





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 Send copy to Department of Health a					d whenever instrument is repaired	
ALCO SENSOR IV SN 035485	l l	PRINTER SN 099.3586.572			DATE OF INSPECTION 05/27/2024	
LOCATION OF INSTRUMENT (STREET AND CITY) SCCPD / 101 Sheriff Dierker Court, O'Fallon, Missouri 63366			3		TIME OF INSPECTION 10:35 am	
CHECKLIST: Place a mark in the box ues where determined.) Unmarked ite				ing within establis	shed limits. (Write in observed val-	
✓ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)						
PRINTER WORKING PROPERLY	Y					
TIME AND DATE DISPLAYING P	ROPERLY					
BREATH ALCOHOL ACCURACY ST	ANDARDS					
☐ SIMULATOR SOLUTION			☑ COMPRESSE	D ETHANOL-GA	AS MIXTURE	
STANDARD SUPPLIER Intoximo	eters	LOT # AG313002 EXP. DATE		EXP. DATE	05/10/2025	
SIMULATOR TEMPERATURE (34	4°C ± 0.2°C)	SIM	ULATOR SN	SIMUL	ATOR EXP DATE	
less. Check the box corresponding 0.100% STANDARD - MUST 0.080% STANDARD - MUST 0.040% STANDARD - MUST TEST 1100	READ BETWEEN 0.0	95% an 976% an 938% an	d 0.105% INCLUSIVE d 0.084% INCLUSIVE d 0.042% INCLUSIVE	=	<u> </u>	
✓ RFI DETECTOR OPERATING	.10			.09	9	
INDICATE THE NUMBER OF BREAT (DO NOT INCLUDE SELF-ADMINIST		LLOWIN	G RANGES SINCE 1	THE LAST MAIN	TENANCE REPORT:	
REFUSALS (004)	(.0509)	1	(.1014)	(.1519)	(OVER .19)	
List any new parts and describe any a established limits (use other side if ned		on that v	vas made to restore	the instrument to	operate satisfactorily and within	
INSPECTING OFFICER SIGNATURE	Wall Street Light	9 78.7		PRINT NAME		
TYPE II PERMIT NUMBER/EXPIRATION DATE	-jl-	114	/	Michael Kavar	naugh	
230017 Exp: 01/31/2025	eath Aleehal Duran	MO D	outmant of HIII	(636) 949-300		
28	eath Alcohol Program, 75 James Boulevard plar Bluff, MO 63901	IVIO Del	partment of Health an	a Senior Service	s, Southeast District Office	



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: 11-May-2023

Lot # AG313002 Model 108

Exp Date 10-May-2025 Cyl. Type 108

Component

Ethanol

Certified Concentration

Nitrogen

0.100 ± 2% BrAC (272 ppm)

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

RGM Serial No.	Concentration	
EB0010581	391,8 ppm	
EB0010570	259.8 ppm	
EB0010285	209.0 ppm	
EB0010561	103.7 ppm	
EB0010681	52.22 ppm	

RGM Serial No.	Concentration
139010603	392.5 ppm
139010558	258.8 ppm
139010562	194.2 ppm
139010578	52.94 ppm

CRM Serial No.	Col
CC727481	800
CC727496	253

Concentration 800.0 ppm 253.0 ppm CRIN Serial No. CC727493 CC727498

Concentration 390.0 ppm 150.0 ppm

Analytical Method: NDIR

Digitally signed by Clustry Control Recently igns signified certification of snolysic Lectifor August USA LLC (Leb). Outsch6.11.2025 21:07

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

MICHAEL KAVANAUGH

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

for the determination of the alcoholic content of blood for 577.020 through 577.041, RSMo and 306.111 through	rom a sample of expired air. Permit issued under the provisions of saction 306.119 RSMp.
DATE1/31/2023	Mile Mason
AND SHARE LIFE	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 230017	Daves J. nichelson
EXPIRES 1/31/2025	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES
MO 880-0771 (6-18)	(AB4 PRAIN



AS IV Serial no: 835485 Version no:

TEST RECORD 00381

Sign Temp Date

05/27/24 10:36 , 666 Calibration Check:

20 85/27/24 18:36 ,186

Subject Name

Test #1

Subject I.D.
Maint, Chack

OPERATOR NAME, I.D. KAVANAUGH HOL

Location St. Obartos County

Aá

Media AS IV Serial no: 835485 Version no: 5328 TEST RECORD 66382 Q E Date

Calibration Check: 21 05/27/24 10:39 .100 85/27/24 18:39 ,868 AL BAR

Subject Name

7est # 2

Subject I.D.

Maint, Check

Operator Name, I.D. Kavanaugh 1161

St. Charles County

AS IV Serial no: 035485 Version no: 532B

Time Zigi 88 Calibration Check: 21 05/27/24 10:41 .099 TEST RECORD 00383 85/27/24 18:41 Tenr Date Air Blank:

Subject Name /es+#3

Subject I.D.

Maint Check

Operator Name, 1.11.
Kavanaugh 1164

Location St. Charlo County

A'd

AS IV Serial no: 035485 Version no:

TEST RECORD 80384

Time 216L UDID: RFI 12 05/27/24 18:45

Subject I.D. Plack Subject Name

Operator Name, I.D. Kawanaugh IVM

Location St. Charles County DA