



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

**RECEIVED**  
 By Tracy Crews at 3:37 pm, Apr 15, 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 111733	NAME OF AGENCY St. Louis County Police Department	DATE OF INSPECTION 04/15/2022
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LOCATION OF INSTRUMENT (STREET AND CITY) 14301 SOUTH OUTER FOURTY MODOT TMC	TIME OF INSPECTION 10:48 am
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**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 # AG015503 EXP. DATE 06/03/2022

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 .099

TEST 3 .099

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)	2	(.05-.09)	1	(.10-.14)	4	(.15-.19)	1	(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  
PO NEUMAN, DSN 3072

TYPE II PERMIT NUMBER/EXPIRATION DATE  
210074 04/06/2023

TELEPHONE NUMBER  
(636) 529-8210

**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: 111733  
Version no: 532B

TEST RECORD - REPRINT

TEST RECORD 00374

Temp Date Time <sup>s/</sup> 210L

Air Blank:  
04/15/22 10:48 .000  
Calibration Check:  
21 04/15/22 10:48 .100

Subject Name

*Test #1*

Subject I.D.

*NA*

Operator Name, I.D.

*Sgt D. Newman #3072*

Location

*MODOT TMC*

AS IV Serial no: 111733  
Version no: 532B

TEST RECORD 00375

Temp Date Time <sup>s/</sup> 210L

Air Blank:  
04/15/22 10:51 .000  
Calibration Check:  
23 04/15/22 10:51 .099

Subject Name

*Test #2*

Subject I.D.

*NA*

Operator Name, I.D.

*Sgt D. Newman #3072*

Location

*MODOT TMC*

AS IV Serial no: 111733  
Version no: 532B

TEST RECORD 00376

Temp Date Time <sup>s/</sup> 210L

Air Blank:  
04/15/22 10:54 .000  
Calibration Check:  
23 04/15/22 10:54 .099

Subject Name

*Test #3*

Subject I.D.

*NA*

Operator Name, I.D.

*Sgt D. Newman #3072*

Location

*MODOT TMC*

AS IV Serial no: 111733  
Version no: 532B

TEST RECORD 00377

Temp Date Time <sup>s/</sup> 210L

VOID: RFI  
12 04/15/22 10:56

Subject Name

*RFI!*

Subject I.D.

*NA*

Operator Name, I.D.

*Sgt D. Newman #3072*

Location

*MODOT TMC*



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-Jun-2020

**Lot # AG015503 Model 108cacd**

Exp. Date

3-Jun-2022

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:

RGM Serial No.

Concentration

EB0010581

392.1 ppm

EB0010570

259.8 ppm

EB0010285

208.0 ppm

EB0010561

103.6 ppm

EB0010681

52.12 ppm

RGM Serial No.

Concentration

EB0010603

393.0 ppm

EB0010559

258.2 ppm

EB0010595

208.3 ppm

EB0010562

104.2 ppm

EB0010579

52.81 ppm

CRM Serial No.

Concentration

CC434668

800.0 ppm

CC234503

253.0 ppm

CRM Serial No.

Concentration

0056649

390.1 ppm

0056662

150.2 ppm

Analytical Method:

NDIR

Digitally signed by Quality Control

Date: 2020.06.10 14:11:39 -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



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

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**PERMIT  
 TYPE II**

**DAWN M. NEUMAN**

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 4/6/2021

NUMBER 210074

EXPIRES 4/6/2023

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES