



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

RECEIVED
By Tracy Crews at 8:33 am, Jul 29, 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 07/27/2021
LOCATION OF INSTRUMENT (STREET AND CITY) 600 East Walnut Columbia		TIME OF INSPECTION 7:01 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 ← .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) 2	(.05-.09) 2	(.10-.14) 3	(.15-.19) 4	(OVER .19) 4
-------------------	------------------	--------------------	--------------------	--------------------	---------------------

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

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 00103

Temp Date Time ^{s/} 210L

Air Blank:
07/27/21 19:03 .000
Calibration Check:
26 07/27/21 19:03 .099

Subject Name

Test # 1

Subject I.D.

Hoehne, Mark D. 2028

Operator Name, I.D.

Location

AS IV Serial no: 111769
Version no: 532B

TEST RECORD 00104

Temp Date Time ^{s/} 210L

Air Blank:
07/27/21 19:04 .000
Calibration Check:
27 07/27/21 19:04 .100

}}}}}}}}}}}}}}}}}}}}5

Subject I.D.

Test # 2

Operator Name, I.D.

Hoehne, Mark D. 2028

Location

AS IV Serial no: 111769
Version no: 532B

TEST RECORD 00105

Temp Date Time ^{s/} 210L

Air Blank:
07/27/21 19:06 .000
Calibration Check:
27 07/27/21 19:06 .100

Subject Name

Test # 3

Subject I.D.

Hoehne, Mark D. 2028

Operator Name, I.D.

Location

AS IV Serial no: 111769
Version no: 532B

TEST RECORD 00106

Temp Date Time ^{s/} 210L

VOID: RFI
12 07/27/21 19:03

Subject Name

RFI Check

Subject I.D.

Hoehne, Mark D. 2028

Operator Name, I.D.

Location

AS IV Serial no: 111769
Version no: 532B

TEST RECORD 00107

Temp Date Time ^{s/} 210L

Air Blank:
07/27/21 19:10 .000
Subject Test: Auto
27 07/27/21 19:10 .000

Subject Name

Self Test

Subject I.D.

Hoehne, Mark D. 2028

Operator Name, I.D.

Location



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: 22-Jul-2020

Lot # AG020401 Model 108cacd

<u>Exp. Date</u>	<u>Cyl. Type</u>	<u>Component</u>	<u>Certified Concentration</u>
22-Jul-2022	108	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>
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: 2020.07.22 18:29:45 -05:00
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



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

2

**PERMIT
TYPE II**

MARK D HOEHNE

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 6/15/2020

NUMBER 200187

EXPIRES 6/15/2022

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

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 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 HOEHNE, MARK
Permit No 200187
Date Issued 6/15/2020 Date Expires 6/15/2022