

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

- allifetts						
Complete this report in d Send copy to Departmen					whenever instrument is repaired.	
ALCO SENSOR IV SN 097403/099.3586.830		NAME OF AGENCY Shrewsbury PD		DATE OF INSPECTION 11/27/2024		
LOCATION OF INSTRUMENT (4400 Shrewsbury Ave					TIME OF INSPECTION 5:00 pm	
		h item if found to be sati	sfactory or if operating	within established	limits. (Write in observed values	
where determined.) Unm	arked items must b	e corrected before using	instrument.			
DIGITAL READOUT	(ALL ELEMENTS	OPERATIONAL)	decident services and services are serviced as a service and serviced as a serviced as a service and serviced as a serviced as a service and serviced as a			
☑ TEMPERATURE OF	ALCO SENSOR (1	0°C - 40°C)		Ξ		
PRINTER WORKING	G PROPERLY					
TIME AND DATE DI	SPLAYING PROPE	RLY				
BREATH ALCOHOL AC	CURACY STANDA	RDS				
☐ SIMULATOR SOLUTION ☑ COMPRESSED ETHANOL-GAS MIXTURE						
☑ STANDARD SUPPL	IER Intoximeters	nc	C LOT # AG414905 EXP. DATE		5/28/2026	
☐ SIMULATOR TEMP	ERATURE (34°C ±	0.2°C) S	IM. SN	SIM. NIS	ST EXP DATE	
		D BETWEEN 0.076% at D BETWEEN 0.038% at		E		
TEST 176		TEST 2 ★ .76		TEST 3 ☞ .76		
RFI DETECTOR OPE	ERATING					
INDICATE THE NUMBER			NG RANGES SINCE	THE LAST MAINT	FENANCE REPORT:	
·			(.1014)	(.1519)	(OVER .19)	
REFUSALS List any new parts and destablished Ilmits (use of Instrument functioning	her side if necessa	y).	was made to restore		operate satisfactorily and within	
INSPECTING OFFICER SIGNATURE TYPE II PERMIT NUMBERVEXPIRAT 230200-09/07/2025	123	,		PRINT NAME Zachery King TELEPHONE NUMBER (314) 647-565	6	
Return completed repo		alcohol Program, MO Defax, or email.	epartment of Health a	<u> </u>	s, Southeast District Office	
					1204	

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TF STA 123 CRUMUG 175 SPD

TRIM 123 123 123 123 123 123

> 72572L 125 175 175 8 175

TESTA.
123
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129

N

State of Missouri 5738409139 12/02/2024 10:00AM Pg 03/05



Airgas USA LLC (LAB) 3500 Bernard Street St. Louis, Mo. 63103 Ph: (314) 533-3100 Fax: (314) 633-7328

Certificate of Analysis

Customer Name Exclusive Supplier Intoximeters, Inc. 2081 Craig Road St. Louis, Mo 63146 Test Date: 29-May-2024

Lot # AG414905 Model 108

Exp Date 28-May-2026 Cyl. Type 108

Component Ethanol

Certified Concentration 0.080 ± 0.002 BrAC (218 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 EB0010561

209.0 ppm 103.7 ppm 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

EB0010681

Concentration 799.4 ppm 253.4 ppm

CRM Serial No. CC727493 CC727498

Concentration 389.8 ppm 150.2 ppm

CC727496 Analytical Method: NDIR

Approved for Release:

Yusef Woods

ISO 17025:2017 A2LA accredited. Certificate Number 3082.06 ISO 17034:2016 A2LA accredited. Certificate Number 3082.07

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STATE OF MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES BREATH ALCOHOL PROGRAM



PERMIT TYPE II

ZACHERY KING

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 sample of expired air, Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE9/7/2023	Mile Massin			
UNIE	DIRECTOR OF STATE PLIBLIC HEALTH LABORATORY			
NUMBER 230200	Daves I. nielseler			
EXPIRES 9/7/2025	DIRECTOR OF DEPARTMENT OF HEALTH AND SERVICES			
MO 580-0771 (\$-10)	LAS-4 (R6-10			

