

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

REPORT #7

at 3:52 pm, Aug 09,

RECEIVED By Tracy Crews a

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 111647		NAME OF AGENCY Normandy Police Department		DATE OI 07/03	FINSPECTION /2022	
LOCATION OF INSTRUMENT (7700 Natural Bridge R			31200	TIME OF 12:05	INSPECTION 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)						
I TIME AND DATE DISPLAYING PROPERLY						
BREATH ALCOHOL ACCURACY STANDARDS						
	SIMULATOR SOLUTION					
STANDARD SUPPLIER Airgas		LOT # AG127802		EXP. DATE <u>10/05/2023</u>		
SIMULATOR TEMPERATURE (34°C ± 0		0.2°C) SI	M. SN	SIM. NIST EXP DATE		
 □ 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 🖝 .081		TEST 2 🖝 .081		TEST 3 🖝 .081		
INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT: (DO NOT INCLUDE SELF-ADMINISTERED TESTS)						
REFUSALS	(004)	(.0509)	(.1014)	(.1519)	(OVER .19)	
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				PRINT NAME		
· 4.0. DU	2/11/1	n 325		P.O. Thomas Moore		
TYPE II PERMIT NUMBER/EXPIRATI 200200 / 07-08-2022	ION DATE			TELEPHONE NUMBER (314) 385-3300		
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 Seria) no: 111647 Version no: 5328 TEST RICHRD 00379 9/ Teme Date Time 210L Air Blank: 07/03/22 00:05 .000 Calibration Check: 22 07/03/22 00:05 .001 Subject Name

BAL MAINT

Operator Name, I.D.

MODAE 325 200 200

7700 NATURAL BR BD, NORMANDY

AS IV Serial no: 111647 Version no: 532B TEST RECORD 00380 9/ Teme Bate Time 210L Air Blank: 07/03/22 00:07 .000 Subject Test: Man 22 07/03/22 00:07 .081 Subject Name

BAC MAINT Subject I.D.

Operator Name, I.D.

Mooriz 325 200200 Location

1700 NATURAL BRAD, UDBMAND

AS IV Serial no: 111647 Version no: 532B TEST RECORD 00381 9/ Temp Date Time 210L Air Blank: 07/03/22 00:08 .000 Subject Test: Man 22 07/03/22 00:08 .001 Subject Name BAC MAINT Subject 1.D.

Operator Name, I.D. M. WEE 325 200200 Location

TWO HATURAL BR RD WORMANDY.

AS IV Serial not 111647 Version no: 5328 TEST RICHRD 00392 97 Jame Date Time 2101 WOID: RFI 12 07/03/22 08:09 Subject Name BAC MAINT Subject I.D. Operator Name, I.D. Operator Name, I.D. Model 325 200200 Location Trom NATURAL BD RD MOMMANT

Airgas.

Airgas USA LLC (LAB)

3500 Bernard Street St. Louis, Mo. 63103 Ph: (314) 533-3100 Fax: (314) 533-7328

Certificate of Analysis

Test Date: 5-Oct-2021

Customer Name Exclusive Supplier Intoximeters, Inc. 2081 Craig Road St. Louis, Mo 63146

Lot # AG127802 Model 108cacd

Exp. Date 5-Oct-2023 Cyl. Type 108

Component Ethanol Nitrogen

Certified Concentration 0.080 ± 0.002 BrAC (218 ppm) Balance

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

RGM Serial No. EB0010581 EB0010570 EB0010285 EB0010561 EB0010681

CRM Serial No. CC434668 CC234503

392.1 ppm 259.8 ppm 208.0 ppm 103.6 ppm 52.12 ppm

Concentration

Concentration 800.0 ppm 253.0 ppm

RGM Serial No. EB0010603 EB0010559 EB0010595 EB0010562

EB0010579

Concentration 393.0 ppm 258.2 ppm 208.3 ppm 104.2 ppm 52.81 ppm

CRM Serial No. 0056649 0056662

Concentration 390.1 ppm 150.2 ppm

Analytical Method:

NDIR

Digitally signed by Quality Control Date: 2021.10.05 18:55:05 -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**



LAB-4 (R6-10)

PERMIT TYPE II **THOMAS M. MOORE**

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 _____7/8/2020_

NUMBER 200200

EXPIRES 7/8/2022

114/16

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

MAN

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)



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 elcoholic content in breath form of expired ai in Missouri.

Operator MOORE, THOMAS Permit No 200200 Date Issued 7/8/2020 Date Expires 7/8/2022

