



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

### ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

120141						
Complete this report in d Send copy to Departmen					whenever instrument is repaired.	
ALCO SENSOR IV SN 110743		NAME OF AGENCY Saint Joseph Police Department			12/06/2024	
LOCATION OF INSTRUMENT (STREET AND CITY) 501 Faraon Street, Saint Joseph MO. 64501					IME OF INSPECTION 3:23 am	
			sfactory or if operating	within establishe	d limits. (Write in observed values	
where determined.) Unm	arked items must be	e corrected before usin	g instrument.			
DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)						
✓ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)						
PRINTER WORKING	G PROPERLY					
I TIME AND DATE DIS	SPLAYING PROPE	RLY				
BREATH ALCOHOL AC	CURACY STANDAL	RDS				
☐ SIMULATOR SOLUTION			☑ COMPRESSE	COMPRESSED ETHANOL-GAS MIXTURE		
☑ STANDARD SUPPL	✓ STANDARD SUPPLIER Intoximeters L		OT # AG304601 EXP. DATE 02/15/2025			
SIMULATOR TEMPERATURE (34°C ± 0.2°C)		IM. SN	SIM. NIST EXP DATE			
<ul> <li>✓ 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     </li> </ul>						
TEST 1 • 0.101		TEST 2 ~ 0.101		TEST 3 <b>▼</b> 0.100		
☑ RFI DETECTOR OPE	ERATING					
INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT: (DO NOT INCLUDE SELF-ADMINISTERED TESTS)						
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).						
INSPECTING OFFICER						
SIGNATURE				John L. Foster		
TYPE PERMIT NUMBER/EXPIRATION DATE 230163 Exp-08/07/2025				TELEPHONE NUMBER (816) 596-8206		
Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office by mail, fax, or email.						

# SAINT JOSEPH POLICE DEPARTMENT MONTHLY MAINTENANCE REPORT ASIV-W/PRINTER

AS IU Serial no: 110743 Uersion no: 532B  TEST RECORD 02327  Femp Date Time 2101  Air Blank: 12/06/24 08:23 .000 Calibration Check: 21 12/06/24 08:23 .101  Subject I.D.  Subject I.D.  Subject I.D.  Operator Name, I.D.  Soll Room S1  Location  Soll Toso & Mono 64/50
AS IU Serial no: 110743 Version no: 532B  TEST RECORD 02328  Femp Date Time 2101 Air Blank: 12/06/24 08:25 .000 Calibration Check: 21 12/06/24 08:25 .101  Subject Name Subject Name Location Location Location
AS IV Serial no: 110743 Version no: 532B  TEST RECORD 02329 9/ Temp Date Time 2101 Air Blank: 12/06/24 08:26 .000 Subject V.D. Subject V.D. Jocation Location Location Location
AS IV Serial not 110743 Version not 5328 TEST RECORD 02330 J Temp Date Time 2101 VOID: RFI 12 12/06/24 08:28 Subject Name



Airgas USA LLC (LAB) 3500 Bernard Street St. Louis, Mo. 63103 Ph: (314) 533-3100 Fax: (314) 533-7328

### **Certificate of Analysis**

Test Date: 15-Feb-2023

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

Lot # AG304601 Model 108

Exp Date

Cyl. Type

**Component** Ethanol Certified Concentration 0.100 ± 2% BrAC (272 ppm)

15-Feb-2025 1

108

Nitrogen

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

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

CRM Serial No. CC727481

Concentration 800.0 ppm

CRM Serial No. CC727493

Concentration 390.0 ppm

150.0 ppm

CC727496

253.0 ppm

CC727498

Analytical Method: NDIR

Digitally signed by:Quality Control Reason:Dry gas standard certification of analysis Location:Airgas USA LLC (Lab) Date:02.16.2023 13:50

Approved for Release:

Rod 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 JOHN L. FOSTER

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

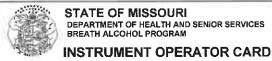
## ALCO-SENSOR IV WITH PRINTER, INTOX EC/IR II

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.

DATE8/7/2023	Mike Massim		
	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY		
NUMBER 230163	Daves J. Nichelson		
EXPIRES 8/7/2025	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 all in Missouri.

Operator FOSTER, JOHN Permit No 230163

Date Issued 8/7/2023 Date Expires 8/7/2025

