

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

Complete this report in d Send copy to Departmen					whenever instrument is repaired.	
ALCO SENSOR IV SN 111320		NAME OF AGENCY St. Louis County Police Department		I	DATE OF INSPECTION 01/27/2025	
LOCATION OF INSTRUMENT (STREET AND CITY) 14301 S. Outer 40 Rd					TIME OF INSPECTION 11:26 am	
CHECKLIST: Place a ma where determined.) Unm				g within establishe	ed limits. (Write in observed values	
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						
☐ SIMULATOR SOLUTION					S MIXTURE	
☑ STANDARD SUPPLI	ER Intoximeters		LOT # AG 321505 EXP. DATE 08/03/2025			
☐ SIMULATOR TEMPE	ERATURE (34°C ± 0).2°C) SII	C) SIM. SN SIM.		IST EXP DATE	
less. Check the box of 0.100% STAND/	orresponding to the ARD - MUST READ ARD - MUST READ	e standard solution being D BETWEEN 0.095% and D BETWEEN 0.076% and D BETWEEN 0.038% and	used. (PRINTOUT d 0.105% INCLUSIV d 0.084% INCLUSIV	ATTACHED) E E	nd must have a spread of .005 or	
TEST 1 ★ .099		TEST 2 • .099		TEST 3 ▼ .098		
RFI DETECTOR OPE	ERATING					
INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT: (DO NOT INCLUDE SELF-ADMINISTERED TESTS)						
REFUSALS	(004)	(.0509)	(.1014)	(.1519)	(OVER .19)	
List any new parts and d established limits (use of			vas made to restore	the instrument to	o operate satisfactorily and within	
· .						
INSPECTING OFFICER						
SIGNAFURE 9417			P-1944/4/	Michael White		
TYPE I PERMIT NUMBER/EXPIRATION DATE 230233 10/31/2025			· · · · · · · · · · · · · · · · · · ·	(636) 529-821		
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: 111320
Version no: 532B

TEST RECORD 00690

Temp Date Time 210L

Air Blank:
01/27/25 11:26 .000
Calibration Check:
21 01/27/25 11:26 .099

Subject Name

Tesd
Subject I.D.

Operator Name, I.D.

Location
(430) 5.00404000

AS IV Serial no: 111320
Version no: 532B

TEST RECORD 00691
9/
Temp Date Time 210L
Air Blank: 01/27/25 11:28 .000
Calibration Check: 22 01/27/25 11:28 .099

Subject Name

Lest
Subject I.D.

Operator Name, I.D.

Location

14301 5,00tu

AS IV Serial no: 111320
Version no: 532B

TEST RECORD 00692

9/
Temp Date Time 210L

Air Blank:
01/27/25 11:30 .000
Calibration Check:
23 01/27/25 11:30 .098

Subject Name

CSA

Subject I.D.

3

Operator Name, I.D.
Uhill 33033
Location
[M3015.00444 Who

SIU Serial not 111328

Gresion not 5328

TEST RECURD 00693

TEST RECURD 00693

IN THE Time 210L

Subject Name

TEST Name

TEST

Subject Name

TEST

Operator Name: I.D.

Location

1480150454444



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

Certified Concentration

Ethanol

ioi ion 0.100 ± 2% BrAC (272 ppm)

Nitrogen

Certification Traceable to N.I.S.T. RGM and to CRM Ethanol Standards:

RGM Serial No. Concentration
EB0010581 391.8 ppm
EB0010570 259.8 ppm
EB0010285 209.0 ppm
EB0010561 103.7 ppm
EB0010681 52.22 ppm

RGM Serial No. EB0010603 EB0010559 EB0010562

392.5 ppm 258.9 ppm 104.2 ppm 52.94 ppm

Concentration

CRM Serial No.

CC727481 CC727496 Concentration

800.0 ppm 253.0 ppm CRM Serial No.

CC727493 CC727498

EB0010579

Concentration

390.0 ppm 150.0 ppm

Analytical Method: NDIR

Digitally signed by:Quality Control Reason:Dry gas standard certification of analysis Location:Arigas 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 repails, 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 sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE10/31/2023	DIRECTOR OF STATE PUBLIC/HEALTH LABORATORY			
NUMBER 230233	7 1 1 2 2 1			
EXPIRES 10/31/2025	Danes J. Michaelson			
	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES			
The course beauty stated as	LARMORES L			

MO 580-0771 (6/10)

LAB-4 (FI6-10)



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

Operator

WHITE, MICHAEL

Permit No 230233 Date Issued 10/31/2023

Date Expires 10/31/2025

