

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

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REPORT

Complete this report in duplicate at the time of the regular monthly preventative maintenance of the sequence of the sequence

Send copy to Department of Health and	Senior Services; retain or	iginal in department f	le.	whenever instrument is repaired
ALCO SENSOR IV SN NAME OF AGENCY				ATE OF INSPECTION
LOCATION OF INSTRUMENT (STREET AND CITY) 400 First St. Hillsboro, MO 63050				05/22/2024 ME OF INSPECTION
CHECKLIST: Place a mark in the box by e				
where determined.) Unmarked items mus	t be corrected before usi	ng instrument.	ig within established	limits. (Write in observed value
DIGITAL READOUT (ALL ELEMENT				
▼ TEMPERATURE OF ALCO SENSOF	(10°C - 40°C)			
PRINTER WORKING PROPERLY				
✓ TIME AND DATE DISPLAYING PROP				
BREATH ALCOHOL ACCURACY STAND	DARDS			
SIMULATOR SOLUTION	COMPRESSI	SED ETHANOL-GAS MIXTURE		
STANDARD SUPPLIER Intoximeter	ers	LOT # AG305902		
SIMULATOR TEMPERATURE (34°C				
less. Check the box corresponding to t 0.100% STANDARD - MUST REA 0.080% STANDARD - MUST REA 0.040% STANDARD - MUST REA	AD BETWEEN 0.095% a	nd 0.105% INCLUSIV	E	
TEST 1 ▼ .098	TEST 2 ▼ .098		TEST 3 ☞ .098	
✓ RFI DETECTOR OPERATING				
INDICATE THE NUMBER OF BREATH TE (DO NOT INCLUDE SELF-ADMINISTERE	STS IN THE FOLLOWIID TESTS)	NG RANGES SINCE	THE LAST MAINTE	NANCE REPORT:
REFUSALS (004)	(.0509)	1,,,		
List any new parts and describe any altera established limits (use other side if necessary)	tion or modification that	(.1014)	(.1519)	(OVER .19)
established limits (use other side if necessa	ary).	was made to restore	the instrument to o	perate satisfactorily and within
INSPECTING OFFICER				
SIGNATURE	#810		PRINT NAME	· · · · · · · · · · · · · · · · · · ·
TYPE II PERMIT NUMBER/EXPIRATION DATE		Zachary Reed #810		
230236	TELEPHONE NUMBER (636) 797-5000			
Return completed report to the: Breath A by mail,	Alcohol Program, MO De fax, or email.	partment of Health an	d Senior Services, S	Southeast District Office

RS by Serial no: 030807 Version no: 5328 TEST RECORD 00387 Temp Date Time 2101 Air Blank: 05/22/24 21-26 00C Calibration Check: 22 05/22/24 21-25 098 Subject Name Subject 1.5 2 Rue 230236 Location

AS IV Serial no. 030807 Version no: 5328 TEST RECORD 00389 Temp Date Time 210 Air Blank: 05/22/24 21:32 000 Calibration Chack: 23 05/22/24 21:32 09 Subject Name
Subject | D Operator Name, 10 Cled 230736 Location

AS IV Serial no: 030807 Version no: 532B TEST RECORD 00390 Temp Date Time 210 VOID: RFI 12 05/22/24 21:34 Subject Name Subject I.D. Weed 270 236 Location

AS IV Serial no: 030807

TEST RECURD 00388

Temp Date Time 210

Air Blank: 05/22/24 21-29 CGO Calibration Check: 22 05/22/24 21-29 JAG

Version no: 532B

Subject Name
Subject 1.0

Person Name, I.D. Recol 250236 Location



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

Certificate of Analysis

Test Date: 28-Feb-2023

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

Lot # AG305902 | Model 108

Exp Date 28-Feb-2025 Cyl. Type 108

Component Ethanol Nitrogen

Certified Concentration 0.100 ± 2% BrAC (272 ppm)

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

Concentration RGNi Serial No. 391.8 ppm EB0010581 259.8 ppm EB0010570 209.0 ppm EB0010285 103.7 ppm EB0010561 52.22 ppm EB0010681

Concentration RGW Serial No. 392.5 ppm EB0010603 258.9 ppm EB0010559 104.2 ppm EB0010562 52.94 ppm EB0010579

CRM Serial No. CC727481 CC727496

Concentration 800.0 ppm 253.0 ppm

CRM Serial No. GC727493 CC727498

Concentration 390.0 ppm 150.0 ppm

Analytical Method: NDIR

Digitally signed by:Quality Control Reason:Dry gas standard certification of analysis Location:Argas USA LLC (Lab) Date.03 01 2023 17:25

Approved for Release:

Rod Marsala

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