

### MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

#### ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

L SHIPPLY		
Complete this report in duplicate at the time of Send copy to Department of Health and Senio	of the regular monthly preventative mainter or Services; retain original in department file	nance check, and whenever instrument is repaired.
ALCO SENSOR IV SN 094804	PRINTER SN 09B.3589.546	DATE OF INSPECTION 06/07/2024
LOCATION OF INSTRUMENT (STREET AND CITY) 9701 Marion Park Drive, Kanas City, MC	) 64137	TIME OF INSPECTION 7:00 pm
CHECKLIST: Place a mark in the box by each	n item if found to be satisfactory or if operat	ing within established limits. (Write in observed val-
ues where determined.) Unmarked items mus	t be corrected before using instrument.	
DIGITAL READOUT (ALL ELEMENTS OF	PERATIONAL)	
TEMPERATURE OF ALCO SENSOR (10	°C - 40°C)	
PRINTER WORKING PROPERLY		
TIME AND DATE DISPLAYING PROPER	LY	
BREATH ALCOHOL ACCURACY STANDAR	DS	
☐ SIMULATOR SOLUTION	☑ COMPRESSE	D ETHANOL-GAS MIXTURE
STANDARD SUPPLIER INTOXIMETER	LOT # AG324501	EXP. DATE 09/02/2025
SIMULATOR TEMPERATURE (34°C ± 0.2	2°C) SIMULATOR SN	SIMULATOR EXP DATE
less. Check the box corresponding to the s 0.100% STANDARD - MUST READ B 0.080% STANDARD - MUST READ B	standard solution being used. (PRINTOUT A BETWEEN 0.095% and 0.105% INCLUSIVI BETWEEN 0.076% and 0.084% INCLUSIVI BETWEEN 0.038% and 0.042% INCLUSIVI	E
TEST 1 • 0.078	EST 2 - 0.078	TEST 3 <b>☞</b> 0.078
RFI DETECTOR OPERATING		
INDICATE THE NUMBER OF BREATH TESTS	S IN THE FOLLOWING RANGES SINCE	THE LAST MAINTENANCE REPORT:
(DO NOT INCLUDE SELF-ADMINISTERED T	ESTS)	
	(.0509) 0 (.1014) 0	(.1519) 1 (OVER .19) 5
List any new parts and describe any alteration established limits (use other side if necessary).	or modification that was made to restore	the instrument to operate satisfactorily and within
NSPECTING OFFICER		
SIGNATURE PO JULIUS J. Lill	11th #5126	PRINT NAME Jared T. Littleton
230323 - 12/21/2025		TELEPHONE NUMBER (816) 218-9393
2875 Jame	phol Program, MO Department of Health an s Boulevard f, MO 63901	d Senior Services, Southeast District Office

AS IV Serial no: 094804 Version no: 532B

TEST RECORD 01322

9/ Temp Date Time 2180

Air Blank: 06/07/24 19:00 .000 Calibration Check: 27 06/07/24 19:00 .078

Subject Name

Subject I.D.

Operator Name, I.D.

Littlean Sollo

Location

230323

12/21/25

AS IV Serial no: 094804 Version no: 532B

TEST RECORD 01323

Temp Date Time 210%

Air Blank:

86/87/24 19:01 .000.

Calibration Check: 27 06/07/24 19:01 .078

Subject Name

Test#2

Subject I.D.

Operator Name, I.D.

Littleton 5626

Location

230323

12/21/25

AS IV Serial no: 094804 Version no: 532B

TEST RECORD 01324

Temp Date Time 210%

Air Blank: 06/07/24 19:04 .000

Calibration Check: 28 06/07/24 19:04 .078

Subject Name

To+#3

Subject I.B.

Operator Name, I.D.

Littleton 5626

Location

230323

12/21/25

AS IV Serial no: 094804 Version no: 532B

TEST RECORD 01325

Temp Date Time 210).

VOID: RFI

12 06/07/24 19:06

Subject Name

RFI Test

Subject I.D.

Operator Name, I.D.

Littlelan 5626

Location

230323

12/21/25



### DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE OF MISSOURI



# BREATH ALCOHOL PROGRAM

### JARED LITTLETON PERMIT TYPE !!

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, INTOXILYZER 8000

for the determination of the alcoholic content of blodd from seampte of expired at Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 308.119 RSMo.

OFFICE DIRECTIONS OF THE PROPERTY OF THE PROPE	Mile Mayor
DATE 12/21/2023	Little I month.
	OFFICIAL OF STATE PUBLIC HEALTH CARRYLORY
NUMBER 230323	)
EXPIRES 12/21/2025	Sange J. Descary
	DIRECTOR OF DEPARTMENT OF HEALTH AND SENJOR SERVICES
JJD 583-0771 (8-10)	LAB./ (R8-/0)





Airgas USA LLC (LA5) 3500 Bernard Stroet SI, Louis, Mo. 53103 Ph. (314) 533-3100 Fax: (314) 533-7328

## Certificate of Analysis

Test Date: 5-Sep-2023

Customer Name
Exclusive Supplier
Intoximeters, Inc.
2081 Craig Road
St. Louis, Mo 83146

Lot # AG324501 Model 108

Certified Concentration 0.082 ± 0.002 BrAC (223 ppm)

Exp Date 2-Sep-2025 Component Ethanol

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

222	S 8 8 8 8 8
CRM Serial No. CC727481 CC727496	RGM Serial No. EB0010591 EB0010570 EB0010285 EB0010561 EB0010561
Concentration 8000 ppm 2530 ppm	Conventration 39.4 ppm 259.8 ppm 209.0 ppm 209.0 ppm 1037 ppm 1027 ppm
CRM Serial No. CC727493 CC727498	RGM Serial No. EB0010603 E80010559 E80010562 EB0010579
Concentration 390.0 ppm 150.0 ppm	Concentration 392.5 ppm 250.9 ppm 104.2 ppm 52.94 ppm

Analytical Method: NDIR

Approved for Release:

Yusef Woods

ISO 1703:2017 A2LA accredited. Certificate Number 3082.06 ISO 17034:2016 A2LA accredited. Certificate Number 3082.07

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