



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
 STATE PUBLIC HEALTH LABORATORY
ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

RECEIVED
 By Tracy Crews at 7:36 am, Jul 20, 2022

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 111329	NAME OF AGENCY Missouri State Highway Patrol	DATE OF INSPECTION 07/20/2022
LOCATION OF INSTRUMENT (STREET AND CITY) Jasper County Sheriff Office 231 S Main Street Carthage, MO 64836		TIME OF INSPECTION 2:15 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

<input type="checkbox"/> SIMULATOR SOLUTION	<input checked="" type="checkbox"/> COMPRESSED ETHANOL-GAS MIXTURE
<input checked="" type="checkbox"/> STANDARD SUPPLIER <u>Intoximeters</u>	LOT # <u>AG201102</u> EXP. DATE <u>01/11/2024</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 .079	TEST 2 .081	TEST 3 .081
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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).

INSPECTING OFFICER	
SIGNATURE 	PRINT NAME Sgt. Christopher Calvin #349
TYPE II PERMIT NUMBER/EXPIRATION DATE 220052/ 02/19/2024	TELEPHONE NUMBER (417) 358-8177

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: 111329
Version no: 532B

TEST RECORD 00808

Temp Date Time ^{s/} 210L

Air Blank:
07/20/22 02:31 .000
Calibration Check:
20 07/20/22 02:31 .079

Subject Name

Acc Check #1

Subject I.D.

Sgt. Chris Calvin
Operator Name, I.D.

220052 - 02-19-24
Location

Carthage, Mo

AS IV Serial no: 111329
Version no: 532B

TEST RECORD 00809

Temp Date Time ^{s/} 210L

Air Blank:
07/20/22 02:32 .000
Calibration Check:
21 07/20/22 02:32 .081

Subject Name

Acc Check #2

Subject I.D.

Sgt. Chris Calvin
Operator Name, I.D.

220052 - 02-19-24
Location

Carthage, Mo

AS IV Serial no: 111329
Version no: 532B

TEST RECORD 00810

Temp Date Time ^{s/} 210L

Air Blank:
07/20/22 02:33 .000
Calibration Check:
21 07/20/22 02:33 .081

Subject Name

Acc Check #3

Subject I.D.

Sgt. Chris Calvin
Operator Name, I.D.

220052 - 02-19-24
Location

Carthage, Mo

AS IV Serial no: 111329
Version no: 532B

TEST RECORD 00811

Temp Date Time ^{s/} 210L

VOID: RFI
12 07/20/22 02:35

Subject Name

RFI Test

Subject I.D.

Sgt. Chris Calvin
Operator Name, I.D.

220052 - 02-19-24
Location

Carthage, Mo



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: 11-Jan-2022

Lot # AG201102 **Model** 55

Exp Date	Cyl. Type	Component	Certified Concentration
11-Jan-2024	55	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	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
CC434668	800.0 ppm	0056649	390.1 ppm
CC234503	253.0 ppm	0056662	150.2 ppm

Analytical Method: NDIR

Digitally signed by:Quality Control
Reason:Dry gas standard certification of analysis
Location:Airgas USA LLC (Lab)
Date:01.11.2022 18:23

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

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PERMIT
TYPE II
CHRISTOPHER CALVIN

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 2/19/2022

NUMBER 220052

EXPIRES 2/19/2024

Laura Q. Way

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Christopher Calvin

acting director

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

LAB-4 (R6-10)

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

Operator CALVIN, CHRISTOPHER
 Permit No 220052
 Date Issued 2/19/2022 Date Expires 2/19/2024

