



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 the regular monthly preventative maintenance check, and whenever instrument is repaired. Send copy to Department of Health and Senior Services; retain original in department file.

| | | |
|--|--|----------------------------------|
| ALCO SENSOR IV SN 087972 | NAME OF AGENCY St. Louis County Police Department | DATE OF INSPECTION 10/28/2024 |
| LOCATION OF INSTRUMENT (STREET AND CITY) 232 Vance Rd | | TIME OF INSPECTION 6:26 pm |

CHECKLIST: Place a mark in the box by each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unmarked items must be corrected before using instrument.

DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)

TEMPERATURE OF ALCO SENSOR (10°C - 40°C)

PRINTER WORKING PROPERLY

TIME AND DATE DISPLAYING PROPERLY

BREATH ALCOHOL ACCURACY STANDARDS

SIMULATOR SOLUTION

COMPRESSED ETHANOL-GAS MIXTURE

STANDARD SUPPLIER Intoximeters LOT # AG332001 EXP. DATE 11/16/2025

SIMULATOR TEMPERATURE (34°C ± 0.2°C) _____ SIM. SN _____ SIM. NIST EXP DATE _____

CALIBRATION CHECK – (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)

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 • .101

TEST 2 • .100

TEST 3 • .100

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 | (0-.04) | 0 | (.05-.09) | 0 | (.10-.14) | 0 | (.15-.19) | 0 | (OVER .19) | 0 |
|----------|---|---------|---|-----------|---|-----------|---|-----------|---|------------|---|

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).

INSPECTING OFFICER

SIGNATURE

PRINT NAME
 SGT D ESTRADA, DSN 3072

TYPE / PERMIT NUMBER / EXPIRATION DATE
 230059 04/02/2025

TELEPHONE NUMBER
 (636) 529-8210

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: 067972
Version no: 532B

TEST RECORD 00771

Temp Date Time 210L

Air Blank:
10/28/24 18:23 .000
Calibration Check:
22 10/28/24 18:23 .100

Subject Name

Test #2

Subject I.D.

NA

Operator Name, I.D.

Sgt D. Estrada #3072

Location

(7th PCT)

232 Vance Rd

AS IV Serial no: 067972
Version no: 532B

TEST RECORD 00772

Temp Date Time 210L

Air Blank:
10/28/24 18:26 .000
Calibration Check:
22 10/28/24 18:26 .100

Subject Name

Test #1

Subject I.D.

NA

Operator Name, I.D.

Sgt D. Estrada #3072

Location

(7th PCT)

232 Vance Rd

AS IV Serial no: 067972
Version no: 532B

TEST RECORD 00773

Temp Date Time 210L

Air Blank:
10/28/24 18:32 .000
Calibration Check:
22 10/28/24 18:32 .100

Subject Name

REF!

Subject I.D.

NA

Operator Name, I.D.

Sgt D. Estrada #3072

Location

(7th PCT)

232 Vance Rd

AS IV Serial no: 067972
Version no: 532B

TEST RECORD 00772

Temp Date Time 210L

Air Blank:
10/28/24 18:31 .000
Calibration Check:
22 10/28/24 18:31 .100

Subject Name

Test #3

Subject I.D.

NA

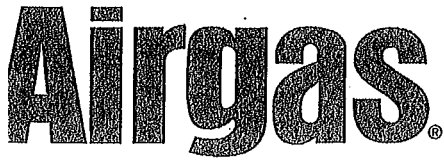
Operator Name, I.D.

Sgt D. Estrada #3072

Location

(7th PCT)

232 Vance Rd



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
 Analytical Instruments, Inc.
 1081 Craig Road
 St. Louis, Mo 63146

Test Date: 16-Nov-2023

Lot # AG332001 **Model** 108

| | | | |
|-----------------|------------------|---------------------|--------------------------------|
| Exp Date | Cyl. Type | Component | Certified Concentration |
| 3-Nov-2025 | 108 | Ethanol Nitrogen | 0.100 ± 2% BrAC (272 ppm) |

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 | 799.4 ppm | CC727493 | 389.8 ppm |
| CC727496 | 253.4 ppm | CC727498 | 150.2 ppm |

Analytical Method: NDIR

Digitally signed by: Quality Control
 Reason: Dry gas standard certification of analysis
 Location: Airgas USA LLC (Lab)
 Date: 11.20.2023 17:28

Approved for Release: Yusef Woods
 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**

DAWN M. ESTRADA

Permittee 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 DMT

For the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 806.111 through 806.119 RSMo.

ISSUED: 4/2/2023

BER: 230059

RES: 4/2/2025

Mike Massman

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

David J. Nicholson

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES