

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 Send copy to Department of Health and Senio | | | | whenev | ver instrument is | repaired. |
|---|---|--|---------------------------------|--------------------|---------------------|-----------|
| ALCO SENSOR IV SN 087965 NAME OF AGENCY Cass County Sheriff's Office | | | | DATE OF 07/09/2 | INSPECTION 2024 | |
| LOCATION OF INSTRUMENT (STREET AND CITY) 2501 W. Mechanic, Harrisonville MO 64701 | | | | TIME OF I | INSPECTION n | |
| CHECKLIST: Place a mark in the box by each i where determined.) Unmarked items must be | | | within establishe | d limits. | (Write in observe | d values |
| ☑ DIGITAL READOUT (ALL ELEMENTS OPERATIONAL) | | | | | | |
| TEMPERATURE OF ALCO SENSOR (10 | ☑ TEMPERATURE OF ALCO SENSOR (10°C - 40°C) | | | | | |
| PRINTER WORKING PROPERLY | | | | | | |
| ☑ TIME AND DATE DISPLAYING PROPERI | LY | | | | | |
| BREATH ALCOHOL ACCURACY STANDAR | DS | 3 (M) 8 (8 3 3 3 3 3 3 4 3 4 3 4 3 4 3 4 3 4 3 4 | | | | |
| ☐ SIMULATOR SOLUTION | ☐ SIMULATOR SOLUTION ☐ COMPRESSED ETHANOL-GAS MIXTURE | | | | | |
| STANDARD SUPPLIER Intoximeters LOT # AG305102 EXP. DATE 02/20/2025 | | | | | | |
| ☐ SIMULATOR TEMPERATURE (34°C ± 0.2 | 2°C) SII | M. SN | SIM. N | IST EXF | 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 ★ .098 | EST 2 ☞ .099 | | TEST 3 → .098 | | | |
| ☑ 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) | (.1519) | 0 | (OVER .19) | 0 |
| List any new parts and describe any alteration established limits (use other side if necessary) | | was made to restore | the instrument to | o operat | te satisfactorily a | nd within |
| INSPECTING OFFICER | | | | | - | |
| SIGNATURE No. | # 65 | | PRINT NAME Sgt. Gary Cro | w | | |
| TYPE II PERMIT NUMBER/EXPIRATION DATE 220189 08/03/2024 | | | TELEPHONE NUMBER (816) 380-5200 | | | |
| 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: 087965
Version no: 5328

TEST RECORD 00789

Temp Date Time 21CL

Air Blank: 07/09/24 13:39 .060
Cellbrat or Check: 20 07/09/24 13:39 .099

Subject Name
Test
Subject ID.

Perator Name ID.

2501 un Michane
Location

TEST RECTRE 00750

TEST RECTRE 00750

Temp Date Time 2101

A. Blank:
07.09/24 13:42 000

Cst. ret on Check:
21 17/09/24 13:42 108

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| | TEST | RECO | RD/: | 0079 | | |
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AS IV Serial no: 087965
Version no: 532B

TEST RECORD 00792

Temp Date Time 210L

VOID: RFI
12 07/09/24 13:54

Subject Name

RFI Test

Subject I.D.

Craw 270/59

Operator Name, I.D.

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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-Feb-2023

Lot # AG305102 Model 108

Exp Date 20-Feb-2025 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 | 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 | | P P ···· |

 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:02.20.2023 17:37

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

GARY CROW

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, INTOX EC/IR II

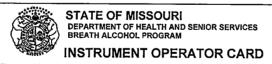
EXPIRES 8/3/2024

MO 580-0771 (6-10)

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

Daves I. nichelson

LAB-4 (R6-10)



The named cardholder is authorized to operate an evidential breath alcohol instrument for the determination of the alcoholic content in breath form of expired ail in Missouri.

Operator CROW, GARY Permit No 220189

Date Issued 8/3/2022 Date Expires 8/3/2024

