

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

-arctiv						
Complete this report in duplicate at the time Send copy to Department of Health and Sen				whenev	er instrument is r	repaired.
ALCO SENSOR IV SN 111745	NAME OF AGENCY Ashland PD - BC	SO	1	ATE OF 1 1/04/2	INSPECTION 2024	
LOCATION OF INSTRUMENT (STREET AND CITY) 2111 E. County Drive Columbia, MO				ME OF I	NSPECTION N	
CHECKLIST: Place a mark in the box by each			within established	d limits.	(Write in observe	d values
where determined.) Unmarked items must be	e corrected before using	instrument.				
DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)						
✓ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)						
PRINTER WORKING PROPERLY						
☑ TIME AND DATE DISPLAYING PROPE	RLY					
BREATH ALCOHOL ACCURACY STANDA	RDS					
☐ SIMULATOR SOLUTION	SIMULATOR SOLUTION ☑ COMPRESSED ETHANOL-GAS MIXTURE					
☑ STANDARD SUPPLIER INTOXIMETE	RS L	OT # AG407801	EXP. DATE 0:	3/18/2	026	
☐ SIMULATOR TEMPERATURE (34°C ± 0).2°C) SIM	и. SN	SIM. NIS	ST EXP	DATE	
 ✓ 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 						
TEST 1 .098 TEST 2 .097			TEST 3 ▼ .097			
☑ 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 0 (004) 0	(.0509)	(.1014) 0	(.1519)		(OVER .19)	0
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). CLOCK ADJUSTED. INSTRUMENT OPERATING SATISFACTORILY AND WITHIN ESTABLISHED LIMITS.						
INSPECTING OFFICER						
SIGNATURE			PRINT NAME Johnathan Wel	lle		
TYPE II PERMIT NUMBER/EXPIRATION DATE			TELEPHONE NUMBER			
240088, 04/02/2026			(573) 875-1111			
Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office by mail, fax, or email.				ce		

AS IV Serial no: 111745 Version no: 532B Air Blank: Temp Subject Name Calibration Check: Operator Name, I.D. Subject I.D. Location Montaly Maintenance JIII C COUNTY DI 21 11/84/24 84:83 .898 Columbia MO 434 TEST RECORD 00260 11/04/24 04:03 .000 Melly Date Time 210L ORR 240088

Temp

AS IU Serial no: 111745 Uersion no: 532B Calibration Check: 22 11/04/24 04:07 .097 Air Blank: Subject Name Operator Name, I.D. Subject I.D. 2111 E. COUNTY OF MONTHIN MAINTHANGE Location J. Wells 240088 TEST RECORD 00261 11/04/24 04:07 .000 Date Time TWO 210L

Columbia, mo AS IV Serial no: 111745 Version no: 532B Calibration Check: 23 11/04/24 04:11 .097 Air Blank: Temp Subject Name Subject I.D. JIII E. comy or Operator Name, I.D. Location monthly manthemale J. WELLI THOORS Columbia, Mo TEST RECORD 00262 lest Three 11/04/24 04:11 .000 Date Time 210L

MOID

1751

Version no: 532B AS IU Serial no: 111745

UOID: RFI 12 11/04/24 04:14 Subject Name Temp TEST RECORD 00263 Date Time 210L

Subject I.D. Operator Name, I.D. MONTHLY Mainthane Location 1, wain 240088

Columbia, Mo

JIII E. County Dr



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: 19-Mar-2024

Lot # AG407801 Model 108

Exp Date 18-Mar-2026 Cyl. Type

Component

Certified Concentration

108

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	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	799.4 ppm	CC727493	389.8 ppm
CC727496	253.4 ppm	CC727498	150.2 ppm

Analytical Method: NDIR

Digitally signed by:Quality Control Reason:Dry gas standard certification of analysis Location:Airgas USA LLC (Lab) Date:03.22.2024 07:50

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

JOHNATHAN WELLS

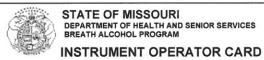
is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

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. 100 1

DATE 4/2/2024	Mike Massur
DAIL TOTAL	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 240088	Datos
EXPIRES 4/2/2026	DIRECTOR OF DEPARTMENT OF HEALTH AND SERVICES
MO 580-0771 (6-10)	LAB-4 (R6-10

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 air

WELLS, JOHNATHAN Operator

Permit No 240088 Date Issued 4/2/2024

Date Expires 4/2/2026

