





MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

- MISTARY				L instrument is repaire
Complete this report in duplicate at the t Send copy to Department of Health and	ime of the regular i Senior Services; re	nonthly preventative mainter tain original in department fil	nance check, and e.	whenever instrument is repaired
ALCO SENSOR IV SN 097430	PRINTER SN 096.358			DATE OF INSPECTION 01/27/2025
LOCATION OF INSTRUMENT (STREET AND CITY)				time of inspection 6:47 am
205 N Lexington St Harrisonville MC CHECKLIST: Place a mark in the box by	each item if found	to be satisfactory or if opera	ting within establis	hed limits. (Write in observed va
ues where determined.) Unmarked items	s must be corrected	before using instrument.		<u> </u>
DIGITAL READOUT (ALL ELEMEN	TS OPERATIONAL)		
TEMPERATURE OF ALCO SENSO	R (10°C - 40°C)			
PRINTER WORKING PROPERLY				
TIME AND DATE DISPLAYING PR				
BREATH ALCOHOL ACCURACY STA	NDARDS			I A MINTH DE
SIMULATOR SOLUTION		COMPRESS	ED ETHANOL-GA	
STANDARD SUPPLIER Intoximet	ers	LOT # AG432602	EXP. DATE	11/21/2026
SIMULATOR TEMPERATURE (34°	C ± 0.2°C)	SIMULATOR SN	SIMUL	ATOR EXP DATE
0.080% STANDARD - MUST I 0.040% STANDARD - MUST I	READ BETWEEN 0	.038% and 0.042% INCLUS	TEST 3 # 0.0	180
TEST 1 ≠ 0.080 TEST 2 ≠ 0.080		080	1ES1 3 ~ 0.080	
RFI DETECTOR OPERATING				
INDICATE THE NUMBER OF BREATS (DO NOT INCLUDE SELF-ADMINISTI	TESTS IN THE F	OLLOWING RANGES SINC	E THE LAST MAI	NTENANCE REPORT:
0	.	0 (10-14) 0	(.1519)	0 (OVER .19) 0
REFUSALS 0 (004) List any new parts and describe any a	11.00 .007	1 (.1017)	100	
List any new parts and describe any a established limits (use other side if neo	essarv).	HIGH THAT WAS THACK TO TOOK		88
established limits (doe outer class it is	Section 1			
MODEOTING OFFICER	1.70			
INSPECTING OFFICER SIGNATURE		· · · · · · · · · · · · · · · · · · ·	PRINT NAME R. Stark	
SIGNATURE #20	7		TELEPHONE NUMB	
TYPE IT PERMIT NUMBER/EXPIRATION DATE 230174 08/08/2025		<u> </u>	(816) 380-8	940
Return completed report to the: Bi	eath Alcohol Progra	am, MO Department of Healt	h and Senior Serv	rices, Southeast District Office
	375 James Bouleva oplar Bluff, MO 639		go so karte see	
		The state of the s	CV3	



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: 21-Nov-2024

Lot # AG432602 Model 108

Exp Date 21-Nov-2026

Cyl. Type 108 Component

Certified Concentration 0.080 ± 0.002 BrAC (218 ppm)

Ethanol 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	799.4 ppm	CC727493	389.8 ppm
CC727496	253.4 ppm	CC727498	150.2 ppm

Analytical Method: NDIR

Olgitally signed by:Quality Control Reason:Ory gas standard certification of analysis Location:Argas USA LLC (Lab) Date:11.22.2024 07:55

Approved for Release:

Yusef Woods

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

AS IV Serial no: 097430 Version no: 532B TEST RECORD 01084 Temp Date Time 210L Air Blank: 01/27/25 96:51 .000 Calibration Check: 22 01/27/25 06:51 .080 Subject Name Subject I.D. Operator Name, I.D. location AS IV Serial no: 097430 Version no: 532B TEST RECORD 81883 Date Time 210L Air Blank: 81/27/25 06:49 .000 Calibration Check: 22 01/27/25 06:49 .080 Subject Name Operator Name, I.D.

location

TEST RECORD 01082

TEST RECORD 01082

9/
Temp Date Time 210L

Air Blank:
01/27/25 86:47 .000

Calibration Check:
22 01/27/25 06:47 .000

Subject Name

Tost #

Subject I.B.

Stack#269

Decrator Name, I.B.

#//
Location

AS IV Serial nof 097430

AS IV Serial no: 097430
Version no: 532B

TEST RECORD 01085

Temp Pate Time 210L

VOID: RFI
12 01/27/25 06:53

Subject Name

Subject I.D.

STARK #109

Operator Name, I.D.

Location



STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES **BREATH ALCOHOL PROGRAM**



PERMIT TYPE II

RYAN STARK

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, INTOX EC/IR II

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 8/8/2023	Mike Massur
	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 230174	
EXPIRES 8/8/2025	Davla I. McCaller
MD 580-0771 (6-10)	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (R6-10)

