



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 097412	NAME OF AGENCY Kansas City Police Department	DATE OF INSPECTION 10/26/2022
LOCATION OF INSTRUMENT (STREET AND CITY) 9701 MARION PARK DR, KANSAS CITY		TIME OF INSPECTION 2140 hours

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 INTOXIMETERS	LOT # AG132803 EXP. DATE 11/24/2023
<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 0.081	TEST 2 0.082	TEST 3 0.082
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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	5	(0-.04)	0	(.05-.09)	0	(.10-.14)	3	(.15-.19)	1	(OVER .19)	4
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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).

Instrument meets all DOHSS standards and guidelines

INSPECTING OFFICER

SIGNATURE 	PRINT NAME Douglas Davidson
TYPE II PERMIT NUMBER/EXPIRATION DATE 210058 04/06/2022	TELEPHONE NUMBER () 816-234-5000

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: 897412
Version no: 532B

TEST RECORD 88092

Temp Date Time 2100

Air Blank: 18/26/22 21:43 .000

Calibration Check: 28 18/26/22 21:43 .081

Subject Name

Test # 1

Subject I.D.

Operator Name, I.D.

Davidson S646

Location

210058 04/06/2023

AS IV Serial no: 897412
Version no: 532B

TEST RECORD 88093

Temp Date Time 2100

Air Blank: 18/26/22 21:45 .000

Calibration Check: 29 18/26/22 21:45 .082

Subject Name

Test #

Subject I.D.

Operator Name, I.D.

Davidson S646

Location

210058 04/06/2023

AS IV Serial no: 897412
Version no: 532B

TEST RECORD 88094

Temp Date Time 2100

Air Blank: 18/26/22 21:47 .000

Calibration Check: 21 18/26/22 21:47 .002

Subject Name

Test # 3

Subject I.D.

Operator Name, I.D.

Davidson S646

Location

210058 04/06/2023

AS IV Serial no: 897412
Version no: 532B

TEST RECORD 88095

Temp Date Time 2100

UWIDE R? 12 18/26/22 21:48

Subject Name

RFI Test

Subject I.D.

Operator Name, I.D.

Davidson S646

Location

210058 04/06/2023



STATE OF MISSOURI
DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM



Airgas

Certificate of Analysis

Airgas USA LLC (LAB)
3500 Bernard Street
St. Louis, Mo. 63103
Ph: (314) 533-3100
Fax: (314) 533-7328

Test Date: 29-Nov-2021

DOUGLAS DAVIDSON

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, INTOXILYZER 8000

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 4/6/2021

NUMBER 210058

EXPIRES 4/6/2023

MO 960371 (6-19)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

[Signature]
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-684-10

Customer Name
Exclusive Supplier
Intoximeters, Inc.
2081 Craig Road
St. Louis, Mo 63146

Lot # AG132803 Model 108

Exp Date
24-Nov-2023

Cyl Type
108

Component
Ethanol
Nitrogen

Certified Concentration
0.082 ± 0.002 B/A/C (223 ppm)

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

RGM Serial No.	Concentration	RGM Serial No.	Concentration
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	EB0010552	104.2 ppm
EB0010681	52.12 ppm	EB0010579	52.81 ppm

CRM Serial No.	Concentration	CRM Serial No.	Concentration
CC434668	800.0 ppm	0056649	390.1 ppm
CC234503	253.0 ppm	0056662	150.2 ppm

Analytical Method: NDIR

Digitally signed breathalyzer control
is accurate and tamper certification of analysis
Date: 11-30-2021 13:42
DN: cn=Rod Marsala

Approved for Release:

[Signature]
Rod Marsala

STATE OF MISSOURI
DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM
INSTRUMENT OPERATOR CARD

The named operator is authorized to operate an evidential breath analyzer instrument for the determination of the alcoholic content in breath from or either at the mouth or in the exhaled air of a person.

Operator: **DAVIDSON, DOUGLAS**
Permit No: **210058**
Date Issued: **4/6/2021** Date Expires: **4/6/2023**

ISO 17025:2017 A2LA accredited. Certificate Number 3082.06
ISO 17034:2016 A2LA accredited. Certificate Number 3082.07