

### MISSOURI DEPARTMENT OF HEALTH AND SENIOR SEI STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENA By Tracy Crews at 12:04 pm, Aug 06, 2024 PRT #7

Complete this report in duplicate at the time of Send copy to Department of Health and Senior		ance check, and whenever instrument is repaired.
ALCO SENSOR IV SN 111759	NAME OF AGENCY Clay County Sheriff's Office	DATE OF INSPECTION 08/04/2024
LOCATION OF INSTRUMENT (STREET AND CITY) 12 S. Water St., Liberty, MO 64068		TIME OF INSPECTION 2249
CHECKLIST: Place a mark in the box by each item if found to be satisfactory or if operating within established limits. (Write in observed values		
where determined.) Unmarked items must be corrected before using instrument.		
DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)		
☑ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)		
PRINTER WORKING PROPERLY		
☑ TIME AND DATE DISPLAYING PROPERLY		
BREATH ALCOHOL ACCURACY STANDARDS		
☐ SIMULATOR SOLUTION	☐ COMPRESSE	D ETHANOL-GAS MIXTURE
STANDARD SUPPLIER Intoximeters	LOT # AG407603	EXP. DATE 03/16/2026
☐ SIMULATOR TEMPERATURE (34°C ± 0.2°	°C) SIM. SN	SIM. NIST EXP 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 ★ .096	ST 2 <b>☞</b> .097	TEST 3 • .098
☑ RFI DETECTOR OPERATING		
INDICATE THE NUMBER OF BREATH TESTS (DO NOT INCLUDE SELF-ADMINISTERED TE	•	THE LAST MAINTENANCE REPORT:
REFUSALS 0 (004) 0	(.0509) 0 (.1014) 0	(.1519) <sup>2</sup> (OVER .19) <sup>0</sup>
List any new parts and describe any alteration established limits (use other side if necessary).	or modification that was made to restore	the instrument to operate satisfactorily and within
INCREATING OFFICER		
INSPECTING OFFICER SIGNATURE		PRINT NAME
· - 14 h	2260	Tom Butkovich
TYPE II PERMIT NUMBER/EXPIRATION DATE 230113 - 06/05/2025		TELEPHONE NUMBER 8164073702
Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office		

by mail, fax, or email.

Un sion not \$28. THEFT RECORD MONEY! Temper Hale Tipe 210 Air Blanks - MB/99/29 - 221131 - HK Calibration Check! 39 66/64/24 22:15: 393-Subject Home Test #3 Siduloid Col Bolkarch themshot Names fills fan.ol. turr AG TV Serial not 1917. Usersion not 1382H TEST RECORD BUILDS Tome Rate Time To Unione Rich 12 98794724 2211/1 Subject Name RFI Test Subsky to 1, 11.

Bettoricy Unerator Hance 1.11

CCSD

Counting

AS IV Serial not iliza

TOTT RECORD 60419

TOTT RECORD 60419

Tomp Date Time 206

Air Blanks
60204224 22:16 .06

Calibration Checks
29 68/04/24 22:16 .60

Subject Name

Telf41

Subject C.D.

B.Kow

Orerator Names 1.D.

CCSO

Location

NS IV Serial not 11707 Version not 3028

TROT RELIED MOON

Term Bully Time 211-

Air 81ank 88784724 22813 Calibration CheCa 22 88784724 22813 1882

Subject Name

Test #2

BAKOVICES

Operator Manes J. H.

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Tangal lon-



## STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM



# PERMIT TYPE II

## THOMAS F. BUTKOVICH

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

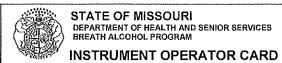
for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections

EXPIRES 6/5/2025

MO 580-0771 (6-10)

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 BUTKOVICH, THOMAS

Permit No 230113 Date Issued 6/5/2023

Date Expires 6/5/2025





Airgas USA LLC (LAB) 3500 Bernard Street St. Louls, 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: 18-Mar-2024

Lot # AG407603 Model 108

Exp Date

Cyl. Type

Component

Certified Concentration

16-Mar-2026

1Ó8

Ethanol Nitrogen 0.100 ± 2% BrAC (272 ppm)

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

RGM Serial No. Goncentration
EB0010581 391.8 ppm
EB0010570 259.8 ppm
EB0010285 209.0 ppm
EB0010561 103.7 ppm
EB0010681 52.22 ppm

RGM Serial No. Concentration EB0010603 392.5 ppm EB0010559 258.9 ppm EB0010562 104.2 ppm EB0010579 52.94 ppm

CRM Serial No.

CC727481 CC727496 Concentration 799.4 ppm 253.4 ppm CRM Serial No. CC727493

CC727498

Concentration 389,8 ppm 150.2 ppm

Analytical Method: NDIR

Digitally signed by:Quality Control Reason:Dry gas standard certification of analysis Locallon:Airgas USA LLC (Leb) Date:03.22.2024 07:48

Approved for Release:

Yusef Woods

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