



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

RECEIVED
 By Tracy Crews at 8:37 am, May 31, 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 096228	NAME OF AGENCY Normandy Police Department	DATE OF INSPECTION 05/27/2022
LOCATION OF INSTRUMENT (STREET AND CITY) 7700 Natural Bridge Road, Normandy		TIME OF INSPECTION 10:23 pm

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>Airgas</u>	LOT # <u>AG127802</u> EXP. DATE <u>10/05/2023</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 ➔ .081	TEST 2 ➔ .081	TEST 3 ➔ .081
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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-.04)	(.05-.09)	(.10-.14)	(.15-.19)	(OVER .19)
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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).

INSPECTING OFFICER

SIGNATURE 	PRINT NAME PO Thomas M. Moore #325
TYPE II PERMIT NUMBER/EXPIRATION DATE 200200 07/08/2022	TELEPHONE NUMBER (314) 385-3300

Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office by mail, fax, or email.

Temp Date Time

Air Blank:

05/27/22 22:23 .000

Calibration Check:

20 05/27/22 22:23 .081

Subject Name

BAC MAINT

Subject I.D.

Operator Name, I.D.

MOORE 325 / 200200

Location

7700 NATURAL BR RD

NORMANDY, MO 63121

AS IV Serial no: 096228
Version no: 532B

TEST RECORD 00997

Temp Date Time ^{s/} 210L

Air Blank:

05/27/22 22:26 .000

Subject Test: Man

22 05/27/22 22:26 .081

Subject Name

BAC MAINT

Subject I.D.

Operator Name, I.D.

MOORE 325 / Permit # 200200

Location

7700 NATURAL BR RD

NORMANDY, MO 63121

AS IV Serial no: 096228
Version no: 532B

TEST RECORD 00998

Temp Date Time ^{s/} 210L

Air Blank:

05/27/22 22:28 .000

Subject Test: Man

23 05/27/22 22:28 .081

Subject Name

BAC MAINT

Subject I.D.

Operator Name, I.D.

MOORE 325 / Permit # 200200

Location

7700 NATURAL BR RD

NORMANDY, MO 63121

AS IV Serial no: 096228
Version no: 532B

TEST RECORD 00999

Temp Date Time ^{s/} 210L

VOID: RFI

12 05/27/22 22:30

Subject Name

BAC MAINT

Subject I.D.

Operator Name, I.D.

MOORE 325 / PERMIT # 200200

Location

7700 NATURAL BR RD

NORMANDY, MO 63121



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: 5-Oct-2021

Lot # AG127802 **Model** 108cacd

Exp. Date

5-Oct-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

EB0010570

EB0010285

EB0010561

EB0010681

Concentration

392.1 ppm

259.8 ppm

208.0 ppm

103.6 ppm

52.12 ppm

RGM Serial No.

EB0010603

EB0010559

EB0010595

EB0010562

EB0010579

Concentration

393.0 ppm

258.2 ppm

208.3 ppm

104.2 ppm

52.81 ppm

CRM Serial No.

CC434668

CC234503

Concentration

800.0 ppm

253.0 ppm

CRM Serial No.

0056649

0056662

Concentration

390.1 ppm

150.2 ppm

Analytical Method:

NDIR

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

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**PERMIT
 TYPE II**

THOMAS M. MOORE

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 7/8/2020

NUMBER 200200

EXPIRES 7/8/2022

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

LAB-4 (R6-10)



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 MOORE, THOMAS
 Permit No 200200
 Date Issued 7/8/2020 Date Expires 7/8/2022

