

**RECEIVED**  
By Tracy Crews at 8:36 am, May 20, 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 111326	PRINTER SN 099.3586.615	DATE OF INSPECTION 05/18/2022
LOCATION OF INSTRUMENT (STREET AND CITY) Richland PD 201 South Chestnut Street Richland Missouri 65556		TIME OF INSPECTION 12:33 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**

<input type="checkbox"/> SIMULATOR SOLUTION	<input checked="" type="checkbox"/> COMPRESSED ETHANOL-GAS MIXTURE
<input checked="" type="checkbox"/> STANDARD SUPPLIER <u>Intoximeters</u>	LOT # <u>AG109702</u> EXP. DATE <u>04/07/2023</u>
<input type="checkbox"/> SIMULATOR TEMPERATURE (34°C ± 0.2°C)	SIMULATOR SN _____ SIMULATOR 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 = 0.098	TEST 2 = 0.098	TEST 3 = 0.098
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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	0	(0-.04)	0	(.05-.09)	0	(.10-.14)	0	(.15-.19)	0	(OVER .19)	0
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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 is operating within established limits.

<b>INSPECTING OFFICER</b>	
SIGNATURE <i>David L. Moser</i>	PRINT NAME David L. Moser
TYPE II PERMIT NUMBER/EXPIRATION DATE 200277 11/05/2022	TELEPHONE NUMBER (573) 480-4144

Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office  
2875 James Boulevard  
Poplar Bluff, MO 63901

AS IV Serial no: 111326  
Version no: 532B

TEST RECORD 00882

Temp Date Time <sup>2/</sup> 218L

Air Blank:  
05/18/22 12:33 .000  
Calibration Check:  
21 05/18/22 12:33 .000

Subject Name

BLANK TEST

Subject I.D.

Operator Name, I.D.

DMOSER 200277

Location

RICHLAND PD

AS IV Serial no: 111326  
Version no: 532B

TEST RECORD 00887

Temp Date Time <sup>2/</sup> 218L

Air Blank:  
05/18/22 12:41 .000  
Subject Test: Man  
23 05/18/22 12:41 .098

Subject Name

TEST 1

Subject I.D.

Operator Name, I.D.

DMOSER 200277

Location

RICHLAND PD

AS IV Serial no: 111326  
Version no: 532B

TEST RECORD 00888

Temp Date Time <sup>2/</sup> 218L

Air Blank:  
05/18/22 12:43 .000  
Subject Test: Man  
23 05/18/22 12:43 .098

Subject Name

TEST 2

Subject I.D.

Operator Name, I.D.

DMOSER 200277

Location

RICHLAND PD

AS IV Serial no: 111326  
Version no: 532B

TEST RECORD 00889

Temp Date Time <sup>2/</sup> 218L

Air Blank:  
05/18/22 12:45 .000  
Subject Test: Man  
23 05/18/22 12:45 .098

Subject Name

TEST 3

Subject I.D.

Operator Name, I.D.

DMOSER 200277

Location

RICHLAND PD

AS IV Serial no: 111326  
Version no: 532B

TEST RECORD 00890

Temp Date Time <sup>2/</sup> 218L

VOID: RFI  
12 05/18/22 12:46

Subject Name

RFI TEST

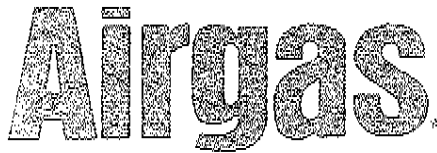
Subject I.D.

Operator Name, I.D.

DMOSER 200277

Location

RICHLAND PD

**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:** 8-Apr-2021

**Lot # AG109702 Model 108caccd**

**Exp. Date**

7-Apr-2023

**Cyl. Type**

108

**Component**

Ethanol  
 Nitrogen

**Certified Concentration**

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>
CC727481	800.0 ppm	CC727493	390.0 ppm
CC727496	253.0 ppm	CC727498	150.0 ppm

**Analytical Method:**

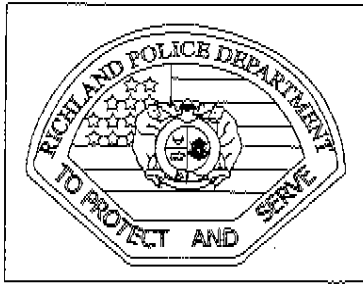
NDIR

Digitally signed by Quality Control  
 Date: 2021.04.08 18:24:39 -05:00  
 Reason: Dry gas standard certification of analysis  
 Location: Airgas USA LLC (Lab)

Approved for Release:

Rod Marsala

**ISO 17025:2005 A2LA accredited. Certificate Number 3082.06**  
**ISO 17034:2016 A2LA accredited. Certificate Number 3082.07**



**THE CITY OF RICHLAND, MISSOURI  
RICHLAND POLICE DEPARTMENT**

201 South Chestnut Street  
Post Office Box # 798  
Richland, Mo 65556

**Gregg Sellers**  
Chief of Police

PHONE: (573) 765-4144

Fax: (573) 765-3093

**FACSIMILE TRANSMISSION INFORMATION**

Enclosed is a confidential transmittal, which may be law enforcement sensitive. The entire transmission is intended only for the person (s) and/or organization (s) listed here-in. If this message is received in error, please forward it to the correct person/organization immediately or destroy the entire transmission and contact us at once.

Your access to this information and its distribution may be regulated by law and is punishable as such.

Thank you for your cooperation.

**FROM: RICHLAND POLICE DEPARTMENT**

Sending Party/Officer: SGT DAVID L. MOSER

Total Pages Sent: Cover + 4

**SENT TO:** 05/18/2022 14:25

Organization: M. H. S.S.

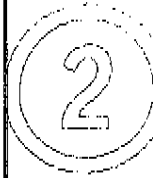
Attention: \_\_\_\_\_

Fax Number: 573 840 9139

**COMMENTS:** MONTHLY MAINT REPORT



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



**PERMIT**  
**TYPE II**  
**DAVID L. MOSER**

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**

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 11/5/2020

NUMBER 200277

EXPIRES 11/5/2022

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 MOSER, DAVID  
Permit No 200277  
Date Issued 11/5/2020 Date Expires 11/5/2022

