





MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

486674							
Complete this report in duplicate at the time Send copy to Department of Health and Seni				never instrument is repaired.			
ALCO SENSOR IV SN 035484	PRINTER SN 096.3580.926			DATE OF INSPECTION 01/22/2025			
LOCATION OF INSTRUMENT (STREET AND CITY) SCCPD / 101 Sheriff Dierker Court, O'F		TIME OF INSPECTION 4:40 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 val-							
ues where determined.) Unmarked items mu	st be corrected before us	sing instrument.					
☑ DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)							
▼ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)							
PRINTER WORKING PROPERLY							
☑ TIME AND DATE DISPLAYING PROPE	RLY						
BREATH ALCOHOL ACCURACY STANDA	RDS						
☐ SIMULATOR SOLUTION ☐ COMPRESSED ETHANOL-GAS MIXTURE							
✓ STANDARD SUPPLIER Intoximeters LOT # AG407801 EXP. DATE 03/18/2026							
SIMULATOR TEMPERATURE (34°C ± 0	MULATOR TEMPERATURE (34°C ± 0.2°C) SIMULATOR SN			SIMULATOR EXP DATE			
Run three tests using a standard solution less. Check the box corresponding to the 0.100% STANDARD - MUST READ 0.080% STANDARD - MUST READ 0.040% STANDARD - MUST READ	s standard solution being BETWEEN 0.095% and BETWEEN 0.076% and	used. (PRINTOUT A I 0.105% INCLUSIVI I 0.084% INCLUSIVI	ATTACHED) = =				
TEST 1 ☞ .101	EST 1 ★ .101 TEST 2 ★ .101			TEST 3 ▼ .100			
RFI DETECTOR OPERATING							
INDICATE THE NUMBER OF BREATH TES (DO NOT INCLUDE SELF-ADMINISTERED		G RANGES SINCE	THE LAST MAINTEN	ANCE REPORT:			
REFUSALS 0 (004) 0	(.0509) 0	(.1014) 0	(.1519) 2	(OVER .19) 0			
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).							
INSPECTING OFFICER SIGNATURE			PRINT NAME				
· P.O. Jahn Laum	1139		Laumeier, John				
TYPE II PERMIT NUMBER/EXPIRATION DATE 240118 / 05/29/2026	×	*	(636) 949-3000				
2875 Ja	Alcohol Program, MO De mes Boulevard Bluff, MO 63901	partment of Health a	nd Senior Services, S	outheast District Office			

Laumeier 240118 SCCPD Trest & 1 Test A 2 1752 SETUND 60492 SCCPD Laumeier zhous Secps Laumeler 24048 TEST & 3 Laumeies 240118 500 00 325 TEST



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: 19-Mar-2024

Lot # AG407801 Model 108

Exp Date

Cyl. Type

Component

Certified Concentration

18-Mar-2026

108

Ethanol Nitrogen 0.100 ± 2% BrAC (272 ppm)

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

Concentration **RGM Serial No.** EB0010581 391.8 ppm EB0010570 259.8 ppm 209.0 ppm EB0010285 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.

799.4 ppm 253.4 ppm

Concentration

CRM Serial No.

Concentration

CC727481 CC727496

CC727493 CC727498 389.8 ppm 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 07:50

Approved for Release:

Yusef Woods

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



STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES BREATH ALCOHOL PROGRAM



JOHN J. LAUMEIER

is hereby authorized to instruct and supervise operators, train instructors and operate the following breath analyzer(s):	, inspect,	cali	brate, per	rform field service	e and repairs,
ALCO-SENSOR IV WITH PRIN					
for the determination of the alcoholic content of blood from a sample of exp 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.	ired air. P		1700	inder the provisio	ns of sections

	Mile Massure
DATE5/29/2024	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 240118	Davis J. Michaelson
EXPIRES 5/29/2026	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES
	1 AD 4 /DE 10

MO 580-0771 (8-10)