

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

THE PARTY OF THE P										***************************************	
Complete this rep Send copy to Dep								d whenev	er instrument is	s repaired.	
ALCO SENSOR IV SN 111742					NAME OF AGENCY St. Louis County Police Department				DATE OF INSPECTION 09/02/2022		
LOCATION OF INSTR 14301 South O	l					TIME OF INSPECTION 2:13 pm					
CHECKLIST: Place				be satis	sfactory or if op	erating	within establis	hed limits.	(Write in obser	ved values	
where determined											
☑ DIGITAL REA	ADOUT	(ALL ELEMENTS	OPERATIONAL))			,				
✓ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)											
PRINTER WORKING PROPERLY											
☑ TIME AND DATE DISPLAYING PROPERLY											
BREATH ALCOH	OL ACC	CURACY STAND	ARDS	•							
	☐ SIMULATOR SOLUTION ☐ COMPRESSED ETHANOL-GAS MIXTURE										
☑ STANDARD	SUPPLI	ER Intoximeters			_OT # <u>AG204</u>	801	EXP. DAT	<u>02/17/2</u>	2024		
	SIMULATOR TEMPERATURE (34°C ± 0.2°C) SIM. SN SIM. NIST EXP DATE										
less. Check th	ne box c STAND/ STAND/	a standard soluti orresponding to th ARD - MUST REA ARD - MUST REA ARD - MUST REA	ne standard solut .D BETWEEN 0.0 .D BETWEEN 0.0	tion bein 095% ar 076% ar	g used. (PRIN nd 0.105% INC nd 0.084% INC	TOUT A LUSIVI LUSIVI	ATTACHED) E E				
TEST 1102		TEST 2 ■ .10	TEST 2 ♥ .101			TEST 3 .101					
RFI DETECT	OR OPE	RATING									
INDICATE THE N (DO NOT INCLU				LLOWI	NG RANGES S	SINCE	THE LAST MA	INTENAN	ICE REPORT:		
REFUSALS	0	(004) 0	(.0509)	0	(.1014)	1	(.1519)	1	(OVER .19)	0	
List any new part established limits				ion that	was made to i	restore	the instrument	to opera	te satisfactorily	and within	
INSPECTING OF	FICER										
SIGNATURE 45.5-3							PRINT NAME PO Tosie DSN 4553				
TYPE II PERMIT NUMBER/EXPIRATION DATE 220173 / 06/24/2024							TELEPHONE NUMBER (636) 529-8210				
Return complete	ed repo	rt to the: Breath	Alcohol Program	n, MO De	epartment of H	ealth a	nd Senior Serv	ices, Sou	theast District C	Office	

		rial no:			L 742
T	EST	RECOR	RD	0048	
Temp	I)ate	Ti	Me	9/ 210L
Cali	09/0 brat	nk: 12/22 ion (2/22	hec.	k:	
Subj	es	+		· TOURNOUS PROPERTY AND	THE PERSON OF TH
Subj	<u> </u>	I.D.	ennum aces o	ELFFFY NI BUTT THANKS	
Opera V.O		Name Sil			<u> </u>
Locat					
M) y o d	TM	<u>C</u>	F silver Beleg residence	

AS IV Serial no: 111742

TEST RECORD 00485

Temp Date Time 210L

23 09/02/22 14:19 .101

09/02/22 14:19 .000

Version no: 532B

Calibration Check:

Opgrator Name, I.D.

monot TMC

Air Blank:

Subject Name

Subject I.D.

Location

TEST RECORD 00484 Temp Date Time 210L Air Blank: 09/02/22 14:16 .000 Calibration Check: 22 09/02/22 14:16 .101 Subject Hame Subject [.D. Operator Name, [.D. .D. Tosic Location MODOTTMC AS IV Serial no: 111742 Version no: 532B TEST RECORD 00486 9. Temp Date Time 2101 VOID: RFI 12 09/02/22 14:20 Subject Name Subject I.D. Operator Name, 1.11. 10. Josh Location MODOT TMC

AS IV Serial no: 111742 Version no: 5326



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: 19-Feb-2022

Lot # AG204801 Model 108

Exp Date

Cyl. Type

Component

Certified Concentration

17-Feb-2024

108

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

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

RGM Serial No.

Concentration

RGM Serial No.

Concentration

EB0010581 EB0010570

391.8 ppm 259.8 ppm

EB0010603 EB0010559 392.5 ppm

EB0010285

209.0 ppm

EB0010562

258.9 ppm 104.2 ppm

EB0010561 EB0010681

103.7 ppm 52.22 ppm EB0010579

52.94 ppm

CRM Serial No.

Concentration

CRM Serial No.

Concentration

CC727481 CC727496 800.0 ppm 253.0 ppm CC727493 CC727498 mqq 0.098 150.0 ppm

Analytical Method: NDIR

Digitally signed by:Quality Control Reason:Dry gas standard certification of analysis Location:Afrgas USA LLC (Lab) Date:02.22.2022 19:37

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



PERMIT TYPE || ROBERT TOSIE

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 samp	
577.020 through 577.041, RSMo and 306.111 through 306.119 R	Mile Massur
DATE 6/24/2022	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 220173	Daves J. Michelson
EXPIRES 6/24/2024 —	DIRECTOR OF DEPARTMENT OF HEALTH AND SERVICES
MO.580-0771 (6-10)	LAB-4 (R6-10)