

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

ARTHUR P.					
Complete this report in du Send copy to Department					ever instrument is repaired.
ALCO SENSOR IV SN 107460		NAME OF AGENCY MARSHALL PD		DATE 01 05/03	F INSPECTION /2024
LOCATION OF INSTRUMENT (STREET AND CITY) MARSHALL PD 461 W. ARROW MARSHALL MO 65340				TIME OF 2:25 a	FINSPECTION am
CHECKLIST: Place a mar	k in the box by each	item if found to be satis	factory or if operating	within established limit	s. (Write in observed values
where determined.) Unma	arked items must be	corrected before using	instrument.		
☑ DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)					
☑ TEMPERATURE OF	ALCO SENSOR (10	0°C - 40°C)			
PRINTER WORKING	PROPERLY				
☑ TIME AND DATE DIS	PLAYING PROPER	RLY			
BREATH ALCOHOL ACC	CURACY STANDAR	RDS			
☐ SIMULATOR SOLUT	ION		☑ COMPRESSE	D ETHANOL-GAS MIX	TURE
☑ STANDARD SUPPLI	ER INTOXIMETER	۲	OT # AG319805	EXP. DATE 07/17	/2025
☐ SIMULATOR TEMPE	RATURE (34°C ± 0	.2°C) SII	М. SN	SIM. NIST EX	KP 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 					
TEST 1 • .098		TEST 2 🖛 .097		TEST 3 🖝 .096	
☑ RFI DETECTOR OPE	RATING				
INDICATE THE NUMBER			G RANGES SINCE	THE LAST MAINTENA	ANCE REPORT:
(DO NOT INCLUDE SEL	r-ADMINISTERED		1	î .	Ĭ
REFUSALS	(004)	(.0509)	(.1014)	(.1519)	(OVER .19)
established limits (use oth			vas made to restore	the instrument to oper	ate satisfactorily and within
INSPECTING OFFICER	1/-1			PRINT NAME	
· M. Bak Mendeencery				M. BLAKE MONTO	SOMERY
TYPE II PERMIT NUMBER/EXPIRATION DATE 220216 09/02/2024				(660) 886-7411	
Patura completed renov	t to the: Breath Al	cohol Program, MO De	partment of Health a	nd Senior Services. So	utheast District Office

by mail, fax, or email.

A. I. Control of the Park	nate	1146	2400
Air Bl	lank: 5/03/24	02:29	BBB
Calibr	ation C 5/03/24	heck:	
		67 - 70 (070
	t Name	1	
Subjec	t I.D.		
		-	
Operat	tor Name	7202	6
Tocs!	ion	99021	
ME	O		
AS IV	Serial	no: 18	7460
Versi	on no:	532B	
Versi TE	on no: ST RECOI	532B RD 011	98
Versi TE Temp	on no: ST RECOI	532B RD 011	98
Temp Air B	on no: ST RECOI Date Clank: 15/03/24	532B RD 011 Time 02:29	90 9/ 21 0L
TEMP Air B	on no: ST RECO Date	532B RD 011 Time 02:29 Check:	90 9/ 21 0L
TEMP Air B Calib 24 8 Subje	Date Date Clank: 15/03/24 ration (15/03/24	532B RD 011 Time 02:29 Check:	90 9/ 210L .000
Temp Air B Calib 24 8 Subje	Date Date lank: 15/03/24 ration (15/03/24 ct Name	532B RD 011 Time 02:29 Check:	90 9/ 210L .000
TEMP Air B Calib 24 8 Subje	Date Date lank: 15/03/24 ration (15/03/24 ct Name	532B RD 011 Time 02:29 Check:	90 9/ 210L .000
Temp Air B Calib 24 8 Subje	Date Date lank: 15/03/24 ration (15/03/24 ct Name	532B RD 011 Time 02:29 Check: 02:29	90 9/ 210L .000
Temp Air B Calib 24 8 Subje	Date Plank: 15/03/24 Pration (15/03/24 Port Name Port I.D.	532B RD 011 Time 02:29 Check: 02:29	90 9/ 210L .000 .097
Temp Air B Calib 24 8 Subje	Date Plank: 15/03/24 Pration (15/03/24 Port Name Port I.D.	532B RD 011 Time 02:29 Check: 02:29	90 9/ 210L .000 .097

AS IV Serial no: 107460

TEST RECORD 01189

Version no: 5328

AS IV Serial no: 107460 Version no: 532B

TEST RECORD 01192

Temp Date Time 210L

VOID: RFI 12 05/03/24 02:33

Subject Name

Test RFI Subject I.D.

Operator Name: I.D.

Montgomen 220216

MPD



Airgas USA LLC (LAB) 3500 Bernard Street

St. Louis, Mo. 63103 Ph: (314) 533-3100 Fax: (314) 533-7328

Certificate of Analysis

Customer Name Test Date: 18-Jul-2023

Exclusive Supplier Intoximeters, Inc. 2081 Craig Road St. Louis, Mo 63146

Lot # AG319805 Model 108

Exp DateCyl. TypeComponentCertified Concentration17-Jul-2025108Ethanol0.100 ± 2% BrAC (272 ppm)Nitrogen

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

RGM Serial No.	Concentration	RGM Serial No.	Concentration
EB0010581	391.8 ppm	EB0010603	392.5 ppm
EB0010570	259.8 ppm	EB0010559	258.9 ppm
EB0010285	209.0 ppm	EB0010562	104.2 ppm
EB0010561	103.7 ppm	EB0010579	52.94 ppm
EB0010681	52.22 ppm		

 CRM Serial No.
 Concentration
 CRM Serial No.
 Concentration

 CC727481
 800.0 ppm
 CC727493
 390.0 ppm

 CC727496
 253.0 ppm
 CC727498
 150.0 ppm

Analytical Method: NDIR

Digitally signed by:Quality Control Reason:Dry gas standard certification of analysis Location:Airgas USA LLC (Lab) Date:07.20.2023 14:53

Approved for Release: North Marsala

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

M. BLAKE MONTGOMERY

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

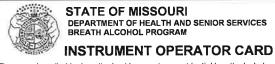
ALCO-SENSOR IV WITH PRINTER, INTOX DMT

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.

DATE	9/2/2022	
57(1)		DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER	220216	Davla J. Nichelson
EXPIRES 9/2/2024	+ current sail franchis	
	ALTERNATION OF THE PROPERTY OF	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

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 ali in Missour.

Operator MONTGOMERY, M.

Permit No 220216

Date Issued 9/2/2022 Date Expires 9/2/2024

