



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 the regular monthly preventative maintenance check, and whenever instrument is repaired. Send copy to Department of Health and Senior Services; retain original in department file.

ALCO SENSOR IV SN 108390	NAME OF AGENCY LAWRENCE COUNTY SHERIFF'S OFFICE	DATE OF INSPECTION 12/03/2024
LOCATION OF INSTRUMENT (STREET AND CITY) 1525 MISSOURI DRIVE - MT. VERNON, MO 65712		TIME OF INSPECTION 8:47 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 COMPRESSED ETHANOL-GAS MIXTURE
- STANDARD SUPPLIER INTOXIMETERS LOT # AG333203 EXP. DATE 11/28/2025
- SIMULATOR TEMPERATURE (34°C ± 0.2°C) SIM. SN _____ SIM. NIST 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

TEST 1 \Rightarrow .095	TEST 2 \Rightarrow .095	TEST 3 \Rightarrow .095
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- 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-.04)	(.05-.09)	(.10-.14)	(.15-.19)	(OVER .19)
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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 	PRINT NAME RYAN DEVOST
TYPE II PERMIT NUMBER/EXPIRATION DATE 230066 - 04/07/2025	TELEPHONE NUMBER (417) 466-2131

Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office by mail, fax, or email.

AS IV Serial no: 108390
Version no: 532B

TEST RECORD 00777

Temp Date Time 21^{9/}OL

Air Blank:
12/03/24 20:47 .000
Calibration Check:
21 12/03/24 20:47 .095

Subject Name

TEST #1
Subject I.D.

Operator Name, I.D.

Location

Py Dent

AS IV Serial no: 108390
Version no: 532B

TEST RECORD 00778

Temp Date Time 21^{9/}OL

Air Blank:
12/03/24 20:48 .000
Calibration Check:
22 12/03/24 20:48 .095

Subject Name

TEST #2
Subject I.D.

Operator Name, I.D.

Location

Py Dent

AS IV Serial no: 108390
Version no: 532B

TEST RECORD 00779

Temp Date Time 21^{9/}OL

Air Blank:
12/03/24 20:50 .000
Calibration Check:
22 12/03/24 20:50 .095

Subject Name

TEST #3
Subject I.D.

Operator Name, I.D.

Location

Py Dent

AS IV Serial no: 108390
Version no: 532B

TEST RECORD 00780

Temp Date Time 21^{9/}OL

Air Blank:
12/03/24 20:52 .000
Calibration Check:
22 12/03/24 20:52 .000

Subject Name

SOBER Sample
Subject I.D.

Operator Name, I.D.

Location

Py Dent

AS IV Serial no: 108390
Version no: 532B

TEST RECORD 00781

Temp Date Time 21^{9/}OL

VOID: RFI
12 12/03/24 20:53

Subject Name

RFI TEST
Subject I.D.

Operator Name, I.D.

Location

Py Dent



Airgas USA LLC (LAB)
 3600 Bernard Street
 St. Louis, Mo, 63103
 Ph: (314) 633-3100
 Fax: (314) 633-7328

Certificate of Analysis

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

Test Date: 29-Nov-2023

Lot # AG333203 Model 108

Exp Date	Cyl. Type	Component	Certified Concentration
28-Nov-2026	108	Etanol Nitrogen	0,100 ± 2% BrAC (272 ppm)

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

RGM Serial No.	Concentration	RGM Serial No.	Concentration
EB0010581	391,8 ppm	EB0010603	392,5 ppm
EB0010670	289,8 ppm	EB0010659	288,9 ppm
EB0010285	209,0 ppm	EB0010662	104,2 ppm
EB0010561	103,7 ppm	EB0010679	62,94 ppm
EB0010681	62,22 ppm		

CRM Serial No.	Concentration	CRM Serial No.	Concentration
CC727481	799,4 ppm	CC727493	389,8 ppm
CC727496	263,4 ppm	CC727498	160,2 ppm

Analytical Method: NDIR

Digitally signed by: Quality Control
 Responsibility gas standard calibration of analysis
 Location: Airgas USA LLC (Lab)
 Date: 11.30.2023 17:29

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

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PERMIT
TYPE II
RYAN DEVOST

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

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 4/7/2023

Mike Massman

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

NUMBER 230066

Paula F. Nicholson

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

EXPIRES 4/7/2025

MQ 580-0771 (6-10)

LAB-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 alcoholic content in breath form of expired air in Missouri.

Operator DEVOST, RYAN
Permit No 230066
Date Issued 4/7/2023 Date Expires 4/7/2025

