



ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

Complete this report in duplicate at the time of the regular monthly preventative maintenance check, and whenever instrument is repaired. Send copy to Department of Health and Senior Services; retain original in department file.

ALCO SENSOR IV SN 108264	NAME OF AGENCY Buckner PD	DATE OF INSPECTION 02/03/2021
LOCATION OF INSTRUMENT (STREET AND CITY) 315 S. Hudson		TIME OF INSPECTION 10:08 pm

CHECKLIST: Place a mark in the box by each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unmarked items must be corrected before using instrument.

DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)

TEMPERATURE OF ALCO SENSOR (10°C - 40°C)

PRINTER WORKING PROPERLY

TIME AND DATE DISPLAYING PROPERLY

BREATH ALCOHOL ACCURACY STANDARDS

SIMULATOR SOLUTION COMPRESSED ETHANOL-GAS MIXTURE

STANDARD SUPPLIER Intoximeters LOT # AG031402 EXP. DATE 07/09/2022

SIMULATOR TEMPERATURE (34°C ± 0.2°C) SIM. SN SIM. NIST EXP DATE

CALIBRATION CHECK – (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)

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 .099

TEST 2 .100

TEST 3 .100

RFI DETECTOR OPERATING

**INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:
(DO NOT INCLUDE SELF-ADMINISTERED TESTS)**

REFUSALS	0	(0-.04)	0	(.05-.09)	0	(.10-.14)	0	(.15-.19)	0	(OVER .19)	0
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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).

Time corrected.

INSPECTING OFFICER

SIGNATURE *B. Wright #311*

PRINT NAME
B. Wright #311

TYPE II PERMIT NUMBER/EXPIRATION DATE
#290071 03-13-2021

TELEPHONE NUMBER
(816) 650-3939

Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office by mail, fax, or email.

AS IV Serial no: 100264
Version no: 502B

TEST RECORD 005:6

Temp Date Time 210L

Air Blank: 82/03/21 22:08 .000

Calibration Check: 20 82/03/21 22:08 .099

Subject Name

Maintenance Test 1

Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 100264
Version no: 502B

TEST RECORD 005:7

Temp Date Time 210L

Air Blank: 82/03/21 22:10 .000

Calibration Check: 21 82/03/21 22:10 .100

Subject Name

Maintenance Test 2

Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 100264
Version no: 502B

TEST RECORD 005:8

Temp Date Time 210L

Air Blank: 82/03/21 22:11 .000

Calibration Check: 22 82/03/21 22:11 .100

Subject Name

Maintenance Test 3

Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 100264
Version no: 502B

TEST RECORD 005:9

Temp Date Time 210L

VOID: 82/03/21 22:13

Subject Name

Maintenance RFI

Subject I.D.

Operator Name, I.D.

Location



STATE OF MISSOURI
 DEPARTMENT OF HEALTH AND SENIOR SERVICES
 BREATH ALCOHOL PROGRAM

2

PERMIT
 TYPE II
 BRADLEY WRIGHT

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

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 806.111 through 806.119 HSMo.

DATE 3/13/2019

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

NUMBER 290071

EXPIRES 3/13/2021

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (8-10)

LAB-4 (RS-10)

STATE OF MISSOURI
 DEPARTMENT OF HEALTH AND SENIOR SERVICES
 BREATH ALCOHOL PROGRAM

INSTRUMENT OPERATOR CARD

The named certificatee is authorized to operate an official breath alcohol instrument for the determination of the alcoholic content in breath from of expired air in Missouri.

Operator: WRIGHT, BRADLEY
 Permit No: 290071
 Date Issued 3/13/2019 Date Expires 3/13/2021



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: 10-Nov-2020

Lot # AG031402 Model 34cadd

<u>Exp. Date</u>	<u>Cyl. Type</u>	<u>Component</u>	<u>Certified Concentration</u>
9-Jul-2022	34	Ethanol Nitrogen	0.100 ± 2% BrAC (272 ppm) Balance

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

<u>RGM Serial No.</u>	<u>Concentration</u>	<u>RGM Serial No.</u>	<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

<u>CRM Serial No.</u>	<u>Concentration</u>	<u>CRM Serial No.</u>	<u>Concentration</u>
CC727481	800.0 ppm	CC727493	390.0 ppm
CC727496	253.0 ppm	CC727498	150.0 ppm

Analytical Method: NDIR

Digitally signed by Quality Control
Date: 2020.11.10 18:48:41 -06:00
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