

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

| Complete this report in d Send copy to Departmen | | | | | ver instrument is repaired. | |
|--|-------------------|--------------------------------------|---------------------------------------|---------------------------------|-----------------------------|--|
| ALCO SENSOR IV SN 034874 | | NAME OF AGENCY St. Charles County PD | | DATE OF 03/17/2 | INSPECTION 2022 | |
| LOCATION OF INSTRUMENT (101 Sheriff Dierker Co | | | TIME OF | INSPECTION | | |
| 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 DIS | | | | ÷. | | |
| BREATH ALCOHOL AC | CURACY STANDAR | RDS | · · · · · · · · · · · · · · · · · · · | | | |
| ☐ SIMULATOR SOLUTION ☐ COMPRESSED ETHANOL-GAS MIXTURE | | | | | URE | |
| ☑ STANDARD SUPPLI | IER Intoximeters | | LOT # AG109701 | EXP. DATE <u>04/07/2</u> | 2023 | |
| ☐ SIMULATOR TEMPE | ERATURE (34°C ± 0 | .2°C) S | IM. SN | SIM. NIST EXI | P 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 → 0.080 | | TEST 2 ♥ 0.080 | | TEST 3 	 0.081 | | |
| ☑ RFI DETECTOR OPE | RATING | | | | | |
| INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT: (DO NOT INCLUDE SELF-ADMINISTERED TESTS) | | | | | | |
| REFUSALS | (004) | (.0509) | (.1014) | (.1519) | (OVER .19) | |
| List any new parts and d established limits (use of | | | 1 1 | the instrument to operat | e satisfactorily and within | |
| INSPECTING OFFICER | | | | | | |
| SIGNATURE 663 | | | | Mike Johnson | | |
| TYPE II PERMINNUMBER/EXPIRATION DATE 200198 / 07-08-2023 | | | | TELEPHONE NUMBER (636) 949-3000 | | |
| 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: 034874 Version no: 532C TEST RECORD 00129 7/ Temp Date Time 210L Air Blank: 03/17/22 18:13 .000 Calibration Check: 27 03/17/22 18:13 .000 | AS IV Serial no: 034874 Version no: 532C TEST RECORD 00130 9/ Temp Date Time 210L Air Blank: 03/17/22 18:14 .000 Calibration Check: 27 03/17/22 18:14 .000 | AS IV Serial no: 034874 Version no: 532C TEST RECORD 00131 Serial no: 934874 Temp Date Time 2101 Air Blank: 03/17/22 18:16 .000 Calibration Check: 27 03/17/22 18:16 .081 |
|---|--|--|
| Subject Name Test # 1 | Subject Name | Subject Name [Feel #] |
| Subject I.D. | Test #2 | Subject I.D. |
| | Subject I.D. | |
| Operator Name, I.D. | | Operator Name, I.D. |
| Cpt. Johnson 200798 | Operator Name, I.D. | col. Johnson Zenas |
| Location SCLED | Location Lever | Location |
|) COID | Scies | <u> 50.10</u> |
| | AS IV Serial not 834874 Uersion not 532C TEST RECORD 80132 Jemp Date Time 210L UOID: RFI 12 83/17/22 18:17 Subject Name Kf2 144 Subject I.D. Operator Name: I.D. Coldolus Jung: Location Subject Subject I.D. | |
| | Temp Date Time 210L Air Blank: 03/17/22 18:18 .000 Subject Test: Auto 28 03/17/22 18:18 .000 Subject Name Subject I.D. Uperator Name: I.D. Gh. Johns Joing Ibcation Suph | AS IU Serial no: 034874 Version no: 532C |



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: 7-Apr-2021

Lot # AG109701 Model 108cacd

Exp. Date 7-Apr-2023 Cyl. Type

Component Ethanol

Certified Concentration

Nitrogen

 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 EB0010581 392.1 ppm EB0010570 259.8 ppm EB0010285 208.0 ppm EB0010561 103.6 ppm EB0010681 52.12 ppm

Concentration 800.0 ppm 253.0 ppm

RGM Serial No. EB0010603 EB0010559 EB0010595 EB0010562 EB0010579

CRM Serial No.

CC727493

CC727498

258.2 ppm 208.3 ppm 104.2 ppm 52.81 ppm Concentration

390.0 ppm

150.0 ppm

393.0 ppm

Concentration

Analytical Method:

CRM Serial No.

CC727481

CC727496

NDIR

Digitally signed by Quality Control Date: 2021.04.07 17:42:01 -05:00 Reason: Dry gas standard certification of analysis Location: Airgas USA LLC (Lab)

Approved for Release:

Norl Marsola 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

MIKE JOHNSON

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

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.

| DATE7/8/2020 | white | | |
|------------------|--|--|--|
| JA(L | DIRECTOR OF STATE PUBLIC HEALTH LABORATORY | | |
| NUMBER 200198 | | | |
| EXPIRES 7/8/2022 | for William | | |
| -/Will 16-09 | DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES | | |
| | 1.45 4.000 | | |

MO 580-0771 (6-10)

LAB-4 (R6-10)



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 JOHNSON, MIKE

Permit No 200198

Date Issued 7/8/2020 Date Expires 7/8/2022

