



## 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<br>Send copy to Department of Health and Ser  |  |                                |   |                               |                     | d whenev       | ver instrument is   | repaired.  |
|---|--|--------------------------------|---|-------------------------------|---------------------|----------------|---------------------|------------|
| ALCO SENSOR IV SN<br>035484   | PRINTER SN 096.3580                                    | 0.926                          |   |                               |                     | DATE OF 02/18/ | INSPECTION<br>2025  |            |
| LOCATION OF INSTRUMENT (STREET AND CITY) SCCPD / 101 Sheriff Dierker Court, O'Fallon, Missouri 63366  |  |                                |   |                               |                     | TIME OF 1      | INSPECTION<br>am    |            |
| CHECKLIST: Place a mark in the box by ear ues where determined.) Unmarked items mu  | ch item if found t                                     | o be sati                      |   |                               | ng within establi   | shed limi      | its. (Write in obse | erved val- |
| DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)  |  |                                |   |                               |                     |                |                     |            |
| ▼ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)  |  |                                |   |                               |                     |                |                     |            |
| ✓ PRINTER WORKING PROPERLY  |  |                                |   |                               |                     |                |                     |            |
| ☑ TIME AND DATE DISPLAYING PROPERLY   |  |                                |   |                               |                     |                |                     |            |
| <b>BREATH ALCOHOL ACCURACY STANDA</b>   | RDS  | 1                              |   |                               |                     |                |                     |            |
| ☐ SIMULATOR SOLUTION  | Andrew American  |                                | ☑ сом                                     | PRESSE                        | D ETHANOL-G         | AS MIXT        | URE                 |            |
| STANDARD SUPPLIER Intoximeters  | T Y  | Le                             | OT # AG40                                 | 7801                          | EXP. DATE           | 03/18/2        | 2026                |            |
| ☐ SIMULATOR TEMPERATURE (34°C ±   | 0.2°C)   | SIMU                           | JLATOR SN                                 | l                             | SIMUI               | _ATOR E        | XP DATE             |            |
| Run three tests using a standard solution less. Check the box corresponding to the 0.100% STANDARD - MUST REAL 0.080% STANDARD - MUST REAL 0.040% STANDARD - MUST REAL                        | e standard solution<br>O BETWEEN 0.00<br>O BETWEEN 0.0 | on being<br>95% and<br>76% and | used. (PRII<br>I 0.105% IN<br>I 0.084% IN | NTOUT A<br>CLUSIVI<br>CLUSIVI | ATTACHED)<br>E<br>E | ina musi       | nave a spread o     | 005 01     |
| TEST 1 	 .102   | TEST 210   | 2                              |   | + /                           | TEST 3 🕶 .10        | 00             |                     |            |
| RFI DETECTOR OPERATING  |  | ) t                            | ř.  |                               |                     |                |                     |            |
| INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT: (DO NOT INCLUDE SELF-ADMINISTERED TESTS)   |  |                                |   |                               |                     |                |                     |            |
| 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). |  |                                |   |                               |                     |                |                     |            |
|   |  |                                |   |                               |                     |                |                     |            |
|   |  |                                |   |                               |                     |                |                     |            |
|   | and the second second                                  |                                |   |                               |                     |                |                     |            |
|   | 1  | ,                              |   |                               |                     |                |                     |            |
| INSPECTING OFFICER  | The state of   |                                |   |                               |                     |                | 的转换处理的证据            |            |
|   | 139  |                                | 1   |                               | Laumeier, Jo        | *****          |                     |            |
| TYPE II PERMIT NUMBER/EXPIRATION DATE 240118 / 05/29/2026   | of the state of the state of                           | , 1                            |   | ×                             | (636) 949-30        | 00             |                     |            |
| 2875 Ja   | Alcohol Program,<br>mes Boulevard<br>Bluff MO 63901    | MO Dep                         | partment of                               | Health a                      | nd Senior Servio    | es, Sout       | heast District Of   | fice       |

| AS IV Serial no: 835484 Version no: 532C TEST RECORD 00502 Temp Date Time 210L   | 12 02/18/25 11:36 Subject Name TEST # 4 Subject 1.D. RFT                     | Deerstor Name, I.D. Laumeler 240118 Location Scc A      |  |
|--|--|---|--|
| AS IV Serial no: 835484 Version no: 532C  TEST RECORD 89581  Temp Date Time 218L  Hir Blank: 82/18/25 11:34 .888                     | 22 02/18/25 11:34 ,106 Subject Name  TEST # 3 Subject I.D.                   | Operator Name, I.D.  Location  Scepb                    |  |
| AS IV Serial no: 835484 Version no: 532C TEST RECORD 00500 Temp Date Time 2101 Air Blank: 62/18/25 11:33 :006 21 02/18/25 11:33 :006 | 1 1 1  | Laureler 240118  Location  SCCPD                        |  |
| AS IV Serial no: 035484 Version no: 532C TEST RECORD 00499 Temp Date Time 210L Air Blank: 02/18/25 11:30 ,000                        | Calibration Check: 19 82/18/25 11:39 .182 Subject Name Test # 1 Subject I.D. | OPerator Name, I.D.  Loumcier 240 118  Location  5CC PD |  |



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

anol 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     | E80010562      | 104.2 ppm     |
| EB0010561      | 103.7 ppm     | E80010579      | 52.94 ppm     |
| EB0010681      | 52.22 ppm     | 6              |               |
|                |               |                |               |

 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 07:50

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

# JOHN J. LAUMEIER

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

MO 580-0771 (8-10)

EXPIRES 5/29/2026

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES