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By Tracy Crews at 3:26 pm, Aug 01, 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 <b>100289</b>	NAME OF AGENCY <b>Kansas City Police Department</b>	DATE OF INSPECTION <b>07/18/22</b>
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LOCATION OF INSTRUMENT (STREET AND CITY) <b>9701 MARION PARK DR, KANSAS CITY</b>	TIME OF INSPECTION <b>2155</b>
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**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 # AG132803 EXP. DATE 11/24/2023

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 ←	<b>.081</b>	TEST 2 ←	<b>.081</b>	TEST 3 ←	<b>.081</b>
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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	<b>7</b>	(.0-.04)	<b>0</b>	(.05-.09)	<b>3</b>	(.10-.14)	<b>2</b>	(.15-.19)	<b>3</b>	(OVER .19)	<b>1</b>
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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  
*P.O. Infranca*

PRINT NAME  
**P.O. Infranca 5670**

TYPE II PERMIT NUMBER/EXPIRATION DATE  
**210128 06/21/2023**

TELEPHONE NUMBER  
**( ) 816-382-5897**

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: 100289  
Version no: 532B

TEST RECORD 00783

Temp Date Time 210L

Air Blank: 07/18/22 21:47 .000

Calibration Check: 33 07/18/22 21:47 .081

Subject Name

Test #1

Subject I.D.

Operator Name, I.D.

Infrance 210125

Location

KCPD Traffic Div

AS IV Serial no: 100289  
Version no: 532B

TEST RECORD 00784

Temp Date Time 210L

Air Blank: 07/18/22 21:50 .000

Calibration Check: 32 07/18/22 21:50 .081

Subject Name

Test #2

Subject I.D.

Operator Name, I.D.

Infrance 210125

Location

KCPD Traffic Div

AS IV Serial no: 100289  
Version no: 532B

TEST RECORD 00785

Temp Date Time 210L

Air Blank: 07/18/22 21:52 .000

Calibration Check: 32 07/18/22 21:52 .081

Subject Name

Test #3

Subject I.D.

Operator Name, I.D.

Infrance 210125

Location

KCPD Traffic Div

AS IV Serial no: 100289  
Version no: 532B

TEST RECORD 00786

Temp Date Time 210L

VOID: RFI

12 07/18/22 21:55

Subject Name

RFI

Subject I.D.

Operator Name, I.D.

Infrance 210125

Location

KCPD Traffic Div



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



Certificate of Analysis

PERMIT  
TYPE II

JORDAN INFRANCA

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 6/21/2021

NUMBER 210128

EXPIRES 6/21/2023

MO 900-071 (6-19)

*Laura A. Day*  
DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

*[Signature]*  
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES  
LAB-4 (6-19)

Customer Name  
Exclusive Supplier  
Inoximeters, Inc.  
2081 Craig Road  
St. Louis, MO 63146

Lot # AG132803 - Model 108

Test Date: 29-Nov-2021

Airgas USA LLC (LAB)  
3500 Bernard Street  
St. Louis, Mo. 63109  
Ph: (314) 533-3100  
Fax: (314) 533-7328

Exp Date	Cyl. Type	Component	Certified Concentration
24-Nov-2023	108	Ethanol Nitrogen	0.082 ± 0.002 BrAC (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	EB0010599	258.2 ppm
EB0010295	208.0 ppm	EB0010595	208.3 ppm
EB0010581	103.6 ppm	EB0010582	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

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

The owner/possessor of this instrument is authorized to operate an individual breath alcohol instrument for the determination of the alcoholic content in expired air of a person as follows:

Operator: INFRANCA, JORDAN  
Permit No: 210128  
Date Issued: 6/21/2021 Date Expires: 6/21/2023

Digitally signed by Jordan Infranca  
Reason: I am the issuer of this certificate of analysis  
Date: 2021.11.29 10:42:11 -0500

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