

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

RECEIVED

By Tracy Crews at 6:58 am, Dec 31, 2024

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

(1) 10 10 10 10 10 10 10 10 10 10 10 10 10							
Complete this report in du Send copy to Department					wheneve	er instrument is repaired.	
ALCO SENSOR IV SN 108393		NAME OF AGENCY St. Louis County Police Department		1	DATE OF II 12/30/2	nspection 024	
LOCATION OF INSTRUMENT (STREET AND CITY) 14301 S. Outer Forty Rd					14:1		
CHECKLIST: Place a mark	k in the box by each	item if found to be satisf	factory or if operating	within established	ed limits.	(Write in observed values	
where determined.) Unma							
DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)							
✓ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)							
✓ PRINTER WORKING PROPERLY							
✓ TIME AND DATE DIS							
BREATH ALCOHOL ACC	URACY STANDAR	IDS To the state of the state o					
☐ SIMULATOR SOLUTION							
STANDARD SUPPLIER Intoximeters			LOT # AG321505 EXP. DATE 08/03/2024				
☐ SIMULATOR TEMPERATURE (34°C ± 0.		.2°C) SII	.°C) SIM. SN SIM. N		VIST EXP DATE		
less. Check the box co 0.100% STANDA 0.080% STANDA	orresponding to the RD - MUST READ RD - MUST READ	standard solution being BETWEEN 0.095% and BETWEEN 0.076% and BETWEEN 0.038% and	i used. (PRINTOUT / d 0.105% INCLUSIVI d 0.084% INCLUSIVI	ATTACHED) E E		have a spread of .005 or	
TEST 1 .102	.	TEST 2 ★ .104		TEST 3 - 10	2		
RFI DETECTOR OPE	RATING						
INDICATE THE NUMBER			G RANGES SINCE	THE LAST MAII	NTENAN	CE REPORT:	
`							
REFUSALS	(004)	(.0509)	(.1014)	(.1519)		(OVER .19)	
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).							
INCORPORTING OFFICER							
INSPECTING OFFICER				PRINT NAME	•		
DA CUID		Michael White					
TYPE II RERMIT NUMBER/EXPIRATION DATE				TELEPHONE NUMBER			
230233 10/31/2025				(636) 529-82	10		
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: 108393 Version no: 532B

TEST RECORD 00863

Temp Date Time 210L
Air Blank:

12/30/24 14:20 .000 Calibration Check:

16 12/30/24 14:20 .102

Subject Name

Tcs de Subject I.D.

Operator Name, I.D.

White 230233

Location

4301 5100ter 4010

AS IV Serial no: 108393 Version no: 532B

TEST RECORD 00864

Temp Date Time 210L

Air Blank:

12/30/24 14:21 .000 Calibration Check:

17 12/30/24 14:21 .104

Subject Name

Test

Subject I.D.

2

Operator Hame. I.D.

1. hite 230233

Location

14301 5.00tar 4010

AS IV Serial no: 108393 Version no: 532B

TEST RECORD 00865

Temp Date Time 210L

Ole Blanks

12/20/24 14:23 .000

Calibration Chackt

19 12/30/24 14:23 .102

Subject Name

Tesd

Subject I.D.

3

Operator Name, J.D.

White 230233

Location

14301 5,00 ter 40

AS IV Serial not 188393
Version not 5328

TEST RECORD 60866

Y
Temp Date Time 2161
12 12/30/24 14:25
Subsect I.D.
Subsect I.D.
Subsect I.D.
Operator Name, I.D.
Location
N301 5.m. 24 47



Airyas 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

Component

Certified Concentration

Ethanol Nitrogen 0.100 ±2% BrAC (272 ppm)

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

RGM Serial No.	Concentration
EB0010581	391.8 ppm
EB0010570	259.8 ppm
EB0010285	209.0 ppm
EB0010561	103.7 ppm
EB0010681	52.22 ppm

RGM Serial No.	Concentration
EB0010603	392.5 ppm
EB0010559	258.9 ppm
EB0010562	104.2 ppm
EB0010579	52.94 ppm

CRM Serial No.

CC727481

Concentration

mqq 0.008 253.0 ppm

CRM Serial No. CC727493

Concentration

CC727496

CC727498

maa 0.088 150.0 ppm

Analytical Method: NDIR

Digitally signed by:Quality Control Reason:Dry gae standard conflication of analysis Location:Afrase USA LLC (Lab) Dute:00.03.2023 17:38

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

MICHAEL WHITE

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. Mile Magonn

DATE10/31/2023	* 100
	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 230233	Daves I. nichelson
EXPIRES 10/31/2025	· · · · · · · · · · · · · · · · · · ·
	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)



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

WHITE, MICHAEL

Permit No 230233

Date Issued 10/31/2023

Date Expires 10/31/2025

