

**RECEIVED**

By Tracy Crews at 2:05 pm, May 16, 2022

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 097421 NAME OF AGENCY BRANSON WEST DATE OF INSPECTION 05/16/2022

LOCATION OF INSTRUMENT (STREET AND CITY) 110 SILVER LADY LN., BRANSON WEST MO 65737 TIME OF INSPECTION 4:33 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** SIMULATOR SOLUTION COMPRESSED ETHANOL-GAS MIXTURE STANDARD SUPPLIER INTOXIMETERS LOT # AG127903 EXP. DATE 10/06/2023 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 .099

TEST 2 .101

TEST 3 .0100

 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

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

SGT AARON HOEFT

TYPE II PERMIT NUMBER/EXPIRATION DATE

210259 11/18/2023

TELEPHONE NUMBER

(417) 272-3400

**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: 097421  
Version no: 532B

TEST RECORD 00836

Temp Date Time <sup>a/</sup> 210L

Air Blank:  
05/16/22 07:45 .000  
Calibration Check:  
21 05/16/22 07:45 .099

Subject Name

Test 1

Subject I.D.

test 1

Operator Name, I.D.

Hoett 210259

Location

BWPD

AS IV Serial no: 097421  
Version no: 532B

TEST RECORD 00837

Temp Date Time <sup>a/</sup> 210L

Air Blank:  
05/16/22 07:46 .000  
Calibration Check:  
21 05/16/22 07:46 .101

Subject Name

Test 1

Subject I.D.

test 1

Operator Name, I.D.

Hoett 210259

Location

BWPD

AS IV Serial no: 097421  
Version no: 532B

TEST RECORD 00838

Temp Date Time <sup>a/</sup> 210L

Air Blank:  
05/16/22 07:48 .000  
Calibration Check:  
22 05/16/22 07:48 .100

Subject Name

Test 1

Subject I.D.

test 1

Operator Name, I.D.

Hoett 210259

Location

BWPD

AS IV Serial no: 097421  
Version no: 532B

TEST RECORD 00839

Temp Date Time <sup>a/</sup> 210L

VOID: RFI  
12 05/16/22 07:50

Subject Name

Test RFI

Subject I.D.

test RFI

Operator Name, I.D.

Hoett 210259

Location

BWPD



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:** 6-Oct-2021

**Lot # AG127903 Model 108cadd**

<b>Exp. Date</b>	<b>Cyl. Type</b>	<b>Component</b>	<b>Certified Concentration</b>
6-Oct-2023	108	Ethanol Nitrogen	0.100 ± 2% BrAC (272 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>
CC434668	800.0 ppm	0056649	390.1 ppm
CC234503	253.0 ppm	0056662	150.2 ppm

**Analytical Method:** NDIR

Digitally signed by Quality Control  
 Date: 2021.10.07 19:22:40 -05:00  
 Reason: Dry gas standard certification of analysis  
 Location: Airgas USA LLC (Lab)

Approved for Release: \_\_\_\_\_

*Rod Marsala*  
 \_\_\_\_\_  
 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**  
**AARON HOEFT**

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 11/18/2021

NUMBER 210259

EXPIRES 11/18/2023

*Laura Q. Day*

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

*Donald A. Ramsey*

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 HOEFT, AARON  
Permit No 210259  
Date Issued 11/18/2021 Date Expires 11/18/2023

