RECEIVED





ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

A CONTRACTOR OF THE PARTY OF TH					
Complete this report in dup Send copy to Department o	licate at the time of If Health and Senior	the regular monthly p Services; retain origin	reventative maintena al in department file.		
ALCO SENSOR IV SN 120495		NAME OF AGENCY TANEY CCUNTY	,	08/10/2	NSPECTION 024
LOCATION OF INSTRUMENT (STI	MISSOURI			1830	SPECTION
CHECKLIST: Place a mark	In the box by each it	em if found to be satis	actory or if operating	within established limits.	(Write in observed values
where determined.) Unmark	ked items must be d	corrected before using	instrument.		
DIGITAL READOUT (A	LL ELEMENTS OP	ERATIONAL)			Lalling and the second
TEMPERATURE OF ALCO SENSOR (10°C - 40°C)					
PRINTER WORKING I	PROPERLY				1
TIME AND DATE DISF					
BREATH ALCOHOL ACCU	URACY STANDARI	os			
SIMULATOR SOLUTION	NC		☑ COMPRESSE	D ETHANOL-GAS MIXT	URE
☑ STANDARD SUPPLIE	R INTOXILIZER	ll L	OT # <u>AG407603</u>	EXP. DATE 03/16/2	2026
☐ SIMULATOR TEMPER	RATURE (34°C ± 0.2	2°C) Si	M. SN	SIM. NIST EX	P DATE
0.080% STANDA	RD - MUST READ I RD - MUST READ I	standard solution being BETWEEN 0.095% an BETWEEN 0.076% an BETWEEN 0.038% ar	d 0.105% INCLUSIV id 0.084% INCLUSIV	E	C
TEST 1 ≠ 0.101		TEST 2 * 0.101		TEST 3 • 0.100	
☑ RFI DETECTOR OPER	RATING				
INDICATE THE NUMBER	OF BREATH TEST	TS IN THE FOLLOWIT	NG RANGES SINCE	THE LAST MAINTENA	NCE REPORT:
REFUSALS	(004)	(.0509) 5	(.1014) 2	(.1519)	(OVER .19) 1
List any new parts and de established limits (use oth	escribe any alteration	on or modification that	was made to restore	the instrument to opera	ate satisfactorily and with
ADJUST TIME WHICH					
ADJUST TIME WITHOUT	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
	at				
		BENS LED US AS GOALD		THE STATE OF THE	
INSPECTING OFFICER	A STATE OF THE STATE OF	PRINT NAME			
· Hogo	# 127	MARK SHINN TELEPHONE NUMBER			
PERMIT NUMBER/EXPIRATION PERMIT NUMBER 20		05/29/2026		(417) 546-7200	
Return completed repor	t to the: Breath Al by mail, f	cohol Program, MO D fax, or email.	epartment of Health	and Senior Services, So	utheast District Office



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

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 16-Mar-2026 Cyl. Type 108 Component

Certified Concentration

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 07:48

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 TYPE II MARK SHINN

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

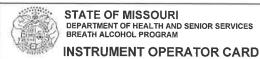
ALCO-SENSOR IV WITH PRINTER, INTOX DMT

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.

DATE 5/29/2024	Wike Wason
D/ (IL	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 240126	
EXPIRES 5/29/2026	Davla J. Nichelson
	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR 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 air in Missouri.

Operator SHINN, MARK Permit No 240126

Date Issued 5/29/2024 Date Expires 5/29/2026

