

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

# RECEIVED By Tracy Crews at 7:12 am, Jun 27, 2024

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

**REPORT #7** 

<b>人名德</b>						
Complete this report in d Send copy to Departmen	•	• • • • • • • • • • • • • • • • • • • •			ever instrument is repaired.	
ALCO SENSOR IV SN 097425		NAME OF AGENCY St. Louis County	Police Department	l l	INSPECTION	
LOCATION OF INSTRUMENT (14301 S. Outer 40 Rd.				TIME OF	INSPECTION	
		itom if found to be eatie	factory or if approxima		s. (Write in observed values	
where determined.) Unm				Within established limits	. (Write in observed values	
✓ DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)						
✓ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)						
PRINTER WORKING PROPERLY						
✓ TIME AND DATE DISPLAYING PROPERLY						
BREATH ALCOHOL AC	CURACY STANDAR	RDS				
☐ SIMULATOR SOLUTION				TURE		
STANDARD SUPPLI	IER Intoximeters	L	OT # AG321505	EXP. DATE 08/03/	2025	
☐ SIMULATOR TEMPE	ERATURE (34°C ± 0	.2°C) SII	И. SN	SIM. NIST EX	P DATE	
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 1098	-	TEST 2 🕶 .098		TEST 3097		
☑ RFI DETECTOR OPE	ERATING					
INDICATE THE NUMBER (DO NOT INCLUDE SEL			G RANGES SINCE	THE LAST MAINTENA	NCE REPORT:	
REFUSALS	(004)	(.0509)	(.1014)	(.1519)	(OVER .19)	
List any new parts and d established limits (use oth	-		vas made to restore	the instrument to opera	te satisfactorily and within	
INSPECTING OFFICER						
SIGNATURE PLOY	410-		M		RINT NAME Michael White	
TYPE II PERMIT NUMBERJEXPIRATION DATE 230233 10/31/2025				(636) 529-8210		
Return completed repor		cohol Program, MO Dep	partment of Health ar	nd Senior Services, Sou	theast District Office	

TEST RECORD 60803

TEST RECORD 60803

Temp Date Time 210L

Air Blank: 96/26/24 13:89 .000
Calibration Check: 22 06/26/24 13:89 .098

Subject Name

Test
Subject Name

Test

Cherator Name, 1.11.

14301 5,00 for 40

TEST RECORD 60804
TEST RECORD 60804
Temp Date Time 210L
Air Blank:
66/26/24 13:11 .000
Calibration Check:
23 86/26/24 13:11 .898
Subject Name
Subject T.D.
Operator Name, J.D.

TEST RECORD 60805

TEST RECORD 60805

Temp Date Time 210L

Air Dlank' 66/26/24 13113 .000

Calibration Check: 24 96/26/24 13113 .007

Subject Name

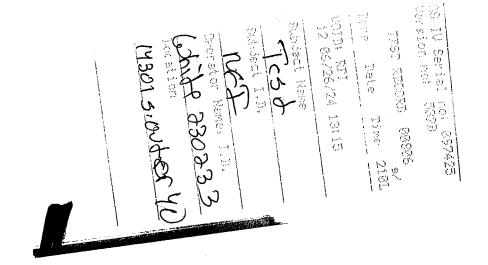
Subject I.M.

3

Occrator Manes I.M.

Location

M301 5.044 Yord





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: 3-Aug-2023

Lot # AG321505 Model 108

**Exp Date** 

Cyl. Type

Component

**Certified Concentration** 

3-Aug-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
EB0010603	392.5 ppm
EB0010559	258.9 ppm
EB0010562	104.2 ppm
EB0010579	52.94 ppm

**CRM Serial No.** CC727481 CC727496

Concentration 800.0 ppm 253.0 ppm

**CRM Serial No.** CC727493 CC727498

Concentration 390.0 ppm 150.0 ppm

Analytical Method: NDIR

Digitally signed by:Quality Control Reason:Dry gas standard certification of analysis Location:Argas USA LLC (Lab) Date:08.03.2023 17:58

Approved for Release:

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

### MICHAEL WHITE

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

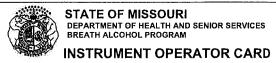
## ALCO-SENSOR IV WITH PRINTER, INTOX DMT

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 306.111 through 306.119 RSMo.

SANOZO URBUGU SANOHI, MSIMB BIIO SUBJITE IMBUGU SUBJITE IN	Mile Mason
DATE 10/31/2023	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 230233	
EXPIRES 10/31/2025	Double J. Nucleelson  DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES
	A A POLICE AND A COMPANY OF A C

MO 580-0771 (6-10)

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 air in Missouri.

Operator WHITE, MICHAEL

Permit No 230233

Date Issued 10/31/2023 Date Expires 10/31/2025

