNETT 210203
Location

7010 N HOLMES ST

GLADSTONE, MO 64118

al ho: 104293

TEST RECORD BIGHT
Temp Dols 2:0L

MIT 19 Mil 1:38 .000

Locat Name

TEST
Subject I.D.

Decator Name 1.D.

BENNETT 210203

Location

7010 N HOLMES ST

GLADSTONE, MO GILLS

Published Home
TEST
The sect Titl
3
The sect Titl
3
The sect Titl
3
TO N HALMES ST

GLADSTONE, MO 64118

TEST REFORD #1612.

THE BALL TIME 21600

THE ST PRINCE I.D.

RFI

TREFT 210203

TO N HOLMES ST

GLADSTONE, MO 64118



STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM



PERMIT TYPE II

CHRISTOPHER BENNETT

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

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	9/14/2021	_
NUMBER	210203	
EYPIRES	9/14/2023	

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Thound A. Kann w/

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (R6-10)

MO 580-0771 (6-10)

