

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

- Frank				30 500		
Complete this report in duplicate at the time of Send copy to Department of Health and Senio				l whenev	er instrument is repa	ired.
ALCO SENSOR IV SN 097430	[18] 18 [18]			DATE OF I 02/24/2	NSPECTION 2025	
LOCATION OF INSTRUMENT (STREET AND CITY) 205 N Lexington St Harrisonville MO 647			TIME OF 0 6:22 at	NSPECTION m		
CHECKLIST: Place a mark in the box by each	item if found to be sati	sfactory or if operation	ng within establis	shed limit	ts. (Write in observed	val-
ues where determined.) Unmarked items mus						
DIGITAL READOUT (ALL ELEMENTS OF	PERATIONAL)			3		
TEMPERATURE OF ALCO SENSOR (10	°C - 40°C)		4000			
PRINTER WORKING PROPERLY	<u> </u>			- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
TIME AND DATE DISPLAYING PROPER	45 78	20 C S C C C C C C C C C C C C C C C C C			<u> </u>	
BREATH ALCOHOL ACCURACY STANDAR	פעו	_				
SIMULATOR SOLUTION			D ETHANOL-G	***		
STANDARD SUPPLIER Intoximeters		OT # AG432602	EXP. DATE	11/21/2	026	
SIMULATOR TEMPERATURE (34°C ± 0.	.2°C) SIMI	ULATOR SN	SIMUL	LATOR E	XP 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	1 0.105% INCLUSIV 1 0.084% INCLUSIV	E E			
TEST 1 ₹ 0.080		TEST 3 - 0.079				
☑ RFI DETECTOR OPERATING		5501 V029 0401 P		3 - 20 <u>1</u> 2	******	
INDICATE THE NUMBER OF BREATH TES (DO NOT INCLUDE SELF-ADMINISTERED		G RANGES SINCE	THE LAST MAI	NTENAN	ICE REPORT:	
REFUSALS 0 (004) 0	(.0509) 0	(.1014) 0	(.1519)	0	(OVER .19) 0	
List any new parts and describe any alteration established limits (use other side if necessary	on or modification that v	(.10 .14)	300 00 00	to operat		/ithin
INSPECTING OFFICER			PRINT NAME			
# 284			R. Stark			
TYPE II PERMIT NUMBER/EXPIRATION DATE 230174 08/08/2025	30000		(816) 380-89			
Return completed report to the: Breath Al 2875 Jan	cohol Program, MO De nes Boulevard luff, MO 63901	partment of Health a	nd Senior Servi	ces, Sout	5000	
MO 100 1001 (6 10)		FEIRMATIVE ACTION FMPLOYER		x188		LAB-114

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(S IV Serial no: 097430 Version no: 5328

TEST RECORD 01092

Air Blank: 82/24/25 86:22 .088 Calibration Check: 20 82/24/25 86:22 .088

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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		P

CRM Serial No. CC727481

Concentration 799.4 ppm 253.4 ppm

CRM Serial No. CC727493

CC727498

Concentration 389.8 ppm 150.2 ppm

Analytical Method: NDIR

CC727496

Digitally signed by:Quality Control Reason:Dry 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



STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES.
BREATH ALCOHOL PROGRAM



PERMIT

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 sopheid siz Permit his ded under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 506.113 RSMo.

DATE8/8/2023	Mile Mine
NUMBER 230174	DIMEDION OF STATE PURICE HERE THE LINES PLATORY
EXPIRES 8/8/2025	Daves J. Michaeler
WO 388-0771-(8-10)	DIRECTOR OF DEPARTMENT OF HEALTH AND BEHINGER



Operator STARK, RYAN Permit No 230174

Date Issued 8/8/2023 Date Expires 8/8/20

