



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 119725	NAME OF AGENCY Kansas City Police Department	DATE OF INSPECTION 08/23/2024
------------------------------------	--	---

LOCATION OF INSTRUMENT (STREET AND CITY) 9701 MARION PARK DR, KANSAS CITY	TIME OF INSPECTION 1548
---	-----------------------------------

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 # AG311004 EXP. DATE 04/20/2025

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 .097	TEST 2 .098	TEST 3 .098
--------------------	--------------------	--------------------

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) 0	(.05-.09) 1	(.10-.14) 1	(.15-.19) 3	(OVER .19) 1
----------	------------------	--------------------	--------------------	--------------------	---------------------

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 Wade Robinson
-----------	---------------------------------

TYPE II PERMIT NUMBER/EXPIRATION DATE 230288 - 10/23/2025	TELEPHONE NUMBER 816-482-8141
--	--------------------------------------

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: 119725
Version no: 532C

TEST RECORD 00247

Temp Date Time 21⁹/₁₀L

VOID: RFI
12 08/23/24 15:53

Subject Name
Test # 4 / RFI TEST
Subject I.D.

Operator Name, I.D.
Robinson 230228
Location

AS IV Serial no: 119725
Version no: 532C

TEST RECORD 00244

Temp Date Time 21⁹/₁₀L

Air Blank:
08/23/24 15:48 .000
Calibration Check:
23 08/23/24 15:48 .098

Subject Name
Test # 1
Subject I.D.

Operator Name, I.D.
Robinson 230228
Location

AS IV Serial no: 119725
Version no: 532C

TEST RECORD 00245

Temp Date Time 21⁹/₁₀L

Air Blank:
08/23/24 15:50 .000
Calibration Check:
23 08/23/24 15:50 .097

Subject Name
Test # 2
Subject I.D.

Operator Name, I.D.
Robinson 230228
Location

AS IV Serial no: 119725
Version no: 532C

TEST RECORD 00246

Temp Date Time 21⁹/₁₀L

Air Blank:
08/23/24 15:51 .000
Calibration Check:
24 08/23/24 15:51 .096

Subject Name
Test # 3
Subject I.D.

Operator Name, I.D.
Robinson 230228
Location



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

Certificate of Analysis

Test Date: 24-Apr-2023

Airgas USA LLC (LAB)
 3100 Belmont Street
 St. Louis, MO 63103
 Ph: (314) 533-9100
 Fax: (314) 533-7328

Lot # AG311004 Model 108

Exp Date	Cyl. Type	Component	Certified Concentration
20-Apr-2025	108	Ethanol	0.100 ± 2% BrAC (272 ppm)
		Nitrogen	

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

RGM Serial No.	Concentration	RGM Serial No.	Concentration
EB0010681	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

Details about Quality Control Requirements and accreditation information of analysis from ISO 9001:2015 (Lab)

Approved for Release: Rod Marsala
 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**

WADE ROBINSON

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.

DATE 10/23/2023

NUMBER 230228

EXPIRES 10/23/2025

MO 390-0771 (6-19)

Mike Mason
 DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Paul J. Robinson
 DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LSB-4 (RE-10)

