



RECEIVED
 By Tracy Crews at 11:56 am, Nov 24, 2021

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 111780	NAME OF AGENCY Kansas City Police Department	DATE OF INSPECTION 11/12/2021
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LOCATION OF INSTRUMENT (STREET AND CITY) 9701 MARION PARK DR, KANSAS CITY	TIME OF INSPECTION 1448 Hours
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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>AG010103</u> EXP. DATE <u>04/10/2022</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 ← .081	TEST 2 ← .081	TEST 3 ← .080
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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	0	(.0-.04)	0	(.05-.09)	0	(.10-.14)	0	(.15-.19)	0	(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).

Instrument meets all DOHSS standards and guidelines.

INSPECTING OFFICER

SIGNATURE <i>Shawn Davis</i>	PRINT NAME Shawn Davis
TYPE II PERMIT NUMBER/EXPIRATION DATE 210059 / 04/06/2023	TELEPHONE NUMBER () 816-234-5000

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: 111780
Version no: 532B

TEST RECORD 00556

Temp Date Time ^{9/} 210L

Air Blank:
11/12/21 14:48 .000
Calibration Check:
18 11/12/21 14:48 .081

Subject Name

Test #1

Subject I.D.

Operator Name, I.D.

Davis 210059

Location

AS IV Serial no: 111780
Version no: 532B

TEST RECORD 00557

Temp Date Time ^{9/} 210L

Air Blank:
11/12/21 14:49 .000
Calibration Check:
18 11/12/21 14:49 .081

Subject Name

Test #2

Subject I.D.

Operator Name, I.D.

Davis 210059

Location

AS IV Serial no: 111780
Version no: 532B

TEST RECORD 00558

Temp Date Time ^{9/} 210L

Air Blank:
11/12/21 14:51 .000
Calibration Check:
20 11/12/21 14:51 .080

Subject Name

Test #3

Subject I.D.

Operator Name, I.D.

Davis 210059

Location

AS IV Serial no: 111780
Version no: 532B

TEST RECORD 00559

Temp Date Time ^{9/} 210L

VOID: RFI
12 11/12/21 14:52

Subject Name

RFI Test

Subject I.D.

Operator Name, I.D.

Davis 210059

Location



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



PERMIT
TYPE II

SHAWN E. DAVIS

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 4/6/2021
NUMBER 21A050
EXPIRES 4/6/2023

W. S. Davis
DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Shawn E. Davis
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MS-96 0771 (6-10)

STATE OF MISSOURI
DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM
INSTRUMENT OPERATOR CARD

The licensed commissioner or authorized representative is authorized to operate an excluded portable alcohol instrument for the determination of the alcoholic content of breath from a sample of expired air.

Operator: **DAVIS SHAWN** Date Expires: **4/6/2023**
Permit No: **210059**
Date Issued: **4/6/2021**



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: 13-Apr-2020

Lot # AG010103 Model 108cacc

Exo. Date 10-Apr-2022
Cvl. Type 108
Component Ethanol Nitrogen
Certified Concentration 0.082 ± 0.002 BRAC (223 ppm)
Balance

Certification Traceable to N.I.S.T. RGM and to CRM Ethanol Standards:

RGM Serial No.	Concentration	RGM Serial No.	Concentration
EB0010681	392.1 ppm	EB0010603	383.0 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
CRM Serial No.	Concentration	CRM Serial No.	Concentration
CC434668	800.0 ppm	0056649	390.1 ppm
CC234503	253.0 ppm	0056662	150.2 ppm

Analytical Method: NDIR

Reliable checked by O. Kelly Cusick
Date: 2022.04.14 13:37:50 -0500
Reason: Dry gas standard certification of analysis
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