

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

42	Here war					
			of the regular monthly por Services; retain original		nce check, and whene	ever instrument is repaired.
ALCO SENSOR IV SN 087964			NAME OF AGENCY Vernon County S	NAME OF AGENCY Vernon County Sheriff's Office		INSPECTION 2024
	TION OF INSTRUMENT (TIME OF 5:07 p	INSPECTION m
			item if found to be satis corrected before using		vithin established limits	s. (Write in observed values
	☑ DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)					
	✓ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)					
	PRINTER WORKING	G PROPERLY				
	TIME AND DATE DIS	SPLAYING PROPER	RLY			
BRE	ATH ALCOHOL AC	CURACY STANDAR	RDS			
	SIMULATOR SOLUT	TON		☑ COMPRESSED	ETHANOL-GAS MIX	TURE
	STANDARD SUPPLI	ER Intoximeters	L	OT # AG310901	EXP. DATE <u>04/19/</u>	2025
	SIMULATOR TEMPE	ERATURE (34°C ± 0	.2°C) SII	M. SN	SIM. NIST EX	P 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 ▼ .080		TEST 2 ☞ .080		TEST 3 ☞ .079		
₽ F	RFI DETECTOR OPE	RATING				
	CATE THE NUMBER		TS IN THE FOLLOWIN TESTS)	G RANGES SINCE T	HE LAST MAINTENA	NCE REPORT:
REF	JSALS	(004)	(.0509)	(.1014)	(.1519)	(OVER .19)
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).						
INSP	ECTING OFFICER					
SIGNA		75			RINT NAME Michael Weisensee	
TYPE II PERMIT NUMBER/EXPIRATION DATE 240061 02/28/2026				100	TELEPHONE NUMBER (417) 283-4400	
Retu	rn completed repor		cohol Program, MO Del ax. or email.	partment of Health and	d Senior Services, Sou	theast District Office

	Location	Operator Wame, I.D.	Subject I. II.	AS IU Serial no: 087964 Uersion no: 532B TEST RECORD - REPRINT TEST RECORD 00922 Temp Jate Time 210L Air Blank: 06/07/24 17:17.000 Calibration Check: 20 06/07/24 17:17.000
A DESCRIPTION OF THE PROPERTY	Incation	Operator Name, I.D.	Subject I.D.	AS IV Serial no: 087964 Uersion no: 5328 TEST RICORD 06923 Femp Date Time 2161. Air Blank: 06/07/24 17:21 .000 Calibration Check: 21 06/07/24 17:21 .000
	Operator Name, I.D.	Subject I.D.	Subject Name	AS IV Serial not 887964 Uersion not 5328 TEST RECORD 86924 Temp Date Time 216L 66/87/24 17:23 .800 Calibration Check: 23 86/87/24 17:23 .879
The same of the sa	Location	Operator Name, I.D.	Subject I.D.	AS TU Serial not 087964 Wersion not 5328 TEST RICORD 00925 Temp Date Time 210L UDID: RFI 12 06/07/24 17:26 Subject Name



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: 20-Apr-2023

Lot # AG310901 Model 108

Exp Date

Cyl. Type

Component

Certified Concentration

19-Apr-2025

108

Ethanol Nitrogen 0.080 ± 0.002 BrAC (208 ppm)

Millogen

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

RGM Serial No.	Concentration	RGM Serial No.	Concentration
EB0010581	391.8 ppm	EB0010603	392.5 ppm
EB0010570	259.8 ppm	EB0010559	258.9 ppm
EB0010285	209.0 ppm	EB0010562	104.2 ppm
EB0010561	103.7 ppm	EB0010579	52.94 ppm
EB0010681	52.22 ppm		

CRM Serial No.	Concentration	CRM Serial No.	Concentration
CC727481	800.0 ppm	CC727493	390.0 ppm
CC727496	253.0 ppm	CC727498	150.0 ppm

Analytical Method: NDIR

Digitally signed by:Quality Control Reason:Dry gas standard certification of analysis Location:Airgas USA LLC (Lab) Date:04.20.2023 14:28

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 WEISENSEE

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

	nple of expired air. Permit issued under the provisions of sections
577.020 through 577.041, RSMo and 306.111 through 306.119	Mile Massmu
DATE2/28/2024	
	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 240061	Daves J. Nichelson
EXPIRES 2/28/2026	Turk s. 1 posterson
EXPINES ZIZOIZOZO	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES
MO 580-0771 (6-10)	LAB-4 (R6-10)



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 alcohol instrument for the determination of the alcoholic content in breath form of expired air in Missouri.

Operator WEISENSEE, MICHAEL

Permit No 240061

Date Issued 2/28/2024 Date Expires 2/28/2026

