



By Tracy Crews at 8:21 am, Mar 03, 2025



ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

* MECHEN * /											
	eport in duplicate at epartment of Health							d whene	ever instrument is	s repaired.	
ALCO SENSOR IV SN 111633			NAME OF AGENCY Kansas City Police Department					DATE OF INSPECTION 02/28/2025			
LOCATION OF INSTRUMENT (STREET AND CITY) 9701 MARION PARK DR, KANSAS CITY								TIME OF	INSPECTION 19	34	
CHECKLIST: PI	ace a mark in the bo	ox by each i	tem if found t	o be sati	sfactory or if	perating	within establish	ed limits	s. (Write in obser	ved values	
where determine	ed.) Unmarked item	s must be	corrected bef	ore usin	g instrument.						
☑ DIGITAL RE	EADOUT (ALL ELE	MENTS OF	PERATIONAL	-)							
✓ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)											
PRINTER WORKING PROPERLY											
	DATE DISPLAYING										
BREATH ALCO	HOL ACCURACY	STANDAR	DS								
☐ SIMULATOR	SIMULATOR SOLUTION					☑ COMPRESSED ETHANOL-GAS MIXTURE					
Z STANDARD	STANDARD SUPPLIER INTOXIMETERS				LOT # AG417401 EXP. DATE 06/22/2026						
☐ SIMULATOR	SIMULATOR TEMPERATURE (34°C ± 0.2°C)			s	IM. SN		SIM. I	SIM. NIST EXP DATE			
	STANDARD - MUS STANDARD - MUS .098	ST READ E							.097		
✓ RFI DETEC7	TOR OPERATING									<u></u>	
	NUMBER OF BRE	ATH TEST	S IN THE FO	LLOWII	NG RANGES	SINCE	THE LAST MAI	NTENA	NCE REPORT:		
(DO NOT INCLU	JDE SELF-ADMINI	STERED T	ESTS)								
REFUSALS	0 (004)	0	(.0509)	1	(.1014)	2	(.1519)	2	(OVER .19)	2	
established limits	rts and describe and s (use other side if a meets all DOH	necessary)				restore	the instrument	to opera	ate satisfactorily	and within	
INSPECTING OF	FFICER						PRINT NAME Wa	ıde F	Robinson		
TYPE II PERMIT NUMBER/EXPIRATION DATE 230228 - 10/23/2025							TELEPHONE NUMBER 816-482-8141				
Return complet	ed report to the:		ohol Program x, or email.	n, MO De	epartment of	Health a	nd Senior Servi	ces, Sou	utheast District C	ffice	

AS IV Serial no: 111633 Version no: 532B AS IV Serial no: 111633 TEST RECORD 00806 Version no: 532B Temp Date Time 210L TEST RECORD 00807 Air Blank: Temp Date Time 210L 02/28/25 19:34 .000 Calibration Check: Air Blank: 23 02/28/25 19:34 .098 02/28/25 19:35 .000 Calibration Check: Subject Name 23 02/28/25 19:35 .098 TEST Subject Name Subject I.D. TEST 2 Subject I.D. Operator Name, I.D. Robinson 230228 Operator Name: I.D. Location Robinson 230228 Location AS IV Serial no: 111633 Version no: 532B AS IV Serial no: 111633 Version no: 532B TEST RECORD 00808 9/ TEST RECORD 00909 Temp Date Time 210L Temp Date Time 210L Air Blank: 02/28/25 19:36 .000 VOID: RFI Calibration Check: 12 02/28/25 19:38 24 02/28/25 19:36 .097 Subject Name Subject Name KFI TEST TEST 3 Subject I.D. Subject I.D. Operator Name, I.D. Operator Wame, I.D. Kobinson robinson 230228 Location Location



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. 208 Craig Road St. Louis, Mo 63146

Test Date: 25-Jun-2024

Lot # AG417401 Model 108

Exp Date Component Certified Concentration Cyl. Type 0.100 ± 2% BrAC (272 ppm) 22-Jun-2026 Ethanol Nitrogen Certification Traceable to N.I.S.T. RGM and to CRM Ethanoi Standards: ROM Serial No. RGM Serial No. Concentration Concentration 391.8 ppm 392,5 ppm EB0010603 EB0010531 259.8 ppm EB0010559 EE0040570 258.9 ppm 104.2 ppm 209.0 ppm EB0010562 EB0010285 EB0010579 52.94 ppm EB0010561 103.7 ppm EB0010681 52.22 ppm CRM Serial No. Concentration CRM Serial No. Concentration CC727493 389.8 ppm 790.4 ppm CC727481 CC727498 150.2 ppm

CC727496 Analytical Method: NDIR

Digitally signed by:Quality Control Reason:Dry gas standard certification of energy/sta-Location:Airgus USA ELC (Lab) Date:06.29.2624.15:09

253.4 ppm

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



WADE ROBINSON

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, INTOXILYZER 8000

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.

DATE10/23/2023	Mile Meson					
	DIRECTOR OF STATE PLOUD HEALTH LABORATORY					
NUMBER 230228	¬					
EXPIRES 10/23/2025	Daven J. nicholan					
talC 588-0771 (9-10)	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES					

