

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

-865.52.				
Complete this report in duplicate at the time of the Send copy to Department of Health and Senior S	* · · · · · · · · · · · · · · · · · · ·	ance check, and whenever instrument is repaired.		
ALCO SENSOR IV SN 030794	NAME OF AGENCY St. Charles City PD	DATE OF INSPECTION 06/28/2022		
LOCATION OF INSTRUMENT (STREET AND CITY) 1781 Zumbehl Rd St. Charles	**************************************	TIME OF INSPECTION 3:14 pm		
_ -	, ,	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	☑ COMPRESSE	D ETHANOL-GAS MIXTURE		
STANDARD SUPPLIER Intoximeters	LOT # AG207502	EXP. DATE 03/16/2024		
SIMULATOR TEMPERATURE (34°C ± 0.2°C	C) SIM. SN	SIM. NIST EXP DATE		
less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED) O.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE O.080% STANDARD - MUST READ BETWEEN 0.076% and 0.084% INCLUSIVE O.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE				
TEST 1 0.99	ST 2 ◆ 0.99	TEST 3 0.99		
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 (004) 0 (.4	0509) 0 (.1014) 0	(.1519) 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).				
N/A				
INSPECTING OFFICER	•			
SIGNATURE	,	PRINT NAME		
TYPE II PERMIT NUMBER/EXPIRATION DATE		Kenneth Enz		
210120 6/4/2023		TELEPHONE NUMBER (636) 949-3300		
Return completed report to the: Breath Alcoh	ol Program, MO Department of Health an			

by mail, fax, or email.



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: 17-Mar-2022

Lot # AG207502 Model 108

Exp Date 16-Mar-2024 Cyl. Type 108 Component Ethanol **Certified Concentration**

0.100 ± 2% BrAC (272 ppm)

Nitrogen

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

RGM Serial No. Concentration **RGM Serial No.** Concentration EB0010581 391.8 ppm EB0010603 392.5 ppm EB0010570 259.8 ppm EB0010559 258.9 ppm EB0010285 209.0 ppm EB0010562 104.2 ppm EB0010561 103.7 ppm EB0010579 52.94 ppm EB0010681 52.22 ppm

CRM Serial No. CC727481

Concentration 800.0 ppm 253.0 ppm

CRM Serial No. CC727493

CC727498

Concentration 390.0 ppm 150.0 ppm

Analytical Method: NDIR

CC727496

Digitally signed by:Quality Control Reason:Dry gas standard certification of analysis Location:Airgas USA LLC (Lab) Date:03.18.2022 13:45

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



PERMIT TYPE II KENNETH ENZ

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 EC/IR II

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	6/4/2021	want	
		DIRECTOR OF STATE PUBLIC HEALTH LABORATORY	
NUMBER	210120	01/21/6/	
EXPIRES 6/4/2023	Kall Mush		
		DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES	

MO 580-0771 (6-10)

LAB-4 (R6-10)



AS IV Serial no: 030794 Version no: 5320

TEST RECORD 00236

9/ Time 210L Temp Date

Air Blank: 06/28/22 15:14 .000

Calibration Check: 22 06/28/22 15:14 .099

Subject Name

est

Subject I.D.

Operator Name, I.D.

Enz 210120

Location

1781 Zumbehl Rd

St. Charles

AS IV Serial no: 030794 Version no: 5320

TEST RECORD 00237

210L Time Date

Air Blank:

06/28/22 15:16 .000

Calibration Check:

23 06/28/22 15:16 .099

Subject Name

Test

Subject I.D.

Operator Name, I.D.

210120 En2

Location

1781 Zumbehl Rd

St. Charles

AS IV Serial no: 030794 Version no: 5320

TEST RECORD 00238

Time 210L Temp Date

Air Blank:

06/28/22 15:17 .000

Calibration Check:

23 06/28/22 15:17 .099

Subject Name

Test

Subject I.D.

Operator Name, I.D.

Fn2

210120

Location

1781 Zumbehl

St. Charles

AS IV Serial no: 030794 Version no: 5320

TEST RECORD 00239

210L Time

UDID: RFI

Date

12 06/28/22 15:19

Subject Name

Temp

Check RFI

Subject I.D.

Operator Name, I.D.

210120 En2

Location

1781 Zumbehl Fd

84. Charles