



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
STATE PUBLIC HEALTH LABORATORY

**ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT**

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 034874	NAME OF AGENCY St. Charles County PD	DATE OF INSPECTION 12/27/2022
LOCATION OF INSTRUMENT (STREET AND CITY) 101 Sheriff Dierker Court, O'fallon, MO 63366		TIME OF INSPECTION 10:39 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 # AG109701 EXP. DATE 04/07/2023

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 ← .083      TEST 2 ← .082      TEST 3 ← .083

- 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)    1    (.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 663      PRINT NAME  
Mike Johnson

TYPE II PERMIT NUMBER/EXPIRATION DATE      TELEPHONE NUMBER  
220150 / 05-25-2024      (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 00211

Temp Date Time <sup>°/</sup> 210L

Air Blank:  
12/27/22 10:39 .000  
Calibration Check:  
24 12/27/22 10:39 .003

Subject Name

test #1  
Subject I.D.

Operator Name, I.D.

Cpl. Johnson 220150  
Location

SCRD

AS IV Serial no: 034874  
Version no: 532C

TEST RECORD 00212

Temp Date Time <sup>°/</sup> 210L

Air Blank:  
12/27/22 10:40 .000  
Calibration Check:  
25 12/27/22 10:40 .002

Subject Name

Test #2  
Subject I.D.

Operator Name, I.D.

Cpl. Johnson 220150  
Location

SCRD

AS IV Serial no: 034874  
Version no: 532C

TEST RECORD 00213

Temp Date Time <sup>°/</sup> 210L

Air Blank:  
12/27/22 10:41 .000  
Calibration Check:  
25 12/27/22 10:41 .003

Subject Name

test #3  
Subject I.D.

Operator Name, I.D.

Cpl. Johnson 220150  
Location

SCRD

AS IV Serial no: 034874  
Version no: 532C

TEST RECORD 00214

Temp Date Time <sup>°/</sup> 210L

UCID: RFI  
12 12/27/22 10:42

Subject Name

RFS Test

Subject I.D.

Operator Name, I.D.

Cpl. Johnson 220150

Location

SCRD

AS IV Serial no: 034874  
Version no: 532C

TEST RECORD 00215

Temp Date Time <sup>°/</sup> 210L

Air Blank:  
12/27/22 10:43 .000  
Subject Test: Auto  
26 12/27/22 10:43 .000

Subject Name

Self-Test

Subject I.D.

Operator Name, I.D.

Cpl. Johnson 220150

Location

SCRD



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 108cadd

<u>Exp. Date</u>	<u>Cyl. Type</u>	<u>Component</u>	<u>Certified Concentration</u>
7-Apr-2023	108	Ethanol Nitrogen	0.082 ± 0.002 BrAC (223 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>
CG727481	800.0 ppm	CG727493	390.0 ppm
CG727496	253.0 ppm	CG727498	150.0 ppm

Analytical Method: 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:

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.

DATE 5/25/2022

NUMBER 220150

EXPIRES 5/25/2024

MO 680-9771 (6-10)

*Mike Massman*

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

*David J. Nelson*

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (16-10)

 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 JOHNSON, MIKE  
Permit No 220150  
Date Issued 5/25/2022 Date Expires 5/25/2024

