



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

RECEIVED
By Tracy Crews at 10:05 am, Oct 04, 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 111771 | NAME OF AGENCY Jasper County Sheriff Office | DATE OF INSPECTION 10/02/2021 |
| LOCATION OF INSTRUMENT (STREET AND CITY) Jasper County Sheriff Office 231 S. Main Street Carthage, MO 64836 | | TIME OF INSPECTION 3:45 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 Intoximeters LOT # AG009202 EXP. DATE 04/01/2022

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 ➔ .080

TEST 2 ➔ .077

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) | 0 | (OVER .19) | 0 |
|----------|---|---------|---|-----------|---|-----------|---|-----------|---|------------|---|

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
Sgt. Christopher Calvin #349

PRINT NAME
Sgt. Christopher Calvin #349

TYPE II PERMIT NUMBER/EXPIRATION DATE
200084/ 02/11/2022

TELEPHONE NUMBER
(417) 529-6823

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: 111771
Version no: 532B

TEST RECORD 00200

Temp Date Time 210L
s/

Air Blank:
10/02/21 03:46 .000
Calibration Check:
22 10/02/21 03:46 .000

Subject Name

Acc Check #1

Subject I.D.

Chris Calvin #349

Operator Name, I.D.

200084-02-11-22

Location

AS IV Serial no: 111771
Version no: 532B

TEST RECORD 00201

Temp Date Time 210L
s/

Air Blank:
10/02/21 03:48 .000
Calibration Check:
22 10/02/21 03:48 .077

Subject Name

Acc Check #2

Subject I.D.

Chris Calvin #349

Operator Name, I.D.

200084-02-11-22

Location

AS IV Serial no: 111771
Version no: 532B

TEST RECORD 00202

Temp Date Time 210L
s/

Air Blank:
10/02/21 03:50 .000
Calibration Check:
22 10/02/21 03:50 .000

Subject Name

Acc Check #3

Subject I.D.

Chris Calvin #349

Operator Name, I.D.

200084-02-11-22

Location

AS IV Serial no: 111771
Version no: 532B

TEST RECORD 00203

Temp Date Time 210L
s/

VOID: RFI
12 10/02/21 03:51

Subject Name

RFI Test

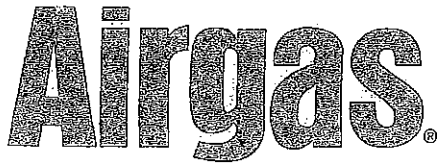
Subject I.D.

Chris Calvin #349

Operator Name, I.D.

200084-02-11-22

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: 2-Apr-2020

Lot # AG009202 Model 55cacd

| <u>Exp. Date</u> | <u>Cyl. Type</u> | <u>Component</u> | <u>Certified Concentration</u> |
|------------------|------------------|------------------|--------------------------------|
| 1-Apr-2022 | 55 | Ethanol | 0.082 ± 0.002 BrAC (223 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: 2020.04.02 20:00:41 -06:00
Reason: Dry gas standard certification of analysis
Location: Airgas USA LLC (Lab)

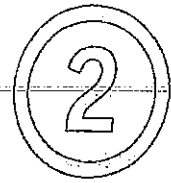
Approved for Release: _____

Rod Marsala

ISO 17025:2005 A2LA accredited. Certificate Number 3082.06
ISO 17034:2016 A2LA accredited. Certificate Number 3082.07



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



PERMIT
 TYPE II

CHRISTOPHER CALVIN

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, INTOXILYZER 8000

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 2/11/2020

NUMBER 200084

EXPIRES 2/11/2022

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

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 CALVIN, CHRISTOPHER
 Permit No 200084
 Date Issued 2/11/2020 Date Expires 2/11/2022

