



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<br>104642   | NAME OF AGENCY<br>O'Fallon PD | DATE OF INSPECTION<br>9-6-2022 |
| LOCATION OF INSTRUMENT (STREET AND CITY)<br>1019 Bryan Road, O'Fallon, MO |                               | TIME OF INSPECTION<br>1354     |

**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>AG115405</u> EXP. DATE <u>06-03-2023</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 ← <b>.080</b> | TEST 2 ← <b>.079</b> | TEST 3 ← <b>.079</b> |
|----------------------|----------------------|----------------------|

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>0</b> | (0-.04) <b>0</b> | (.05-.09) <b>0</b> | (.10-.14) <b>0</b> | (.15-.19) <b>0</b> | (OVER .19) <b>0</b> |
|-------------------|------------------|--------------------|--------------------|--------------------|---------------------|

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).

N/A

---



---



---

**INSPECTING OFFICER**

|   |   |
|---|---|
| SIGNATURE<br>   | PRINT NAME<br><b>Chris Sinnokrak</b>      |
| TYPE II PERMIT NUMBER/EXPIRATION DATE<br><b>200307 / 12-21-2022</b> | TELEPHONE NUMBER<br><b>(636 )240-3200</b> |

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: 104642  
Version no: 532B

TEST RECORD 00991

| Temp | Date | Time | s/ | 210L |
|------|------|------|----|------|
|------|------|------|----|------|

Air Blank:  
09/06/22 13:57 .000  
Calibration Check:  
21 09/06/22 13:57 .080

Subject Name

TEST 1

Subject I.D.

Operator Name, I.D.

SWANERPAK 334  
Location

AS IV Serial no: 104642  
Version no: 532B

TEST RECORD 00992

| Temp | Date | Time | s/ | 210L |
|------|------|------|----|------|
|------|------|------|----|------|

Air Blank:  
09/06/22 13:59 .000  
Calibration Check:  
21 09/06/22 13:59 .079

Subject Name

TEST 2

Subject I.D.

Operator Name, I.D.

SWANERPAK 334  
Location

AS IV Serial no: 104642  
Version no: 532B

TEST RECORD 00993

| Temp | Date | Time | s/ | 210L |
|------|------|------|----|------|
|------|------|------|----|------|

Air Blank:  
09/06/22 14:01 .000  
Calibration Check:  
22 09/06/22 14:01 .079

Subject Name

TEST 3

Subject I.D.

Operator Name, I.D.

SWANERPAK 334  
Location

AS IV Serial no: 104642  
Version no: 532B

TEST RECORD 00994

| Temp | Date | Time | s/ | 210L |
|------|------|------|----|------|
|------|------|------|----|------|

VOID: RFI  
12 09/06/22 14:02

Subject Name

RFI

Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 104642  
Version no: 532B

TEST RECORD 00995

| Temp | Date | Time | s/ | 210L |
|------|------|------|----|------|
|------|------|------|----|------|

Air Blank:  
09/06/22 14:04 .000  
Subject Test: Auto  
24 09/06/22 14:04 .000

Subject Name

SUBSTR TEST

Subject I.D.

Operator Name, I.D.

Location



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:** 7-Jun-2021

**Lot # AG115405 Model 108caccd**

| <u>Exp. Date</u> | <u>Cyl. Type</u> | <u>Component</u>    | <u>Certified Concentration</u>          |
|------------------|------------------|---------------------|---|
| 3-Jun-2023       | 108              | Ethanol<br>Nitrogen | 0.080 ± 0.002 BrAC (218 ppm)<br>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: 2021.06.08 13:46:01 -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

2

**PERMIT**  
**TYPE II**  
**CHRIS SINNOKRAK**

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 EC/IR II**

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 12/21/2020

NUMBER 200307

EXPIRES 12/21/2022

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

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** SINNOKRAK, CHRIS  
**Permit No** 200307  
**Date Issued** 12/21/2020    **Date Expires** 12/21/2022

