



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

RECEIVED
 By Tracy Crews at 8:14 am, May 25, 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 111769	NAME OF AGENCY Columbia Police Department	DATE OF INSPECTION 05/21/2021
LOCATION OF INSTRUMENT (STREET AND CITY) 600 East Walnut Columbia		TIME OF INSPECTION 7:50 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

<input type="checkbox"/> SIMULATOR SOLUTION	<input checked="" type="checkbox"/> COMPRESSED ETHANOL-GAS MIXTURE
<input checked="" type="checkbox"/> STANDARD SUPPLIER <u>Intoximeters</u>	LOT # <u>AG020401</u> EXP. DATE <u>07/22/2022</u>
<input type="checkbox"/> 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 ← .100	TEST 2 ← .100	TEST 3 ← .100
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- 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 2	(0-.04) 1	(.05-.09) 1	(.10-.14) 5	(.15-.19) 7	(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).

Monthly Maintenance and re-calibrated

INSPECTING OFFICER	
SIGNATURE <i>Mark D. Hoehne</i>	PRINT NAME Mark D. Hoehne
TYPE II PERMIT NUMBER/EXPIRATION DATE 200187 06/15/2022	TELEPHONE NUMBER (573-874-7585)

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: 111769
Version no: 532B

TEST RECORD 00068

Temp Date Time ^{s/} 210L

Air Blank:
05/21/21 19:50 .000
Calibration Check:
25 05/21/21 19:50 .100

Subject Name

Test # 1

Subject I.D.

Hoehne, Mark D. 2078
Operator Name, I.D.

Location

AS IV Serial no: 111769
Version no: 532B

TEST RECORD 00069

Temp Date Time ^{s/} 210L

Air Blank:
05/21/21 19:51 .000
Calibration Check:
24 05/21/21 19:51 .100

Subject Name

Test # 2

Subject I.D.

Hoehne, Mark D. 2078
Operator Name, I.D.

Location

AS IV Serial no: 111769
Version no: 532B

TEST RECORD 00070

Temp Date Time ^{s/} 210L

Air Blank:
05/21/21 19:53 .000
Calibration Check:
24 05/21/21 19:53 .100

Subject Name

Test # 3

Subject I.D.

Hoehne, Mark D. 2078
Operator Name, I.D.

Location

AS IV Serial no: 111769
Version no: 532B

TEST RECORD 00071

Temp Date Time ^{s/} 210L

VOID: RFI
12 05/21/21 19:55

Subject Name

RFI Check

Subject I.D.

Hoehne, Mark D. 2078
Operator Name, I.D.

Location

AS IV Serial no: 111769
Version no: 532B

TEST RECORD 00072

Temp Date Time ^{s/} 210L

Air Blank:
05/21/21 19:56 .000
Subject Test: Auto
24 05/21/21 19:56 .000

Subject Name

Self Test

Subject I.D.

Hoehne, Mark D. 2078
Operator Name, I.D.

Location

Customer Name
Exclusive Supplier
Intoximeters Inc
2081 Craig Road
St. Louis, Mo 63145

Lot # AG020401 Model 108cadd

<u>Exp. Date</u>	<u>Cyl. Type</u>	<u>Component</u>	<u>Certified Concentration</u>
22-Jul-2022	108	Ethanol	0.100 ± 2% BrAC (272 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	392.4 ppm	EB0010553	393.0 ppm
EB0010570	259.8 ppm	EB0010550	268.2 ppm
EB0010285	208.0 ppm	EB0010535	208.3 ppm
EB0010584	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>
CC434658	800.0 ppm	0058649	390.1 ppm
CC234503	253.0 ppm	0058662	150.2 ppm

Analytical Method: **NDIR**

Digitally signed by Quality Control
Date: 2020.07.22 16:23:45 -05:00
Reason: Dry gas standard certification of analyte.
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

STATE OF MISSISSIPPI
DEPARTMENT OF TRANSPORTATION

ALCO-SENSOR IV WITH PRINTER, IN FOX DAVE

Instrumentation is provided to the State of Mississippi for the purpose of conducting the Breathalyzer Program. The State of Mississippi is authorized to use the instrument for the purpose of the Breathalyzer Program.

STATE OF MISSISSIPPI
DEPARTMENT OF TRANSPORTATION
BREATHALYZER PROGRAM

INSTRUMENT OPERATOR CARD

This instrument is provided to the State of Mississippi for the purpose of conducting the Breathalyzer Program. The State of Mississippi is authorized to use the instrument for the purpose of the Breathalyzer Program.

Operator: [Name] License: [Number]
Serial No: 200197
Date Issued 07/15/2020 Date Expires 07/15/2022

