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By Tracy Crews at 2:25 pm, Jan 27, 2023



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 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 **111776** NAME OF AGENCY **Kansas City Police Department** DATE OF INSPECTION **11/29/2022**

LOCATION OF INSTRUMENT (STREET AND CITY) **9701 MARION PARK DR, KANSAS CITY** TIME OF INSPECTION **0050 hours**

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 # **AG132803** EXP. DATE **11/24/2023**

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 **0.079** TEST 2 **0.079** TEST 3 **0.079**

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**

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 meets all DOHSS standards and guidelines

INSPECTING OFFICER

SIGNATURE

PRINT NAME **Douglas Davidson**

TYPE II PERMIT NUMBER/EXPIRATION DATE **210058 04/06/2022**

TELEPHONE NUMBER **() 816-234-5000**

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: 111776
Version no: 532B

TEST RECORD 00331

Temp Date Time ^{s/} 210L

Air Blank:
11/29/22 00:51 .000
Calibration Check:
23 11/29/22 00:51 .079

Subject Name

Test # 1

Subject I.D.

Operator Name, I.D.

Davidson 5646

Location

210058 04/06/2023

AS IV Serial no: 111776
Version no: 532B

TEST RECORD 00332

Temp Date Time ^{s/} 210L

Air Blank:
11/29/22 00:53 .000
Calibration Check:
24 11/29/22 00:53 .079

Subject Name

Test # 2

Subject I.D.

Operator Name, I.D.

Davidson 5646

Location

210058 04/06/2023

AS IV Serial no: 111776
Version no: 532B

TEST RECORD 00333

Temp Date Time ^{s/} 210L

Air Blank:
11/29/22 00:55 .000
Calibration Check:
24 11/29/22 00:55 .079

Subject Name

Test # 3

Subject I.D.

Operator Name, I.D.

Davidson 5646

Location

210058 04/06/2023

AS IV Serial no: 111776
Version no: 532B

TEST RECORD 00334

Temp Date Time ^{s/} 210L

VOID: RFI
12 11/29/22 00:56

Subject Name

RFI Test

Subject I.D.

Operator Name, I.D.

Davidson 5646

Location

210058 04/06/2023



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



**PERMIT
TYPE II**

DOUGLAS DAVYDSON

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 506.111 through 506.119 RSMo.

DATE 4/6/2021 _____
 NUMBER 210058 _____
 EXPIRES 4/6/2023 _____
 MO 596-971 (6-19)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES
 LISA (66-10)

STATE OF MISSOURI
DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM
INSTRUMENT OPERATOR CARD

The instrument operator is authorized to operate an authorized breath alcohol instrument in accordance with the provisions of the alcoholic content in breath form of analyzer at _____
 Operator: **DAVIDSON, DOUGLAS**
 Permit No: **210058**
 Date Issued: **4/6/2021** Date Expires: **4/6/2023**



Certificate of Analysis

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

Lot # AG132803 Model 108

Test Date: 29-Nov-2021

Airgas USA LLC (LAB)
3600 Bernard Street
St. Louis, Mo. 63103
Ph: (314) 533-3100
Fax: (314) 533-7328

Exp Date 24-Nov-2023 Cyl. Type 108 Component Ethanol Nitrogen Certified Concentration 0.082 ± 0.002 BAC (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	EB0010599	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. CC434668 Concentration 800.0 ppm CRM Serial No. 0056649 Concentration 390.1 ppm
CC234503 253.0 ppm 0056652 150.2 ppm
 Analytical Method: NDIR

Quality Control Instrument
 Approved for Release: _____
 Operator: _____
 Date: _____

Approved for Release: Rod Marsala

ISO 17025:2017 A2LA accredited. Certificate Number 3082.06
 ISO 17034:2016 A2LA accredited. Certificate Number 3082.07