





MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

Complete this report in duplic Send copy to Department of I					enever instrument is repaired.				
ALCO SENSOR IV SN 111763		NAME OF AGENCY Saint Joseph Police Department			OF INSPECTION				
LOCATION OF INSTRUMENT (STRE 501 Faraon Street, Saint J	ET AND CITY) loseph MO. 64			of Inspection 6 pm					
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 COMPRESSED ETHANOL-GAS MIXTURE									
✓ STANDARD SUPPLIER Intoximeters LOT # AG304601				EXP. DATE 02/15/2025					
SIMULATOR TEMPERATURE (34°C ± 0.2°C) SIM.			M. SN	SIM. NIST 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 .096					
☑ RFI DETECTOR OPERA	TING								
INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT: (DO NOT INCLUDE SELF-ADMINISTERED TESTS)									
REFUSALS (0-	.04)	(.0509)	(.1014)	(.1519)	(OVER .19)				
List any new parts and descr established limits (use other t			was made to restore	the instrument to op	perate satisfactorily and within				
INSPECTING OFFICER									
SIGNATURE			John L. Foster						
TYPE DIFFRMIT NUMBER/C PIRATION DATE 230163 Exp-08/07/2025				TELEPHONE NUMBER (816) 596-8206					
Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office by mail, fax, or email.									

SAINT JOSEPH POLICE DEPARTMENT MONTHLY MAINTENANCE REPORT ASIV-W/PRINTER

AS IN Serial not 11753 Writion not 5328 LES 128 Temp Date Time 2101 fir Blank: 12/65/24 15:16 .888 Subject Name Subject I.D. Subject I.D. Operator Name, I.D. Operator Name, I.D. Sol 12/85/54 Location Sol 21/85/54 Location
AS IV Serial no: 111763 Version no: 532B TEST RECORD 08789 Temp Date Time 210L Air Blank: 12/85/24 15:18 .000 Calibration Check: 2: 12/85/24 15:18 .097 Subject Name Modulect I.D. 5545 Dh. 1897 Deerator Name. I.D. Location Location
AS IV Serial no: 111763 Version no: 532B TEST RECORD 80790 Temp Date Time 216L Air Blank: 12/05/24 15:31 .880 Calibration Check: 22 12/05/24 15:31 .896 Subject Name Subject I.B. Subject I.B. Subject I.B. Location Location
AS IV Serial no: 111763 Version no: 532B TEST RECORD 80791 TEST RECORD 80791 12 12/85/24 15:33 Subject Mame Subject Mame Location Location Location



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-Feb-2023

Lot # AG304601 Model 108

Exp Date 15-Feb-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:

EB0010581 EB0010570 EB0010285 EB0010561	Concentration 391.8 ppm 259.8 ppm 209.0 ppm 103.7 ppm 52.22 ppm	RGM Serial No. EB0010603 EB0010559 EB0010562 EB0010579	Concentration 392.5 ppm 258.9 ppm 104.2 ppm 52.94 ppm
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 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:02.16.2023 13:50

Approved for Release:

Rod Marsala

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 JOHN L. FOSTER

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 8/7/2023

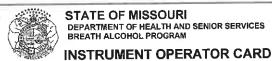
DATE 230163

EXPIRES 8/7/2025

DIRECTOR OF DEPARTMENT OF HEALTH AND SERVICES

MO 580-0771 (6-10)

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 all in Missouri.

Operator FOSTER, JOHN Permit No 230163

Date Issued 8/7/2023 Date Expires 8/7/2025

