



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
 STATE PUBLIC HEALTH LABORATORY  
**ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT**

REPORT #7

Complete this report in duplicate at the time of the regular monthly preventative maintenance check, and whenever instrument is repaired. Send copy to Department of Health and Senior Services; retain original in department file.

ALCO SENSOR IV SN 111655	PRINTER SN 09B.3589.464	DATE OF INSPECTION 01/24/2025
LOCATION OF INSTRUMENT (STREET AND CITY) 115 E. 69 Highway, Claycomo, MO 64119		TIME OF INSPECTION 2:19 pm

**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 PROPERLY
- TIME AND DATE DISPLAYING PROPERLY

**BREATH ALCOHOL ACCURACY STANDARDS**

- SIMULATOR SOLUTION
- COMPRESSED ETHANOL-GAS MIXTURE

STANDARD SUPPLIER Intoximeters LOT # AG309501 EXP. DATE 04/05/2025

SIMULATOR TEMPERATURE (34°C ± 0.2°C) \_\_\_\_\_ SIMULATOR SN \_\_\_\_\_ SIMULATOR EXP DATE \_\_\_\_\_

- CALIBRATION CHECK – (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)  
 Run three tests using a standard solution. All three tests must be within ±5% of the standard value and must have a spread of .005 or 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      TEST 2 ● .099      TEST 3 ● .098

- RFI DETECTOR OPERATING

**INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT: (DO NOT INCLUDE SELF-ADMINISTERED TESTS)**

REFUSALS	4	(0-.04)	0	(.05-.09)	1	(.10-.14)	1	(.15-.19)	0	(OVER .19)	0
----------	---	---------	---	-----------	---	-----------	---	-----------	---	------------	---

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).

Instrument operating within MO DOHSS standards and guidelines.

*[Handwritten signature]*

<b>INSPECTING OFFICER</b>	
SIGNATURE # 170	PRINT NAME Cpl. Zachery Taff #170
TYPE II PERMIT NUMBER EXPIRATION DATE 240234 - 10/29/2026	TELEPHONE NUMBER (816) 452-4613

Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office  
 2875 James Boulevard  
 Poplar Bluff, MO 63901

AS IV Serial no: 111655  
Version no: 532B

TEST RECORD 01313

Temp Date Time <sup>g/</sup> 210L

Air Blank:  
01/24/25 14:19 .000

Calibration Check:  
21 01/24/25 14:19 .099

TEST 1

Subject Name

TEST

Subject I.D.

CPL. Z. TAFF 240234

Operator Name, I.D.

CLAYCOMO PHQ

Location

115 E US 69

CLAYCOMO, MO

AS IV Serial no: 111655  
Version no: 532B

TEST RECORD 01314

Temp Date Time <sup>g/</sup> 210L

Air Blank:  
01/24/25 14:21 .000

Calibration Check:  
22 01/24/25 14:21 .099

TEST 2

Subject Name

TEST

Subject I.D.

CPL TAFF 240234

Operator Name, I.D.

CLAYCOMO PHQ

Location

115 E US 69

CLAYCOMO, MO

AS IV Serial no: 111655  
Version no: 532B

TEST RECORD 01315

Temp Date Time <sup>g/</sup> 210L

Air Blank:  
01/24/25 14:22 .000

Calibration Check:  
23 01/24/25 14:22 .098

TEST 3

Subject Name

TEST

Subject I.D.

CPL TAFF 240234

Operator Name, I.D.

CLAYCOMO PHQ

Location

115 E US 69

CLAYCOMO, MO

AS IV Serial no: 111655  
Version no: 532B

TEST RECORD 01316

Temp Date Time <sup>g/</sup> 210L

VOID: RFI

12 01/24/25 14:24

TEST R. F. L.

Subject Name

TEST

Subject I.D.

CPL TAFF 240234

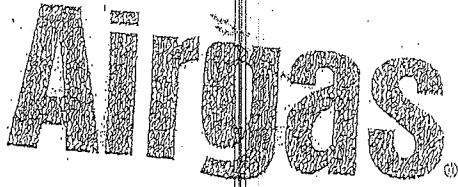
Operator Name, I.D.

CLAYCOMO PHQ

Location

115 E US 69

CLAYCOMO, MO



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: 5-Apr-2023

Lot # AG309501 Model 108

Exp Date  
5-Apr-2025

Cyl. Type  
108

Component  
Ethanol  
Nitrogen

Certified Concentration  
0.100 ± 2% BrAC (272 ppm)

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

RGM Serial No.  
EB0010581  
EB0010570  
EB0010285  
EB0010561  
EB0010681

Concentration  
391.8 ppm  
259.8 ppm  
209.0 ppm  
103.7 ppm  
52.22 ppm

RGM Serial No.  
EB0010603  
EB0010559  
EB0010562  
EB0010579

Concentration  
392.5 ppm  
258.9 ppm  
104.2 ppm  
52.94 ppm

CRM Serial No.  
CC727481  
CC727496

Concentration  
800.0 ppm  
253.0 ppm

CRM Serial No.  
CC727493  
CC727498

Concentration  
390.0 ppm  
150.0 ppm

Analytical Method: NDIR

Digitally signed by: Quality Control  
Reason: Dry gas standard certification of analysis  
Location: Airgas USA LLC (Lab)  
Date: 04.05.2023 17:34

Approved for Release:

Rod Marsala

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**  
**ZACHERY W. TAFF**

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**

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 10/29/2024

NUMBER 240234

EXPIRES 10/29/2026

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

LAB-4 (R6-10)



**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 alcohol instrument for the determination of the alcoholic content in breath form of expired air in Missouri.*

Operator TAFF, ZACHERY  
 Permit No 240234  
 Date Issued 10/29/2024 Date Expires 10/29/2026

