

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

### ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

* VECANT	<b></b>			•••••
Complete this report in duplicate at the time of Send copy to Department of Health and Senior	the regular monthly pre Services; retain origina	eventative mainten	ance check, and when	ever instrument is repaired.
ALCO SENSOR IV SN 097430	PRINTER SN 096.3580.928	<u> </u>	DATE O	OF INSPECTION 6/2024
LOCATION OF INSTRUMENT (STREET AND CITY) 205 N Lexington St Harrisonville MO 6470	)1		7iME 0 6:26	F INSPECTION am
CHECKLIST: Place a mark in the box by each	item if found to be satisf	factory or if operation	ng within established lii	mits. (Write in observed val-
ues where determined.) Unmarked items must	be corrected before using	ng instrument.		\$200 E
	ERATIONAL)			
TEMPERATURE OF ALCO SENSOR (10°	C - 40°C)			
PRINTER WORKING PROPERLY				
☐ TIME AND DATE DISPLAYING PROPERL	Y			
BREATH ALCOHOL ACCURACY STANDARD	S	***		
SIMULATOR SOLUTION	1	COMPRESSE	D ETHANOL-GAS MIX	TURE
STANDARD SUPPLIER Intoximeters	LO	T # AG304703	EXP. DATE 02/16/	/2025
SIMULATOR TEMPERATURE (34°C ± 0.2°	°C) SIMUL	ATOR SN	SIMULATOR	EXP DATE
less. Check the box corresponding to the st.  0.100% STANDARD - MUST READ BI 0.080% STANDARD - MUST READ BI 0.040% STANDARD - MUST READ BI	ETWEEN 0.095% and 0 ETWEEN 0.076% and 0	0.105% INCLUSIVE 0.084% INCLUSIVE		
TEST 1 <b>≠</b> 0.080	TEST 2 - 0.079		TEST 3   0.079	
RFI DETECTOR OPERATING				
INDICATE THE NUMBER OF BREATH TESTS (DO NOT INCLUDE SELF-ADMINISTERED TE	IN THE FOLLOWING	RANGES SINCE T	HE LAST MAINTENA	NCE REPORT:
REFUSALS 0 (004) 0 (	(.0509) 0	1014) 0	(.1519) 0	(OVER .19) 0
List any new parts and describe any alteration established limits (use other side if necessary).	or modification that was	s made to restore t	he instrument to opera	ate satisfactorily and within
INSPECTING OFFICER				
SIGNATURE #284			PRINT NAME R. Stark	
1996 H PERMIT NUMBER/EXPIRATION DATE 230174 08/08/2025			TELEPHONE NUMBER (816) 380-8940	
Return completed report to the: Breath Alcoh 2875 James Poplar Bluff,	Boulevard	tment of Health an		theast District Office

AS IV Serjal no: 097430 Version no: 53/3	AS IV Serial no: (497439)
TEST RECORD 6:042	2371
Temp Date Time 210L	TEST RECORD (6) 843
Air Blank:  08/26/24 06:26.000 Calibration Check:  22 08/26/24 06:26.080  Subject Name  [05] #  Subject I.B.  5 TACK #289  Deerator Name, 1.31.  [PD] Location	Temp Date Time 210L  Air Blank:  08/26/24 06:78 .080  Calibration Check:  22 08/26/24 06:78 .079  Subject Name  Test #7°  Subject I.D.  STACK #89  Operator Name, I.D.  HPO  Location
15	
AS IV Serial no: (197430 Version no: 537):	
TEST RECORD (0)044  Sept. 10 S	AS IV Serial no: (197430 Version no: 532):
Air Blank:  08/26/24 06:30 .080 Calibration Check: 23 08/26/24 06:30 .079 Subject Hame  Test#3 Subject I.D.  STARK #201 Operator Name, 1.0.  HPD Location	TEST RECORD (1) 045  Sy Temp Date Time 210L  VOID: RFI 12 08/26/24 06:32  Subject Hang  KFI  Subject I.D.  STARK TWO  Operator Name, 1.1.  HPD  Location



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: 16-Feb-2023

Lot # AG304703 Model 108

Exp Date 16-Feb-2025 Cyl. Type

108

Component

Ethanol

Nitrogen

**Certified Concentration** 

0.080 ± 0.002 BrAC (218 ppm)

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

**RGM Serial No.** Concentration EB0010581 391.8 ppm 1 EB0010570 259.8 ppm EB0010285 209.0 ppm EB0010561 103.7 ppm EB0010681 52.22 ppm

EB0010603 EB0010559 EB0010562

**RGM Serial No.** 

Concentration 392.5 ppm 258.9 ppm 104.2 ppm

EB0010579

52.94 ppm

**CRM Serial No.** CC727481

Concentration mag 0.008 253.0 ppm

**CRM Serial No.** CC727493

CC727498

390.0 ppm 150.0 ppm

Concentration

CC727496 Analytical Method: NDIR

Digitally signed by:Quality Control Reason:Dry gas standard certificat Location/Airgas USA LLC (Lab)

Approved for Release:

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

## TYPE I Supervexue



#### STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES **BREATH ALCOHOL PROGRAM** 



# PERMIT TYPE II

## RYAN STARK

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

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.

DATE8/8/2023	Mike Massur
NUMBER 230174	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
EXPIRES 8/8/2025	Daves I. Nichelson
MO 580-0771 (6-10)	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES  LA8-4 (R6-10)



STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES BREATH ALCOHOL PROGRAM

#### INSTRUMENT OPERATOR CARD

The named cardholder is euthorized to operate an evidential breath elcohol instrument for the determination of the alcoholic content in breath form of expired al in Missouri

Operator STARK, RYAN

Permit No 230174

Date Issued 8/8/2023 Date Expires 8/8/2025

