



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 time of the regular monthly preventative maintenance check, and whenever instrument is repaired. Send copy to Department of Health and Senior Services; retain original in department file.

ALCO SENSOR IV SN <b>111776</b>	NAME OF AGENCY <b>Kansas City Police Department</b>	DATE OF INSPECTION <b>11/15/2024</b>
LOCATION OF INSTRUMENT (STREET AND CITY) <b>9701 MARION PARK DR, KANSAS CITY</b>		TIME OF INSPECTION <b>1826</b>

**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 # **AG417401** EXP. DATE **06-22-2026**

SIMULATOR TEMPERATURE (34°C ± 0.2°C) SIM. 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 <b>.098</b>	TEST 2 <b>.097</b>	TEST 3 <b>.097</b>
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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-.04) <b>0</b>	(.05-.09) <b>0</b>	(.10-.14) <b>1</b>	(.15-.19) <b>1</b>	(OVER .19) <b>2</b>
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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).

Instrument meets all DOHSS standards and guidelines.

**INSPECTING OFFICER**

SIGNATURE

PRINT NAME **Frank DeMarco**

TYPE II PERMIT NUMBER/EXPIRATION DATE **240076 04-02-2026**

TELEPHONE NUMBER **( ) 816-766-5068**

**Return completed report to the:** Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office by mail, fax, or email.

AS IV Serial no: 111776  
Version no: 532B

TEST RECORD 00575

Temp Date Time <sup>s/</sup> 210L

Air Blank:  
11/15/24 18:26 .000  
Calibration Check:  
23 11/15/24 18:26 .098

Subject Name  
Test 1  
Subject I.D.

Operator Name, I.D.  
DeMarco 240076  
Location

AS IV Serial no: 111776  
Version no: 532B

TEST RECORD 00576

Temp Date Time <sup>s/</sup> 210L

Air Blank:  
11/15/24 18:28 .000  
Calibration Check:  
24 11/15/24 18:28 .097

Subject Name  
Test 2  
Subject I.D.

Operator Name, I.D.  
DeMarco 240076  
Location

AS IV Serial no: 111776  
Version no: 532B

TEST RECORD 00577

Temp Date Time <sup>s/</sup> 210L

Air Blank:  
11/15/24 18:30 .000  
Calibration Check:  
24 11/15/24 18:30 .097

Subject Name  
Test 3  
Subject I.D.

Operator Name, I.D.  
DeMarco 240076  
Location

AS IV Serial no: 111776  
Version no: 532B

TEST RECORD 00578

Temp Date Time <sup>s/</sup> 210L

VOID: RFI  
12 11/15/24 18:32

Subject Name  
RFI  
Subject I.D.

Operator Name, I.D.  
DeMarco 240076  
Location



STATE OF MISSOURI  
DEPARTMENT OF HEALTH AND SENIOR SERVICES  
BREATH ALCOHOL PROGRAM



**Airgas**

Airgas USA LLC (LAB)  
3500 Bernard Street  
St. Louis, Mo. 63103  
Ph. (314) 533-3100  
Fax. (314) 533-7228

**Certificate of Analysis**

Test Date: 25-Jun-2024

**FRANK DeMARCO**

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, INTOXILYZER 8000**

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.

*M. DeMarco*

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DATE 4/22/2024  
NUMBER 240076  
EXPIRES 4/22/2026  
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES  
LWS-4 (Rev. 10)

Customer Name  
Exclusive Supplier  
Inoximeters, Inc.  
2081 Craig Road  
St. Louis, Mo 63146

Lot # AG417401 Model 108

Exp Date 22-Jun-2026 Cyl. Type 108 Component Ethanol Nitrogen Certified Concentration 0.100 ± 2% BAC (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		

Analytical Method: **NDIR**

CRM Serial No.	Concentration	CRM Serial No.	Concentration
CC727481	799.4 ppm	CC727493	389.8 ppm
CC727496	253.4 ppm	CC727498	150.2 ppm

Printed Report - Chain of Custody  
Reported by: Yusef Woods (LAB)  
Lab No: 240076 (LAB)  
Printed: 06/25/2024 10:59

Approved for Release:

*Yusef Woods*  
Yusef Woods



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