



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 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 094804	PRINTER SN 09B.3589.546	DATE OF INSPECTION 01/31/2025
LOCATION OF INSTRUMENT (STREET AND CITY) 9701 Marion Park Drive		TIME OF INSPECTION 4:08 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 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

<input type="checkbox"/> SIMULATOR SOLUTION	<input type="checkbox"/> COMPRESSED ETHANOL-GAS MIXTURE
<input checked="" type="checkbox"/> STANDARD SUPPLIER <u>Intoximeters</u> LOT # <u>AG417401</u> EXP. DATE <u>06/22/2026</u>	
<input type="checkbox"/> SIMULATOR TEMPERATURE (34°C ± 0.2°C) _____ SIMULATOR SN _____ SIMULATOR 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 ← 0.099	TEST 2 ← 0.098	TEST 3 ← 0.098
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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	(0-.04)	0	(.05-.09)	1	(.10-.14)	3	(.15-.19)	3	(OVER .19)	3
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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 PO Jared T. Littleton #5626
TYPE II PERMIT NUMBER/EXPIRATION DATE 230323, 12/21/2025	TELEPHONE NUMBER (816) 218-9393

Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office
2875 James Boulevard
Poplar Bluff, MO 63901

AS IV Serial no: 094804
Version no: 532B

TEST RECORD 01499

Temp Date Time ^{s/} 210L

Air Blank:
01/31/25 16:08 .000
Calibration Check:
24 01/31/25 16:08 .099

Subject Name

Test # 1

Subject I.D.

Operator Name, I.D.

Littleton 5626

Location

230323

12/21/2025

AS IV Serial no: 094804
Version no: 532B

TEST RECORD 01500

Temp Date Time ^{s/} 210L

Air Blank:
01/31/25 16:11 .000
Calibration Check:
24 01/31/25 16:11 .098

Subject Name

Test # 2

Subject I.D.

Operator Name, I.D.

Littleton 5626

Location

230323

12/21/2025

AS IV Serial no: 094804
Version no: 532B

TEST RECORD 01501

Temp Date Time ^{s/} 210L

Air Blank:
01/31/25 16:14 .000
Calibration Check:
25 01/31/25 16:14 .098

Subject Name

Test # 3

Subject I.D.

Operator Name, I.D.

Littleton 5626

Location

230323

12/21/2025

AS IV Serial no: 094804
Version no: 532B

TEST RECORD 01502

Temp Date Time ^{s/} 210L

VOID: RFI
12 01/31/25 16:16

Subject Name

RFI Test

Subject I.D.

Operator Name, I.D.

Littleton 5626

Location

230323

12/21/2025



STATE OF MISSOURI
DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM



**PERMIT
TYPE II**

JARED LITTLETON

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 12/21/2023

NUMBER 230323

EXPIRES 12/21/2025

MO 580-6771 (6-10)

Mike Magnum

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Paul J. Nicholas

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES
LAB-4 (R6-0)

STATE OF MISSOURI
DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM
INSTRUMENT OPERATOR CARD

The name of the operator is authorized to operate an evidential breathalyzer in Missouri for the determination of the alcoholic content in breath form of expired air.

Operator: **LITTLETON, JARED**
Permit No: **230323**
Date Issued: **12/21/2023** Date Expires: **12/21/2025**



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.
2091 Craig Road
St. Louis, Mo 63146**

Test Date: 25-Jun-2024

Lot # **AG417401 Model 108**

Exp Date: 22-Jun-2026
Cyl. Type: 108
Component: Ethanol, Nitrogen
Certified Concentration: 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	259.0 ppm	EB0010559	258.9 ppm
EB0010265	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
Location: St. Louis, MO, USA
Date: 2024.06.25 15:09

Yusef Woods

Approved for Release: Yusef Woods

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