



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
 STATE PUBLIC HEALTH LABORATORY
ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

RECEIVED
by Tracy Green at 7:49 am, Dec 16, 2021

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 111647	NAME OF AGENCY Normandy Police Department	DATE OF INSPECTION 12/15/2021
LOCATION OF INSTRUMENT (STREET AND CITY) 7700 Natural Bridge Road, Normandy		TIME OF INSPECTION 9:27 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 Airgas LOT # AG127802 EXP. DATE 10/05/2023

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 .081

TEST 2 .081

TEST 3 .080

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)	1	(OVER .19)	2
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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
 P.O. Thomas M. Moore

TYPE II PERMIT NUMBER/EXPIRATION DATE
 200200 / 07/08/2022

TELEPHONE NUMBER
 (314) 385-3300

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: 111647
Version no: 532B

TEST RECORD 00356

Temp Date Time 210L
s/

Air Blank:
12/15/21 21:27 .000
Subject Test: Man
19 12/15/21 21:27 .081

Subject Name

BAC MAINTENANCE
Subject I.D.

Operator Name, I.D.

MOORE 325 PERMIT 200200
Location

7700 NATURAL BR. RD

NORMANDY, MO 63121

AS IV Serial no: 111647
Version no: 532B

TEST RECORD 00357

Temp Date Time 210L
s/

Air Blank:
12/15/21 21:29 .000
Subject Test: Man
20 12/15/21 21:29 .081

Subject Name

BAC MAINTENANCE
Subject I.D.

Operator Name, I.D.

MOORE 325 PERMIT 200200
Location

7700 NATURAL BR. RD

NORMANDY, MO 63121

AS IV Serial no: 111647
Version no: 532B

TEST RECORD 00358

Temp Date Time 210L
s/

Air Blank:
12/15/21 21:30 .000
Subject Test: Man
21 12/15/21 21:30 .081

Subject Name

BAC MAINTENANCE
Subject I.D.

Operator Name, I.D.

MOORE 325 PERMIT 200200
Location

7700 NATURAL BR. RD

NORMANDY, MO 63121

AS IV Serial no: 111647
Version no: 532B

TEST RECORD 00359

Temp Date Time 210L
s/

VOID: RFI
12 12/15/21 21:32

Subject Name

BAC MAINTENANCE
Subject I.D.

Operator Name, I.D.

MOORE 325 PERMIT 200200
Location

7700 NATURAL BR. RD

NORMANDY, MO 63121



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: 5-Oct-2021

Lot # AG127802 Model 108cacd

<u>Exp. Date</u>	<u>Cyl. Type</u>	<u>Component</u>	<u>Certified Concentration</u>
5-Oct-2023	108	Ethanol	0.080 ± 0.002 BrAC (218 ppm)
		Nitrogen	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>
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: 2021.10.05 18:55:05 -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



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

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**PERMIT
 TYPE II**

THOMAS M. MOORE

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 7/8/2020

NUMBER 200200

EXPIRES 7/8/2022

MO 580-0771 (6-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (R6-10)



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 MOORE, THOMAS
 Permit No 200200
 Date Issued 7/8/2020 Date Expires 7/8/2022

