#### **RECEIVED**

By Tracy Crews at 2:21 pm, Oct 11, 2024



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 Send copy to Department of Health and Sen				ver instrument is repaired.	
ALCO SENSOR IV SN 111318	NAME OF AGENCY Greene County S	heriff Office	DATE OF 10/04/	INSPECTION 2024	
LOCATION OF INSTRUMENT (STREET AND CITY) 5100 W Division St, Springfield			TIME OF 9:00 a	INSPECTION M	
CHECKLIST: Place a mark in the box by each	item if found to be satisf	actory or if operating	within established limits	s. (Write in observed values	
where determined.) Unmarked items must be	corrected before using	instrument.	<u>-</u>		
DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)					
TEMPERATURE OF ALCO SENSOR (10°C - 40°C)					
PRINTER WORKING PROPERLY					
☑ TIME AND DATE DISPLAYING PROPERLY					
BREATH ALCOHOL ACCURACY STANDA	RDS		····		
☐ SIMULATOR SOLUTION	JLATOR SOLUTION COMPRESSED ETHANOL-GAS MIXTURE				
STANDARD SUPPLIER Intoximeters	LOT # AG331103 EXP. DATE 10/07/2025				
☐ SIMULATOR TEMPERATURE (34°C ± 0	).2°C) SIM	л. sn	SIM. NIST EX	P 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	TEST 2 ☞ .100		TEST 3 ☞ .100		
☑ 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 (004)	(.0509)	(.1014)	(.1519)	(OVER .19)	
List any new parts and describe any alterative established limits (use other side if necessar	on or modification that v	12		38	
INSPECTING OFFICER			PRINT NAME		
,			Colton Pendergrass	S	
TYPE II PERMIT NUMBERJEXPIÑATION DATE 240081 / 04-02-2026			(417) 868-4040		
Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office by mail, fax, or email.					

ATT Se 1318
5328

CST RECENT 10741

The Date The 210

Air Blank:
C4/24 CG-24

Sible I Name

1004 I

Jest I

. . .

CoPendergrass - 1668

Test 2 Subject 1 D

C. Pendergrass - 1668 Location HQ

Copendergross - 1608 Location Ha

\* \* \* \* \* \* \* \*

AST No. Served 1. 111219
We show his 5628

ASS REFINE 100744

ATT Blank:
10074.24 09 pt. 000
Subject Test Subject
Subject t.D.

Copendergrass. 1668 Location HQ

NAME OF THE OWNER, ASSOCIATION OF THE OWNER,

Test Name

No. 9. 1 3.8

No. 9. 1 10.0 5328

Test Name

RF1

S. bjest 1 D

C. Pendergrass-1668 Laration



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: 8-Nov-2023

**Lot # AG331103 Model 108** 

Exp Date 7-Nov-2025 Cyl. Type 108

Component

**Certified Concentration** 

Ethanol

0.100 ± 2% BrAC (272 ppm)

Nitrogen

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

Concentration

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.** 

Analytical Method: NDIR

CC727481 799.4 ppm

253,4 ppm CC727496

CRM Serial No. CC727493

CC727498

Concentration 389.8 ppm 150.2 ppm

Digitally signed by:Quality Control Reason:Dry gas standard certification of analysis Location:Argas USA LLC (Lab) Date:11.09.2023 19:42

Approved for Release:

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

# **COLTON PENDERGRASS**

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

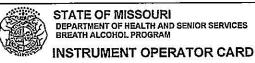
577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo. Mike Massur 4/2/2024 DATE \_ DIRECTOR OF STATE PUBLIC HEALTH LABORATORY NUMBER 240081 Daves J. Nichelson

MO 580-0771 (6-10)

EXPIRES 4/2/2026

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

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 air in Missouri.

Operator PENDERGRASS, COLTON 240081 Permit No

Date Expires 4/2/2026 Date Issued 4/2/2024

