





MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

Complete this report in duplicate at the time of t Send copy to Department of Health and Senior				whenev	ver instrument is (repaired.	
ALCO SENSOR IV SN 108388				DATE OF INSPECTION 07/31/2024			
LOCATION OF INSTRUMENT (STREET AND CITY) 14301 South Outer Forty Road, St. Louis, M		TIME OF INSPECTION 5:43 pm					
CHECKLIST: Place a mark in the box by each item if found to be satisfactory or if operating within established limits. (Write in observed values							
where determined.) Unmarked items must be corrected before using instrument.							
✓ DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)							
✓ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)							
☑ PRINTER WORKING PROPERLY							
TIME AND DATE DISPLAYING PROPERLY							
BREATH ALCOHOL ACCURACY STANDARDS							
☐ SIMULATOR SOLUTION	TOR SOLUTION						
✓ STANDARD SUPPLIER Intoximeters	L(OT # AG321505	EXP. DATE	08/03/2	2025		
SIMULATOR TEMPERATURE (34°C ± 0.2°C) SIM. SN SIM. NIST EXP DATE							
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 ★ .100 TE	ST 2 🖛 .099		TEST 3 ☞ .09	9			
☑ RFI DETECTOR OPERATING							
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 or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary).							
INSPECTING OFFICER							
SIGNATURE AS S			PRINT NAME PO Robert Tosie 4553				
TYPE II PERMIT NUMBER/EXPIRATION DATE 240128 / 05292026			TELEPHONE NUMBER (636) 529-8210				
Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office							
hy mail fax	or email						

AS IV Se. A. T. 1982.

Version not 5325

TRST RECOPD 6. T. 1982.

Tomp Date Time 1992.

Air 10 and 1992.

Calibratics 1. 19.

Subject Home

Test #1

Subject 1. 19.

N/A

Op. Tome 4533

Test RECORD 600/2

Temp Date Time 210L

Air Blank: 07/31/24 17:46 .000
Calibration Check: 23 07/31/24 17:46 .000

Subject Mane

Test Hame

NA

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Location

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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 3-Aug-2025 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. EB0010581

Concentration 391.8 ppm 259.8 ppm

EB0010570 EB0010285 EB0010561

EB0010681

209.0 ppm 103.7 ppm

52.22 ppm

RGM Serial No.

EB0010603 EB0010559

EB0010562

EB0010579

Concentration

392.5 ppm 258.9 ppm

104.2 ppm 52.94 ppm

CRM Serial No.

CC727481 CC727496 Concentration

mqq 0.008 253.0 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:Afgas 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

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 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, PSMo and 306.111 through 306.119 PSMo.

M.L. Manner

DATE 5/29/2024

DIRECTOR OF STATE RUBLIC HEALTH LABORATORY

NUMBER 240128

EXPIRES 5/29/2026

DIRECTOR OF DEPARTMENT OF HEALTH AND SERVICES

LAB-4-(R6-10)