

# MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

# RECEIVED By Tracy Crews at 8:26 am, Mar 22, 2022

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

Complete this report in duplicate at the time of Send copy to Department of Health and Senio	of the regular monthly por Services; retain origin	preventative maintena nal in department file	ance check, and w	henever instrument is repaired.		
ALCO SENSOR IV SN 107996	NAME OF AGENCY Gladstone Police	Department		TE OF INSPECTION 3/18/2022		
LOCATION OF INSTRUMENT (STREET AND CITY) 7010 N. Holmes Street Gladstone, MO 64118				ME OF INSPECTION 2:03 am		
<b>CHECKLIST:</b> Place a mark in the box by each where determined.) Unmarked items must be	item if found to be satisf	factory or if operating instrument.	within established	limits. (Write in observed values		
☑ DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)						
✓ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)						
PRINTER WORKING PROPERLY						
✓ TIME AND DATE DISPLAYING PROPERLY						
<b>BREATH ALCOHOL ACCURACY STANDAR</b>	DS					
☐ SIMULATOR SOLUTION						
STANDARD SUPPLIER Intoximeters	ximetersLOT # AG102503EXP. DATE 01/25/2023					
☐ SIMULATOR TEMPERATURE (34°C ± 0.	2°C) SIN	M. SN	SIM. NIS	ST EXP DATE		
<ul> <li>✓ 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)         <ul> <li>✓ 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE</li> <li>✓ 0.080% STANDARD - MUST READ BETWEEN 0.076% and 0.084% INCLUSIVE</li> <li>✓ 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE</li> </ul> </li> </ul>						
TEST 1     .099%	TEST 2 <b>☞</b> .099%		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 (004) 0	(.0509)	(.1014) 0	(.1519) 0	(OVER .19) 0		
List any new parts and describe any alteration established limits (use other side if necessary). Taken to Missouri Safety Center for repair	).	vas made to restore	the instrument to d	operate satisfactorily and within		
INSPECTING OFFICER						
SIGNATURE Sinclair			PRINT NAME Brett J. Sinclair			
TYPE II PERMIT NUMBER/EXPIRATION DATE 220093 / 03-16-2024			TELEPHONE NUMBER (816) 436-3550			
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: 107996 Version no: 532B

TEST RECORD 01375

Date Time 210L

Air Blank: 03/18/22 12:03 .000

Calibration Check: 24 03/18/22 12:03 .099

Subject Name

Test 1

PO Sinclair 18291

Operator Name, I.D.

7010 N. Holmes

Galadstone.

AS IV Serial no: 107996 Version no: 532B

TEST RECORD 01377

Temp Date Time 210L

Air Blank:

03/18/22 12:07 .000

Calibration Check:

26 03/18/22 12:07 .100

Subject Name

PO Sinclair 18291 Operator Name, I.D.

7010 N. Holmes 3k

Galadstone, MO 64118

AS IV Serial no: 107996 Version no: 532B

TEST RECORD 01376

Time 210L Date

Air Blank:

03/18/22 12:05 .000

Calibration Check:

25 03/18/22 12:05 ,099

Subject Name

Sinclair 1829

Operator Name, I.D.

Holmes St.

Location

Gladstone, mo

64118

AS IV Serial no: 107996 Version no: 532B

TEST RECORD 01378

Time Temp Date

VOID: RFI

12 03/18/22 12:09

Subject Name

Test

Po Sinclaiv 1829/ Operator Name, I.D.

7010 W. Holmes Oh

Coladstone, MD

64118



#### 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: 27-Jan-2021

Lot # AG102503 Model 108cacd

Exp. Date 25-Jan-2023 Cyl. Type 108

Component Ethanol

**Certified Concentration** 

 $0.100 \pm 2\%$  BrAC (272 ppm)

Nitrogen

Balance

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

RGM Serial No.	Concentration 392.1 ppm 259.8 ppm 208.0 ppm 103.6 ppm 52.12 ppm	RGM Serial No.	Concentration
EB0010581		EB0010603	393.0 ppm
EB0010570		EB0010559	258.2 ppm
EB0010285		EB0010595	208.3 ppm
EB0010561		EB0010562	104.2 ppm
EB0010681		EB0010579	52.81 ppm
CRM Serial No.	Concentration	CRM Serial No.	Concentration
CC727481	800.0 ppm	CC727493	390.0 ppm
CC727496	253.0 ppm	CC727498	150.0 ppm

**Analytical Method:** 

**NDIR** 

Digitally signed by Quality Control Date: 2021.01.29 13:36:13 -06:00 Reason: Dry gas standard certification of analysis Location: Airgas USA LLC (Lab)

Approved for Release:

ISO 17025:2005 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 BRETT SINCLAIR

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	3/16/2022	Lama G. Nay		
		DIRECTOR OF STATE PUBLIC HEALTH LABORATORY		
NUMBER	220093			
		Daves I. nichelson		
EXPIRES	3/16/2024	- Tuned s. I percellan		
		DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES		

MO 580-0771 (6-10)

LAB-4 (R6-10)



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 SINCLAIR, BRETT Permit No 220093 Date Issued 3/16/2022 Date

Date Expires 3/16/2024

