



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

, 195K62.						
Complete this report in duplicate at the time of Send copy to Department of Health and Senior				whenev	er instrument is r	epaired.
ALCO SENSOR IV SN 100288	NAME OF AGENCY St. Louis County Police Department				NSPECTION 024	
LOCATION OF INSTRUMENT (STREET AND CITY) 14301 South Outer Forty Road, St. Louis,	MO 63017			TIME OF II 11:10 a	NSPECTION M	
CHECKLIST: Place a mark in the box by each it	em if found to be satisf	actory or if operating	within establishe	ed limits.	(Write in observe	d values
where determined.) Unmarked items must be c						
DIGITAL READOUT (ALL ELEMENTS OP	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		☑ COMPRESSE	D ETHANOL-GA	AS MIXTU	JRE	
✓ STANDARD SUPPLIER Intoximeters	L(OT # AG321505	EXP. DATE	08/03/2	025	
SIMULATOR TEMPERATURE (34°C ± 0.2	°C) SIN	л. SN	SIM. N	IST 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 						
	EST 2 ☞ .102		TEST 3 🖝 .10	<u> </u>		
	.102		11010.0			
INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT: (DO NOT INCLUDE SELF-ADMINISTERED TESTS)						
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).		ras made to restore	the instrument to	o operate	e satisfactorily an	d within
Updated time						
	•					
		N.				
INSPECTING OFFICER						
SIGNATURE			PRINT NAME			
· Poto 653		*****	PO Tosie DSN 4553			
TYPE II PERMIT NUMBER/EXPIRATION DATE 240128 05/29/2026		,	(636) 529-82°			
Return completed report to the: Breath Alco	ohol Program, MO Dep	partment of Health a	nd Senior Servic	es, South	neast District Office	се
, Syman, iar	.,					

AS IV Serial no: 100288 Version no: 532B TEST RECORD - REPRINT TEST RECORD 00882 Temp Date Time 210L Air Blank: 11/26/24 11:10 .000 Calibration Check: -19 11/26/24 11:10 .103 Subject Name Subject I.D. Operator Name: I.D.

Location

AS IV Serial no: 100288 Version no: 5328

TEST RECORD 00883

Temp Date Time 2101

Air Blank:

11/26/24 11:13 .000 Calibration Check: 20 11/26/24 11:13 .102

Subject Name

TO9 #12

Subject I.D.

Operator Mame: I.D.

POTONE 455

Location

My Lilam

AS IV Serial no: 190288 Version no: 532B

TE	ST RECOR	ar aas	384
1.50			97
Telde	Date	Time	ZIML
*** **** **** ***	F 1 170% AMERICAN ALIAN STREET AT AN		
Air B	lank:		
	1/26/24		.000
	ation (
21 15	726724	11:15	. 192
	er i de ver den en er (de dan denne) e	- 18-111-11-11-18-1-1-18-1-18-1-18-1-18	
Subjec	ct Name		
\-	Test #	a	
*****	16777	F)	L. Byrthalder in the Control of the Control
Subjec	t L.D.		
	NIA		
	or Name		
P	on Time	4333	
Locati			
May	OT TO	C	

ACC THE COURT OF THE ACCOUNTS
-AS IV Serial no: 100288 - -Version no: -5328
The first term of the control of the
THOT RECORD 60885
12mm Date Time 210L
VOID: RFI 12 11/26/24 11:16
Subject Name
RFI
Subject I.D.
NIA
Operator Name: I.D.
POITONE 4579
Location
MOYOT TMC



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 M	oae	I 108
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Exp Date

Cyl. Type

Component

Certified Concentration

3-Aug-2025

108

Ethanol Nitrogen 0.100 ± 2% BrAC (272 ppm)

1

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

Concentration **RGM Serial No. RGM Serial No.** Concentration 392.5 ppm EB0010603 EB0010581 391.8 ppm 258,9 ppm EB0010559 EB0010570 259.8 ppm 104.2 ppm EB0010562 EB0010285 209.0 ppm 52.94 ppm EB0010579 103.7 ppm EB0010561 EB0010681 52.22 ppm

CRM Serial No. CC727481 Concentration 800.0 ppm

CRM Serial No. CC727493 Concentration 390.0 ppm

150.0 ppm

CC727496

253.0 ppm

CC727498

190

Analytical Method: NDIR

Digitally eigned by:Quality Control Resson;Dry gas atendard certification of analysis Location;Airgas USA LLC (Leb) Date:08.03.2023 17:58

Approved for Release:

Yusef Woods

ISO 17025:2017 A2LA accredited. Certificate Number 3082.08 ISO 17034:2016 A2LA accredited. Certificate Number 3082.07



STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES BREATH ALCOHOL PROGRAM



ROBERT TOSIE

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 WI	TH PRINTER, INTOX DMT
for the determination of the alcoholic content of blood from: 577.020 through 577.041, PISMo and 306.111 through 306	a sample of expired air. Permit issued under the provisions of sections 1.119 FISMo.
DATE	Mile Magazin
NOMBER 240128	DIFFERITIR OF STATE PLANIC HEALTH LABORATORY
EXPIGES 5/29/2026	DIMEDION OF DEPARTMENT OF HEADYLAND SERVICES
(作物(6)(274)。(4)(3)	EADSKIPREDI.