

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

Complete this report in d Send copy to Departmen					d whene	ver instrument is	repaired.
ALCO SENSOR IV SN 111673		NAME OF AGENCY St. Louis Count	y Police Departm	nent	DATE OF 08/30/2	INSPECTION 2024	
LOCATION OF INSTRUMENT (STREET AND CITY) 14301 South Outer Fourty, Chesterfield Missouri					TIME OF 7:37 pr	INSPECTION m	
CHECKLIST: Place a ma			sfactory or if opera	ting within establish	<u> </u>		ed values
where determined.) Unm							
✓ DIGITAL READOUT	(ALL ELEMENTS O	PERATIONAL)					
▼ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)							
PRINTER WORKING	PROPERLY						
TIME AND DATE DIS	SPLAYING PROPER	LY					
BREATH ALCOHOL AC	CURACY STANDAR	DS					
☐ SIMULATOR SOLUT	☐ SIMULATOR SOLUTION ☐ COMPRESSED ETHANOL-GAS MIXTURE						
☑ STANDARD SUPPL	ER INTOXIMETER	RS	LOT # <u>AG32150</u> 5	EXP. DATE	08/03/2	2025	
☐ SIMULATOR TEMPE	ERATURE (34°C ± 0.	2°C) S	IM. SN	SIM. I	VIST EXF	P DATE	
0.080% STAND	corresponding to the ARD - MUST READ ARD - MUST READ		g used. (PRINTOL nd 0.105% INCLUS nd 0.084% INCLUS	JT ATTACHED) SIVE SIVE	and muot	navo a opioaa e	
TEST 1099	7	ΓEST 2 ☞ .100		TEST 309	99		
☑ RFI DETECTOR OPE	ERATING						
INDICATE THE NUMBER (DO NOT INCLUDE SEL			NG RANGES SING	CE THE LAST MAI	NTENAN	ICE REPORT:	
REFUSALS 0	(004) 0	(.0509) 0	(.1014) 0	(.1519)	0	(OVER .19)	0
List any new parts and d established limits (use of			was made to rest	ore the instrument	to operat	te satisfactorily a	nd within
INSPECTING OFFICER SIGNATURE PRINT NAME							
· 10 26 6/1 4971				Austin Weso	Austin Wesolich DSN 4971		
TYPE II №ERMIT NUMBER/EXPIRATION DATE 230248 / 11/01/2025				(636) 628-60	(636) 628-6079		
Return completed repo		cohol Program, MO De ax, or email.	epartment of Healt	h and Senior Servi	ces, Sout	theast District Off	ice

AS IV Serial no: 111673 Version no: 532B TEST RECORD 00525 Time 210L Temp Date Air Blank: 08/30/24 19:34 .000 Calibration Check: 21 08/30/24 19:34 .099 Subject Name TEST 1 Subject I.D. TREST 1 Operator Name: I.D. Location

MODOT TM

TEST 3
Constinue To Saras

TEST STORM (86527

Tom Bate Time 2161

Air 31ank: 1982 1982 1886

22 9372 1774 1982 1983

TEST 3
Constinue To Nome: 1.8.

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TEST RECORD - ROPKINT

TEST RECORD 00526

Temp Date Time 2101.

Oir Blank: 08/38/24 19:36 .008

Calibration Check: 21 28/38/24 19:36 .108

Subject Name

TEST Z

Subject L.D.

TEST Z

Greator Name: I.D.

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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

Certified Concentration 0.100 ± 2% BrAC (272 ppm)

Nitrogen

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

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.	Concentration	CRM Serial No.	Concentration
CC727481	800.0 ppm	CC727493	390.0 ppm
CC727496	253.0 ppm	CC727498	150.0 ppm

Analytical Method: NDIR

Digitally signed by:Quality Control Reason:Dry gas standard certification of analysis Location:Airgas 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 PROBRAM



AUSTIN

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 Adample of expired air Perhit issued under the provisions of sections. 1577.020 through 577.041, IRSMC and 908.111 through 308.119 FISMC.

DATE 11/1/2023	A. C. Carrier and M. C. Carrier and		
	COLLECTOR OF EXACE LOGICOLHEVILL CARELYYCHA.		
NUMBER 230248	D 1 1 2 2		
EXPIRES 11/1/2025	Douls J. Na Orelson		
40:88(80/24:66:10):	OIRECTORIOMEDEPARAMENT TOURHEACTH AND MENIORISERVICES		



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

Operator Pennit No

WESOLICH, AUSTIN 230248

Date Issued 11/1/2023

Date Expires 11/1/2025

