



**MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
STATE PUBLIC HEALTH LABORATORY
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 08/02/2021
LOCATION OF INSTRUMENT (STREET AND CITY) 315 S. Hudson St. Buckner, Mo 64016		TIME OF INSPECTION 12:04 am

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 Intoxometers 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 .098

TEST 2 .099

TEST 3 .098

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)	2	(OVER .19)	1
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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).

INSPECTING OFFICER

SIGNATURE

PRINT NAME
R. Kendall #316

TYPE II PERMIT NUMBER/EXPIRATION DATE
200199

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: 108264
Version no: 532B

AS IV Serial no: 108264
Version no: 532B

AS IV Serial no: 108264
Version no: 532B

TEST RECORD 00557

TEST RECORD 00566

TEST RECORD 00565

Temp Date Time ^{g/} 219L

Temp Date Time ^{g/} 219L

Temp Date Time ^{g/} 219L

Air Blank:
08/02/21 00:17 .000
Calibration Check:
22 08/02/21 00:17 .100

Air Blank:
08/02/21 00:15 .000
Calibration Check:
22 08/02/21 00:15 .090

Air Blank:
08/02/21 00:14 .000
Calibration Check:
21 08/02/21 00:14 .100

Subject Name

Subject Name

Subject Name

TEST 1

TEST 2

TEST 3

Subject I.D.

Subject I.D.

Subject I.D.

Operator Name, I.D.

Operator Name, I.D.

Operator Name, I.D.

KENDALL 200199

KENDALL 200199

KENDALL 200199

Location

Location

Location

315 S. HUDSON

315 S. HUDSON

315 S. HUDSON

Buckner PD

Buckner PD

Buckner PD

AS IV Serial no: 108264
Version no: 532B

AS IV Serial no: 108264
Version no: 532B

TEST RECORD 00568

TEST RECORD 00569

Temp Date Time ^{g/} 219L

Temp Date Time ^{g/} 219L

Air Blank:
08/02/21 00:17 .000
Calibration Check:
22 08/02/21 00:17 .100

Air Blank:
08/02/21 00:19 .000
Calibration Check:
22 08/02/21 00:19 .090

Subject Name

Subject Name

BFI

KENDALL

Subject I.D.

Subject I.D.

Operator Name, I.D.

Operator Name, I.D.

KENDALL 200199

Operator Name, I.D.

Location

200199

315 S. HUDSON

Location

315 S HUDSON

Buckner PD

Buckner PD

AS IV Serial no: 108264
Version no: 532B

TEST RECORD 00567

Temp Date Time 210L

Air Blank:
08/02/21 00:17 .000
Calibration Check:
22 08/02/21 00:17 .100

Subject Name

TEST 1

Subject I.D.

Operator Name, I.D.

KENDALL 200199
Location

315 S. HUDSON

Buckner PD

AS IV Serial no: 108264
Version no: 532B

TEST RECORD 00566

Temp Date Time 210L

Air Blank:
08/02/21 00:15 .000
Calibration Check:
22 08/02/21 00:15 .099

Subject Name

TEST 2

Subject I.D.

Operator Name, I.D.

KENDALL 200199
Location

315 S. HUDSON

Buckner PD

AS IV Serial no: 108264
Version no: 532B

TEST RECORD 00565

Temp Date Time 210L

Air Blank:
08/02/21 00:14 .000
Calibration Check:
21 08/02/21 00:14 .100

Subject Name

TEST 3

Subject I.D.

Operator Name, I.D.

KENDALL 200199
Location

315 S. HUDSON

Buckner PD

AS IV Serial no: 108264
Version no: 532B

TEST RECORD 00568

Temp Date Time 210L

VOID: RFI
12 08/02/21 00:17

Subject Name

RFI

Subject I.D.

Operator Name, I.D.

KENDALL 200199
Location

315 S. HUDSON

Buckner PD

AS IV Serial no: 108264
Version no: 532B

TEST RECORD 00569

Temp Date Time 210L

Air Blank:
08/02/21 00:19 .000
Subject Test: Auto
28 08/02/21 00:17 .000

Subject Name

KENDALL

Subject I.D.

KENDALL
Operator Name, I.D.

200199
Location

315 S. HUDSON

Buckner PD



Airgas USA LLC (LAB)
 3500 Bernard Street
 St. Louis, Mo. 63104
 Ph: (314) 333-3100
 Fax: (314) 633-7226

Certificate of Analysis

Customer Name
 Exclusive Supplier
 Intoximeters, Inc.
 2051 Craig Road
 St. Louis, Mo 63146

Test Date: 10-Nov-2020

Lot # AG031402 Model 34cacc

Exp. Date 6-Jul-2022	Cyl. Type 34	Component Ethanol Nitrogen	Certified Concentration 0.100 ± 2% BrAC (272 ppm) Balance
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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>
EB0010881	392.1 ppm	EB0010695	393.0 ppm
EB0010370	259.8 ppm	EB0010559	258.2 ppm
EB0010285	268.0 ppm	EB0010595	268.3 ppm
EB0010561	163.6 ppm	EB0010562	164.2 ppm
EB0010561	52.12 ppm	EB0010579	52.81 ppm

<u>CRM Serial No.</u>	<u>Concentration</u>	<u>CRM Serial No.</u>	<u>Concentration</u>
CC727481	600.0 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 18:41:11 -0500
 Reason: Dry gas standard certification of analyte
 Location: Airgas USA LLC (Lab)

Approved for Release: Rod Marsala
 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**

RICHARD L. KENDALL

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 306.111 through 306.119 RSMo.

DATE 7/8/2020

NUMBER 200199

EXPIRES 7/8/2022

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

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

INSTRUMENT OPERATOR CARD

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 KENDALL, RICHARD
 Permit No 200199
 Date Issued 7/8/2020 Date Expires 7/8/2022

