

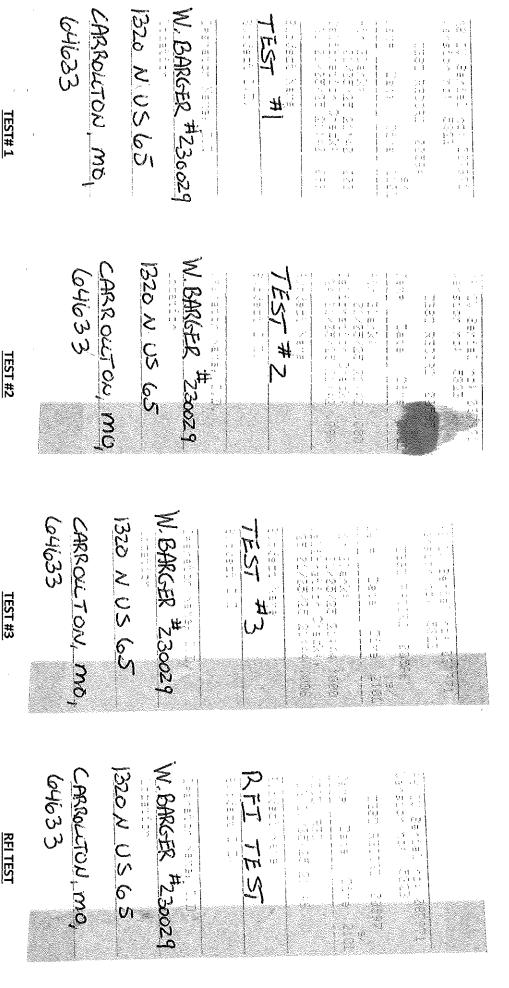
MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

| - Attitus | | | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|-----------------------------------|--|
| Complete this report in duplicate at the time Send copy to Department of Health and Seni | | | | henever instrument is repaired. | |
| ALCO SENSOR IV SN 087971 | NAME OF AGENCY CARROLLTON F | POLICE DEPARTM | | TE OF INSPECTION 1/05/2025 | |
| LOCATION OF INSTRUMENT (STREET AND CITY) 1320 N US 65., CARROLLTON, MO, 64 | 633 | | AIT. | ME OF INSPECTION 9:40 P.M. | |
| CHECKLIST: Place a mark in the box by each | | | 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 (1 | 0°C - 40°C) | | | | |
| PRINTER WORKING PROPERLY | | | | | |
| ☑ TIME AND DATE DISPLAYING PROPE | | | | | |
| BREATH ALCOHOL ACCURACY STANDA | RDS | | | | |
| ☐ SIMULATOR SOLUTION | | ☐ COMPRESSE | D ETHANOL-GAS | MIXTURE | |
| STANDARD SUPPLIER INTOXIMETE | RS INC L | OT # AG304002 | EXP. DATE 02 | 2/09/2025 | |
| ☐ SIMULATOR TEMPERATURE (34°C ± 0 | 0.2°C) SI | M. SN | SIM. NIS | T EXP DATE | |
| less. Check the box corresponding to the □ 0.100% STANDARD - MUST READ □ 0.080% STANDARD - MUST READ □ 0.040% STANDARD - MUST READ | BETWEEN 0.095% and BETWEEN 0.076% and | d 0.105% INCLUSIVI d 0.084% INCLUSIVI | <u>.</u> = | | |
| TEST 1 ~ .098 | TEST 2098 | | TEST 3098 | | |
| ☑ RFI DETECTOR OPERATING | | | | | |
| INDICATE THE NUMBER OF BREATH TES (DO NOT INCLUDE SELF-ADMINISTERED | | G RANGES SINCE | THE LAST MAINT | ENANCE REPORT: | |
| REFUSALS 0 (004) 0 | (.0509) | (.1014) 0 | (.1519) 0 | (OVER .19) 0 | |
| List any new parts and describe any alterati established limits (use other side if necessar Maintenance conducted in accordance v | y). | | the instrument to | operate satisfactorily and within | |
| INSPECTING OFFICER | | | | | |
| SIGNATURE A | | | PRINT NAME WILLIAM BAGE | =p | |
| TYPE II PERMIT NUMBER/EXPIRATION DATE | | | TELEPHONE NUMBER | -1 \ | |
| 230029/2-17-2025 | | MARKET MARKET TO THE STATE OF T | (660) 542-3128 | | |
| Return completed report to the: Breath A by mail, | lcohol Program, MO De fax, or email. | partment of Health a | nd Senior Services | , Southeast District Office | |

CARROLLTON POLICE DEPARTMENT-BREATH ALCOHOL PROGRAM



AS-IV S/N: 087971 Type II Permit Holder: William Barger #230029-Exp: 02/17/2025 Date of Maintenance Report: 1/5/2025

Carrollton Police Department AS-IV Monthly Maintenance Report

Page 1 of 1



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 Cralg Road St. Louis, Mo 63146 Test Date: 9-Feb-2023

Lot # AG304002 Model 108

Exp Date 9-Feb-2025 Cyl. Type 108

Component

Ethanol

Certified Concentration 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 |
|----------------|---------------|----------------|---------------|
| 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 | 800,0 ppm | CC727493 | 390.0 ppm |
| CC727496 | 253.0 ppm | CC727498 | 150.0 ppm |

Analytical Method: NDIR

Digitally signed by:Quelity Control Resson:Day gas standard cortification of analysis Locallon:Afgas USA LLC (Leb) Date:02.09.2023 19:01

Approved for Release:

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 ALOOHOL PROGRAM



PERMIT TYPE II

WILLIAM BARGER

| la 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 | | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|--|--|--|
| 577.020 through 577.041, R8Mo and 300.111 through 306.11 | ample of expired air. Permit leaved under the provisions of sections & RSMo. Mile Masswy | | | |
| PARE | DIRECTOR OF STATE PUBLIC HEALTH LABORATORY | | | |
| NUMBER 230029 | Doubant. Newscaller | | | |
| EXPIRES 2/17/2025 | DIRECTOR OF DEPARTMENT OF HEALTHAND BENIOR BETWIOES LAB-4 (RG-10) | | | |

