



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 097403/099.3586.830	NAME OF AGENCY Shrewsbury PD	DATE OF INSPECTION 03/07/2025
LOCATION OF INSTRUMENT (STREET AND CITY) 4400 Shrewsbury Ave, Shrewsbury		TIME OF INSPECTION 10:00 am

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 checked="" type="checkbox"/> COMPRESSED ETHANOL-GAS MIXTURE
<input checked="" type="checkbox"/> STANDARD SUPPLIER <u>Intoximeters Inc</u> LOT # <u>AG414905</u> EXP. DATE <u>05/28/2026</u>	
<input type="checkbox"/> SIMULATOR TEMPERATURE (34°C ± 0.2°C) SIM. SN SIM. NIST 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 <input checked="" type="checkbox"/> .078	TEST 2 <input checked="" type="checkbox"/> .078	TEST 3 <input checked="" type="checkbox"/> .077
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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-.04)	(.05-.09)	(.10-.14)	(.15-.19)	(OVER .19)
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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).
Instrument functioning according to DHSS rules and regulations

INSPECTING OFFICER

SIGNATURE <i>Zachery King</i>	PRINT NAME Zachery King
TYPE II PERMIT NUMBER/EXPIRATION DATE 230200-09/07/2025	TELEPHONE NUMBER (314) 647-5656

Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office by mail, fax, or email.

AS IV Serial no: 097403
 Version no: 532B
 TEST RECORD 01093
 Temp Date Time 210L
 Air Blank: 03/07/25 10:10 .000
 Calibration Check: 19 03/07/25 10:10 .078
 Subject Name
 TESTA
 Subject I.D.
 123
 Operator Name, I.D.
 CPL KING 123
 Location
 SPD

AS IV Serial no: 097403
 Version no: 532D
 TEST RECORD 01097
 Temp Date Time 210L
 Air Blank: 03/07/25 10:11 .000
 Calibration Check: 20 03/07/25 10:11 .375
 Subject Name
 TESTA
 Subject I.D.
 123
 Operator Name, I.D.
 ANA KING 123
 Location
 SPD

AS IV Serial no: 097403
 Version no: 532B
 TEST RECORD 01099
 Temp Date Time 210L
 Air Blank: 03/07/25 10:13 .000
 Calibration Check: 21 03/07/25 10:13 .077
 Subject Name
 TESTA
 Subject I.D.
 123
 Operator Name, I.D.
 KING 123
 Location
 SPD

AS IV Serial no: 097403
 Version no: 532B
 TEST RECORD 01099
 Temp Date Time 210L
 Air Blank: 03/07/25 10:14
 Calibration Check: 22 03/07/25 10:14 .000
 Subject Name
 TESTA
 Subject I.D.
 123
 Operator Name, I.D.
 KING 123
 Location
 SPD



Airgas USA LLC (LAB)
3500 Bernard Street
St. Louis, Mo. 63103
Ph: (314) 533-3100
Fax: (314) 633-7328

Certificate of Analysis

Customer Name
Exclusive Supplier
Intoximeters, Inc.
2081 Craig Road
St. Louis, Mo 63146

Test Date: 28-May-2024

Lot # AG414905 Model 108

Exp Date	Cyl. Type	Component	Certified Concentration
28-May-2026	108	Ethanol Nitrogen	0.060 ± 0.002 BrAC (218 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	382.5 ppm
EB0010570	259.8 ppm	EB0010559	258.8 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	786.4 ppm	CC727493	389.8 ppm
CC727486	253.4 ppm	CC727498	150.2 ppm

Analytical Method: NDIR

Digitally signed by Quality Control
Intoximeters, Inc. on 28-May-2024 at 09:02:00
DN: cn=Quality Control, o=Intoximeters, Inc., ou=Quality Control, email=qc@intox.com

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

ZACHERY KING

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

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 308.111 through 308.119 RSMo.

DATE 9/7/2023

NUMBER 230200

EXPIRES 9/7/2025

Mike Mason

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Daniel S. Richardson

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MS 880-0771 (9-19)

LAB-1 (8-16)

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

INSTRUMENT OPERATOR CARD

The named operator is authorized to operate an alcohol breath alcohol instrument for the determination of the alcoholic content in breath from a sample of expired air in Missouri.

Operator: KING, ZACHERY
Permit No: 230200
Date Issued 9/7/2023 Date Expires 9/7/2025

