

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 tim Send copy to Department of Health and Se				whenever instrument is repaired.		
ALCO SENSOR IV SN NAME OF AGENCY 111735 AURORA POLICI		E DEPARTMENT		DATE OF INSPECTION 08/30/2024		
LOCATION OF INSTRUMENT (STREET AND CITY) 106 S. ELLIOTT AVE. AURORA, MO.			ME OF INSPECTION :30 pm			
CHECKLIST: Place a mark in the box by ea where determined.) Unmarked items must			within established	limits. (Write in observed values		
☑ DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)						
☑ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)						
PRINTER WORKING PROPERLY						
☑ TIME AND DATE DISPLAYING PROPERLY						
BREATH ALCOHOL ACCURACY STAND	ARDS					
☐ SIMULATOR SOLUTION	SIMULATOR SOLUTION			☑ COMPRESSED ETHANOL-GAS MIXTURE		
✓ STANDARD SUPPLIER INTOXIMET	ERSı	OT # AG316601	EXP. DATE 06/15/2025			
SIMULATOR TEMPERATURE (34°C =	: 0.2°C) SI	M. SN	SIM. NIST EXP DATE			
less. Check the box corresponding to the 0.100% STANDARD - MUST READ 0.080% STANDARD - MUST READ 0.040% STANDARD -	D BETWEEN 0.095% an D BETWEEN 0.076% an D BETWEEN 0.038% an	d 0.105% INCLUSIVE d 0.084% INCLUSIVE	E E E			
TEST 1 • .099	TEST 2 ☎ .099		TEST 3 .099			
RFI DETECTOR OPERATING						
INDICATE THE NUMBER OF BREATH TO (DO NOT INCLUDE SELF-ADMINISTERE		IG RANGES SINCE	THE LAST MAINT	TENANCE REPORT:		
REFUSALS (004)	(.0509)	(.1014)	(.1519)	(OVER .19)		
List any new parts and describe any altera established limits (use other side if necess		was made to restore	the instrument to	operate satisfactorily and within		
INSPECTING OFFICER						
SIGNATURE		Tatum Maples				
TYPE II PERMIT NUMBERÆXPÍRATION DATE 240192 08/29/2026		TELEPHONE NUMBER (417) 678-5025				
	Alcohol Program, MO De I, fax, or email.	epartment of Health a	nd Senior Services	s, Southeast District Office		



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: 15-Jun-2023

Lot # AG316601 **Model** 108

Exp Date 15-Jun-2025 Cyl. Type 108 Component

Certified Concentration 0.100 ± 2% BrAC (272 ppm)

Ethanol

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:06.15.2023 17:36

Approved for Release:

Pod Marcala

ISO 17025:2017 A2LA accredited. Certificate Number 3082.06 ISO 17034:2016 A2LA accredited. Certificate Number 3082.07

AS IV Serial no: 111735 Version no: 532B Air Blank: 09/38/24_16:33 .808 Calibration Check: 299 21 88/38/24 16:33 .899 Location Meples 240192 Strate Name Mointmence Tator Name: I'm TEST RECURD 88446 Tuto Time

Amora PD 03/29/26 love S. Elliott Awara, Mol. 6 stess

Lave S. Elliot

Arvara, MO, le suls

AS IV Serial no: 111735 Version no: 532B

TEST RECORD SSAAP TI35 · P B

Air Blank: 15:25

Calibration Check: 22 88/38/24 16:35 .889

Phil Me

Maintenance

Oversion Name: I. II.

Jatum Maples

Aurora PD crp. 02/29/26 2610hz#

> 58/38/24 16:37 Calibration Chack: 22 88/38/24 16:37 PERMIT NAME Air Blanki

#347

Arom, MO. Losbos

Mersion no: 532B

N E E

Maintenance test

Location Frankly Operator Name: I.D.

on/62/50 ses Od womy NOLO S. Elliott

AS IV Serial mo: 111735 Version no: 532%

Location Maples ap. 02/29/26

IDLE S. ElliOH Hurora, MO. 65605



STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM



PERMIT TYPE II

TATUM MAPLES

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

DATE 8/29/2024

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

NUMBER 240192

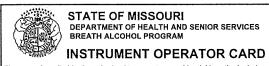
Davla J. Nichselson

MO 580-0771 (6-10)

EXPIRES 8/29/2026

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 MAPLES, TATUM

Permit No 240192

Date Issued 8/29/2024 Date Expires 8/29/2026

