

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

THE SERVE Y						
Complete this report in duplicat Send copy to Department of He					enever instrument is repaired.	
ALCO SENSOR IV SN 108393		NAME OF AGENCY St. Louis County Police Department			OF INSPECTION 26/2025	
LOCATION OF INSTRUMENT (STREET AND CITY) 14301 S. Outer 40 Rd (MODOT TMC)					of inspection 7 pm	
CHECKLIST: Place a mark in th	e box by each ite	m if found to be sat	isfactory or if operating	within established lin	nits. (Write in observed values	
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 PRO	PERLY					
TIME AND DATE DISPLAY	•					
BREATH ALCOHOL ACCURA	CY STANDARDS	S				
☐ SIMULATOR SOLUTION			☑ COMPRESSE	D ETHANOL-GAS M	IIXTURE	
STANDARD SUPPLIER In	toximeters		LOT # AG321505	EXP. DATE 08/0	03/2025	
☐ SIMULATOR TEMPERATURE (34°C ± 0.2°C)		C) SIM. SN SIM.		SIM. NIST	NIST EXP DATE	
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 • .099	TE	ST 2 🕶 .098		TEST 3 • .098		
☑ RFI DETECTOR OPERATING	NG .					
INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT: (DO NOT INCLUDE SELF-ADMINISTERED TESTS)						
REFUSALS (004	l) (.0509)	(.1014)	(.1519)	(OVER .19)	
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 TUUID				PRINT NAME Michael White		
TYPE II PERMIT NUMBER/EXPIRATION DATE 230233-10/31/2025				TELEPHONE NUMBER (636) 529-8210		
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: 108393
Version no: 532B

TEST RECORD 00879

9/
Temp Date Time 210L

Air Blank: 02/26/25 14:57 .000
Calibration Check: 21 02/26/25 14:57 .099

Subject Name

Test
Subject I.D.

Operator Name, I.D.

4301 5,00 tu

Test Record 00880
Temp Date Time 210L
fir Blank:
 02/26/25 14:59 .000
Calibration Check:
 22 02/26/25 14:59 .098

Subject Name
 Test
Subject I.D.

Operator Name, I.D.

Whith 3033

AS IV Serial no: 108393

AS IV Serial no: 108393 Version no: 532B TEST RECORD 00881 9/ Temp Date Time 210L Air Blank: 02/26/25 15:01 .000 Calibration Check: 22 02/26/25 15:01 .098 Subject Name Tesd Subject I.D. 3 Operator Name, I.D. White 230233 Location 14301 5,00 kg

AS IV Serial no: 108393
Usersion no: 5328
TEST RECORD 00882
TEST RECORD 00882

Temp Date Time 2101

UOID: RFI
12 02/26/25 15:02
Subject Name
Subject Name
Subject Name
Teab
Subject Name
Teab
Location

MAJO1 5.00 2007



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: 3-Aug-2023

Lot # AG321505 Model 108

Exp Date 3-Aug-2025 Cyl. Type 108 Component

Ethanol Nitrogen Certified Concentration

anol 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	259.8 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 algned by:Quality Control Reason:Dry gas standard certification of analysis Location:Airgas USA LLC (Lab) Date:08.03.2023 17:58

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

MICHAEL WHITE

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 DMT

for the determination of the alcoholic content of blood from a 577,020 through 577,041, RSMo and 306.111 through 306.1	sample of expired air. Permit issued under the provisions of sections 19 RSMo.	
	Mile Magane	
DATE10/31/2023	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY	
NUMBER 230233	Daves I. nichelson	
EXPIRES 10/31/2025	DIRECTOR OF DEPARTMENT OF HEALTH AND SERVICES	



STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES BREATH ALCOHOL PROGRAM

INSTRUMENT OPERATOR CARD

The named cardholder is authorized to operate an evidential breath elcohol instrument for the determination of the alcoholic content in breath form of expired ali in Missouri.

Operator WHITE, MICHAEL

Permit No 230233

Date Issued 10/31/2023 Date Expires 10/31/2025

