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By Tracy Crews at 8:11 am, Jun 23, 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<br>107972   | NAME OF AGENCY<br>BOONE COUNTY SHERIFF'S OFFICE | DATE OF INSPECTION<br>06/22/2022 |
| LOCATION OF INSTRUMENT (STREET AND CITY)<br>2111 E. COUNTY DR, COLUMBIA |   | TIME OF INSPECTION<br>8:05 am    |

**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 # AG112301 EXP. DATE 05/03/2023
- 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  .100 | TEST 2  .101 | TEST 3  .100 |
|--------------|--------------|--------------|

- 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) | 1 |
|----------|---|---------|---|-----------|---|-----------|---|-----------|---|------------|---|

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 OPERATING SATISFACTORILY AND WITHIN ESTABLISHED LIMITS.

**INSPECTING OFFICER**

|   |                                    |
|---|------------------------------------|
| SIGNATURE<br>   | PRINT NAME<br>STEVEN H. VERBLE     |
| TYPE II PERMIT NUMBER/EXPIRATION DATE<br>210084, 04/22/2023 | TELEPHONE NUMBER<br>(573) 875-1111 |

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: 107972  
Version no: 502B

TEST RECORD 00778 <sup>g/</sup>  
Temp Date Time 210L  
Air Blank: 06/22/22 00:09 .000  
Calibration Check: 22 06/22/22 00:09 .100

Subject Name  
Test 1  
Subject I.D.

Operator Name, I.D.  
Verble, 210084  
Location  
2111 E. County Dr  
Columbia

AS IV Serial no: 107972  
Version no: 502B

TEST RECORD 00779 <sup>g/</sup>  
Temp Date Time 210L  
Air Blank: 06/22/22 00:13 .000  
Calibration Check: 22 06/22/22 00:13 .101

Subject Name  
Test 2  
Subject I.D.

Operator Name, I.D.  
Verble, 210084  
Location  
2111 E. County Dr  
Columbia

AS IV Serial no: 107972  
Version no: 502B

TEST RECORD 00780 <sup>g/</sup>  
Temp Date Time 210L  
Air Blank: 06/22/22 00:19 .000  
Calibration Check: 23 06/22/22 00:19 .100

Subject Name  
Test 3  
Subject I.D.

Operator Name, I.D.  
Verble, 210084  
Location  
2111 E. County Dr  
Columbia

AS IV Serial no: 107972  
Version no: 502B

TEST RECORD 00781 <sup>g/</sup>  
Temp Date Time 210L  
VOID: RFI  
12 06/22/22 00:21

Subject Name  
RFI  
Subject I.D.

Operator Name, I.D.  
Verble, 210084  
Location  
2111 E. County Dr  
Columbia



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:** 3-May-2021

**Lot #** AG112301 **Model** 108caoc

| Exp. Date  | Cal. Type | Component | Certified Concentration   |
|------------|-----------|-----------|---------------------------|
| 3-May-2023 | 108       | Ethanol   | 0.100 ± 2% BRAC (272 ppm) |
|            |           | Nitrogen  | Balance                   |

**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     | EB0010562      | 104.2 ppm     |
| EB0010681      | 52.12 ppm     | EB0010579      | 52.81 ppm     |
| CRM Serial No. | Concentration | CRM Serial No. | Concentration |
| CC-34668       | 800.0 ppm     | 0056649        | 390.1 ppm     |
| CC-234503      | 253.0 ppm     | 0056662        | 150.2 ppm     |

**Analytical Method:** NDIR

Created by: Operator, Operator  
Date: 2021.05.24 12:18:54 -0500  
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**

**STEVEN H. VERBLE**

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 4/22/2021  
NUMBER 210084  
EXPIRES 4/22/2023

MO 985.071 (6.10) DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES LAB-4 (06-10)

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 analyzer for the determination of the alcoholic content in breath form of expired air in Missouri.

Operator: VERBLE STEVEN  
Permit No: 210084  
Date Issued: 4/22/2021 Date Expires: 4/22/2023