

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 Send copy to Department of Health and Senior	140			d whenever instrume	nt is repaired.
ALCO SENSOR IV SN 111744	NAME OF AGENCY BOONE COUNT	Y SHERIFF'S OFI	FICE	DATE OF INSPECTION 09/22/2022	14/10/
LOCATION OF INSTRUMENT (STREET AND CITY) 2111 E. COUNTY DR, COLUMBIA				TIME OF INSPECTION 9:24 pm	
CHECKLIST: Place a mark in the box by each where determined.) Unmarked items must be			g within establish	ed limits. (Write in ob	served values
		instrument.			
DIGITAL READOUT (ALL ELEMENTS OF					
✓ TEMPERATURE OF ALCO SENSOR (10	0°C - 40°C)				
☑ PRINTER WORKING PROPERLY					
☑ TIME AND DATE DISPLAYING PROPER	ILY				
BREATH ALCOHOL ACCURACY STANDAR	DS				
☐ SIMULATOR SOLUTION		☑ COMPRESSE	ED ETHANOL-G	AS MIXTURE	
✓ STANDARD SUPPLIER INTOXIMETER	STANDARD SUPPLIER INTOXIMETERS LOT #		AG112301 EXP. DATE 05/03/2023		
☐ SIMULATOR TEMPERATURE (34°C ± 0.	2°C) SI	M. SN	SIM. N	NIST EXP DATE	
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 ▼ .099	TEST 2 ▼ .101		TEST 3 ☞ .101		
☑ RFI DETECTOR OPERATING					
INDICATE THE NUMBER OF BREATH TEST (DO NOT INCLUDE SELF-ADMINISTERED TO		IG RANGES SINCE	THE LAST MAI	NTENANCE REPOR	Т:
REFUSALS 1 (004)	(.0509) 0	(.1014) 0	(.1519)	0 (OVER .19)	2
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 OPERATING SATISFACTORILY AND WITHIN ESTABLISHED LIMITS.					
INSPECTING OFFICER SIGNATURE LESSE Dennison #600 TYPE II PERMIT NUMBER/EXPIRATION DATE	67		PRINT NAME Jesse R Den TELEPHONE NUMBER	R	
220166/6-24-2024 (573) 875-1111 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 not 111744 Version not 5329

T REOR - REPUT

EST KHOMB (M627

MS IV Serial no: 111744 Version no: 537B

P Date Time 2181.

Diect Name

Jest (

Denisor House, 1.11.
Location
JUL E wary Dr

Denvisor Bare, 1.11.
Location
July County Br

AS IV Serial moi 11174 Version no: 5327

TEST KRISHIN BAK29

Tenr Date Time 2181.

Air Blank: 09/22/22 21:28 .666 Celibration Check: 22 69/22/22 21:28 .181

Subject Hame

bed I.E.

Penish Rans J.H. Demism 230160 Loration

2111 5 COUNTY D

2111 B contry D

Prior not 52%

TEST RECORD 00000

OID: RFI 12 89/72/72 21:08

Speci Name

bied t.B.

Derstor Hames J. J.



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: 3-May-2021

Lot # AG112301 Model 108cacd

Exp. Date

Cyl. Type

Component

Certified Concentration

3-May-2023

108

Ethanol Nitrogen 0.100 ± 2% BrAC (272 ppm)

Balance

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 Date: 2021.05.04 12:16:54 -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



PERMIT TYPE II

JESSE DENNISON

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.

DATE6/24/2022	Mike Massure
	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 220166	
EXPIRES 6/24/2024	Davla I. Nichelson
	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

LAB-4 (R6-10)

