



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

RECEIVED
 By Tracy Crews at 7:35 am, Jul 21, 2022

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 070763	NAME OF AGENCY Park Hills Police Department	DATE OF INSPECTION 07/20/2022
LOCATION OF INSTRUMENT (STREET AND CITY) 7 Municipal Dr. Park Hills MO 63601		TIME OF INSPECTION 09:01

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>AG110402</u> EXP. DATE <u>04/14/2023</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 .078	TEST 2 .077	TEST 3 .077
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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)	0
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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).

a new Printer was used for the first time. The old printer was malfunctioning, it was sent to the Missouri Safety Center and replaced.

INSPECTING OFFICER

SIGNATURE 	PRINT NAME J. Roark
TYPE II PERMIT NUMBER/EXPIRATION DATE 220169 - 06/24/2024	TELEPHONE NUMBER 431-3122

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: 070763
Version no: 532B

TEST RECORD 01027

Temp Date Time ^{g/} 210L

Air Blank:
07/20/22 09:01 .000
Calibration Check:
22 07/20/22 09:01 .078

Subject Name

Test

Subject I.D.

1

Operator Name, I.D.

S. Rowse

Location

*7 municipal dr
Para Hills PD*

AS IV Serial no: 070763
Version no: 532B

TEST RECORD 01028

Temp Date Time ^{g/} 210L

Air Blank:
07/20/22 09:04 .000
Calibration Check:
24 07/20/22 09:04 .077

Subject Name

Test

Subject I.D.

2

Operator Name, I.D.

S. Rowse

Location

*7 municipal dr
Para Hills PD*

AS IV Serial no: 070763
Version no: 532B

TEST RECORD 01029

Temp Date Time ^{g/} 210L

Air Blank:
07/20/22 09:11 .000
Calibration Check:
24 07/20/22 09:11 .077

Subject Name

Test

Subject I.D.

3

Operator Name, I.D.

S. Rowse

Location

*7 municipal dr
Para Hills PD*

AS IV Serial no: 070763
Version no: 532B

TEST RECORD 01030

Temp Date Time ^{g/} 210L

VOID: RFI
12 07/20/22 09:14

Subject Name

Test

Subject I.D.

RFI

Operator Name, I.D.

S. Rowse

Location

*7 municipal dr
Para Hills PD*



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: 14-Apr-2021

Lot # AG110402 **Model** 108caccd

Exp. Date

14-Apr-2023

Cyl. Type

108

Component

Ethanol
Nitrogen

Certified Concentration

0.080 ± 0.002 BrAC (218 ppm)
Balance

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

RGM Serial No.

EB0010581

Concentration

392.1 ppm

EB0010570

259.8 ppm

EB0010285

208.0 ppm

EB0010561

103.6 ppm

EB0010681

52.12 ppm

RGM Serial No.

EB0010603

Concentration

393.0 ppm

EB0010559

258.2 ppm

EB0010595

208.3 ppm

EB0010562

104.2 ppm

EB0010579

52.81 ppm

CRM Serial No.

CC434668

Concentration

800.0 ppm

CC234503

253.0 ppm

CRM Serial No.

0056649

Concentration

390.1 ppm

0056662

150.2 ppm

Analytical Method:

NDIR

Digitally signed by Quality Control
Date: 2021.04.14 18:39:50 -05:00
Reason: Dry gas standard certification of analysis
Location: Airgas USA LLC (Lab)

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
JARED ROARK

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 DMT

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 6/24/2022

NUMBER 220169

EXPIRES 6/24/2024

Mike Massman

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Paula J. Nielson

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES



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 ROARK, JARED
Permit No 220169
Date Issued 6/24/2022 **Date Expires** 6/24/2024

