





## 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 tim Send copy to Department of Health and Se	e of the regular monthly nior Services; retain orig	preventative mainter inal in department file	nance check, and e.	l whene	ver instrument is	s repaired
ALCO SENSOR IV SN 087959	PRINTER SN 210639922			DATE OF INSPECTION 12/24/2024		
LOCATION OF INSTRUMENT (STREET AND CITY) SCCPD / 101 Sheriff Dierker Court, O'	3		TIME OF INSPECTION 7:06 am			
CHECKLIST: Place a mark in the box by eaues where determined.) Unmarked items m			ing within establis	shed lim	its. (Write in obs	erved val-
DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)						
☑ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)						
PRINTER WORKING PROPERLY						
☑ TIME AND DATE DISPLAYING PROPERLY						
BREATH ALCOHOL ACCURACY STANDA	RDS					
☐ SIMULATOR SOLUTION ☐ COMPRESSED ETHANOL-GAS MIXTURE						
STANDARD SUPPLIER Intoximeters		LOT # AG407801		EXP. DATE 03/18/2026		
SIMULATOR TEMPERATURE (34°C ±	0.2°C) SIM	IULATOR SN	SIMULATOR EXP DATE			
less. Check the box corresponding to the 0.100% STANDARD - MUST REAL 0.080% STANDARD - MUST REAL 0.040% STANDARD - MUST REAL	) BETWEEN 0.095% an ) BETWEEN 0.076% an	d 0.105% INCLUSIVI d 0.084% INCLUSIVI	E E			
TEST 1 🖛 .101	TEST 2 ☞ .101		TEST 3 .101			
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 (004) 0	(.0509) 0	(.1014) 0	(.1519)	0	(OVER .19)	0
List any new parts and describe any alterati established limits (use other side if necessar		vas made to restore	the instrument to	operate	e satisfactorily a	nd within
NSPECTING OFFICER	HOLE THE THE	Karly No.	PRINT NAME	All I	1 7 1 76	4-9-
TYPE II PERMIT NUMBER/EXPIRATION DATE		1161	M. Kavanaugh			
2875 Jar	lcohol Program, MO Dep nes Boulevard luff, MO 63901	partment of Health an	(636) 949-3000 d Senior Services		east District Offi	ce

000 SELF St. Charles Canty AS TH Se at Mo: 087955 Version no: 5328 Subject 1. B. Week

Plaint Oner B. B. Kananaugh

Coast on Amanaugh TEST RECORD 00574 Air Blank; 127006 09 : Erat: on Check; 19 12/24/24 07:06 Subject Name Temp Date

Po Kavanayah Locat Ion Martes Gant Version no: 5328 7 me 210 Air Blank: 12/24/24 07:09 000 Calibration Check: 20 12/24/24 07:09 TEST RECORD 00575 Pant, Check Date Subject Name Hemp

45 V Ser at Mo: 087959 Version no: 5328 TEST RECORD 00577 7010: RF1 7010: RF1 12 12/24/24 07:13 Subject Name

184 3
Subject | Meck

Resistor Name

Resistor Name

Resistor

Resistor

St. Chartes Court AS ( Seria: no: 087959 Ve sion no: 5328 TEST REDOKO 00578 Temp Date Time Alf 9Blank; 24 07:11 Cal Bration Sheek 21 12:24/24 07:11 A

Subject Name (RFI)
Subject Obsert
Subject Name Obsert
Ro Kavanas
St. Charles & 2



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-Mar-2024

Lot # AG407801 Model 108

**Exp Date** 18-Mar-2026 Cyl. Type 108

Component Ethanol

**Certified Concentration** 0.100 ± 2% BrAC (272 ppm)

Nitrogen

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.** EB0010603 EB0010559 EB0010562 EB0010579

Concentration 392.5 ppm 258.9 ppm 104.2 ppm 52.94 ppm

CRM Serial No.

CC727481 CC727496 Concentration

799.4 ppm 253.4 ppm

CRM Serial No.

CC727493 CC727498

Concentration

389.8 ppm 150.2 ppm

Analytical Method: NDIR

Digitally signed by:Quality Control Reason:Dry gas standard certification of analysis Location:Airgas USA LLC (Lab) Date:03.22.2024 07:50

Approved for Release:

Yusef Woods

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 from a s 577.020 through 577.041, RSMo and 306.111 through 306.11	ample of expired air. Permit issued under the provisions of sections.
DATE1/31/2023	Mile Mason
	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 230017	Daves J. nichely
EXPIRES 1/31/2025	
MO 580-0771 (6-18)	DIRECTOR OF DEPARTMENT OF HEALTH AND SERVICES  LAB-4 (86-10)



STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES BREATH ALCOHOL PROGRAM

#### **INSTRUMENT OPERATOR CARD**

The named cardholder is authorized to operate an evidential breath elcohol instrument for the determination of the elcoholic content in breath form of expired air in Missouri.

Operator KAVANAUGH, MICHAEL Permit No. 230017 Date Issued 1/31/2023 Date Expire:

Date Expires 1/31/2025

