

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

A SHEALY					
	e of the regular monthly preventative maintena enior Services; retain original in department file.	nce check, and whenever instrument is repaired.			
ALCO SENSOR IV SN 107999	NAME OF AGENCY CLAY COUNTY SHERIFF'S OFFICE	DATE OF INSPECTION 12/17/2024			
LOCATION OF INSTRUMENT (STREET AND CITY) 12 S. WATER STREET, LIBERTY, MO 64068		TIME OF INSPECTION 8:25 pm			
CHECKLIST: Place a mark in the box by ea	ch item if found to be satisfactory or if operating	within established limits. (Write in observed values			
where determined.) Unmarked items must					
DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)					
☑ TEMPERATURE OF ALCO SENSOR	(10°C - 40°C)				
PRINTER WORKING PROPERLY					
☑ TIME AND DATE DISPLAYING PROP		,			
BREATH ALCOHOL ACCURACY STAND	ARDS				
☐ SIMULATOR SOLUTION	☑ COMPRESSED	ETHANOL-GAS MIXTURE			
STANDARD SUPPLIER INTOXIMET	STANDARD SUPPLIER INTOXIMETER LOT # AG407603 EXP. DATE 03/16/2026				
☐ SIMULATOR TEMPERATURE (34°C ±	: 0.2°C) SIM. SN	SIM. NIST EXP 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 1102	TEST 2 ▼ .099	TEST 3 - ,099			
☑ RFI DETECTOR OPERATING					
INDICATE THE NUMBER OF BREATH TE (DO NOT INCLUDE SELF-ADMINISTERE	STS IN THE FOLLOWING RANGES SINCE T D TESTS)	HE LAST MAINTENANCE REPORT:			
REFUSALS 0 (004) 0	(.0509) 0 (.1014) 1	(.1519) 0 (OVER .19) 0			
List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary). CHANGE CLOCK TO REFLECT DAYLIGHT SAVINGS CHANGEOVER					
Nac					
INSPECTING OFFICER					
SIGNATURE 1770		PRINT NAME JAMES BUSH			
TYPE II PERMIT NUMBER/XPIRATION DATE		TELEPHONE NUMBER			
230285 - 12/06/2025		(816) 407-3700			
	Alcohol Program, MO Department of Health an	d Senior Services, Southeast District Office			

AS IV Serial no: 107999
Version no: 532B

TEST RECORD 00499

Temp Date Time 2101.

Air Blank:
 12/17/24 20:30 .000

Calibration Check:
 22 12/17/24 20:30 .099

Subject Name

Monthly Maintenance:
Subject I.D.

Test 2

Operator Name: I.D.

J. Bush #2001:
Location

14 S. Water St.,

Liberty, Mo.

AS IV Serial no: 187999
Version no: 5328

TEST RECORD 00500

Temp Date Time 2101.

Air Blank?
12/17/24 20:32.000
Calibration Check:
23 12/17/24 29:32.099

Subject Name
Monthly Maintenance
Subject I.D:

Test 3

Operator Hame. I.D.

J. Bush # 2001
Location
14 S. Water St.,

Liberty, Mo-

Terre Terre Time 2181.

Terre Terre Time 2181.

Monthly Maintenance

T. Eval #5301

T. Eval #5301

L. berty, MD

Airgas.

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 Cralg Road St. Louis, Mo 63146 Test Date: 18-Mar-2024

Lot # AG407603 Model 108

Exp Date 16-Mar-2026 Cyl. Type 108

Component

Ethanol Nitrogen **Certified Concentration**

0.100 ± 2% BrAC (272 ppm)

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
GC727481	799.4 ppm	GC727493	389,8 ppm
GC727496	253.4 ppm	GC727498	150,2 ppm

Analytical Method: NDIR

Digitally signed by:Quality Control Resson:Dry gas standard cortification of analysis Location:Afrips USA LLC (Leb) Data:03.22.2024 07:48

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 JAMES S. BUSH

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.

DATE12/6/2023	Lama & Way
	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 230285	Donal S. Kann
EXPIRES 12/6/2025	
	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES
IO 580-0771 (6-10)	LAR-4 (R6-10)



STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES BREATH ALCOHOL PROGRAM

INSTRUMENT OPERATOR CARD

The named cardholder is authorized to operate an evidential breath alcohol instrument for the determination of the elcoholic content in breath form of expired all in Missourd

Operator BUSH, JAMES

Permit No 230285

Date Issued 12/6/2023 Date Expires 12/6/2025

