

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

A PRINCE A							
Complete this report in o	duplicate at the time	of the regular monthly nior Services; retain ori	r preventative mainte ginal in department fi	nance check, and whene	ever instrument is repaired.		
ALCO SENSOR IV SN 113777		NAME OF AGENCY St. Louis County Police		DATE OF INSPECTION 03/28/2025			
LOCATION OF INSTRUMENT (STREET AND CITY) 16851 Main Street, Wildwood, MO 63040				TIME OF 11:01	INSPECTION		
				g within established limits	s. (Write in observed values		
where determined.) Unm	arked items must b	e corrected before usin	g instrument.				
✓ DIGITAL READOUT	(ALL ELEMENTS	OPERATIONAL)					
TEMPERATURE OF ALCO SENSOR (10°C - 40°C)							
PRINTER WORKING PROPERLY							
TIME AND DATE DI		and the second s		·			
BREATH ALCOHOL AC	CURACY STANDA	RDS					
SIMULATOR SOLUTION			COMPRESSED ETHANOL-GAS MIXTURE				
STANDARD SUPPLIER Intoximeters			LOT # AG321505 EXP. DATE 08/03/2025				
SIMULATOR TEMPE	ERATURE (34°C ± 0	0.2°C) S	IM. SN	SIM. NIST EX	P DATE		
0.100% STAND	ARD - MUST READ ARD - MUST READ	e standard solution bein DBETWEEN 0.095% at DBETWEEN 0.076% at DBETWEEN 0.038% at	nd 0.105% INCLUSIV nd 0.084% INCLUSIV	/E /E			
TEST 1 ★ .095		TEST 2 ☞ .095		TEST 3 - .095			
RFI DETECTOR OPE	ERATING						
INDICATE THE NUMBER (DO NOT INCLUDE SEL			NG RANGES SINCE	THE LAST MAINTENAN	NCE REPORT:		
refusals 0	(004) 0	(.0509)	(.1014) 2	(.1519)	(OVER .19) ⁰		
List any new parts and d established limits (use oti			was made to restore	the instrument to opera	te satisfactorily and within		
INSPECTING OFFICER							
SIGNATURE (1)	D +1973		PRINT NAME PO Tosie DSN 4553				
TYPE II PERMIT NUMBER/EXPIRATION DATE 240128 / 05/29/202				TELEPHONE NUMBER (636)529-8210			
	·	······································		<u> </u>			
Return completed repor		lcohol Program, MO De ax, or email.	epartment of Health a	nd Senior Services, Sout	theast District Office		

AS IV Sertal not 113777 Version no: 5320

TEST RECORD 00429

lemp Date Time 210

Air Blank: 03/28/25 11-01 Calibration Check: 21 03/28/25 11 01

Subject Name

TON A Subject 1.D.

Operator Name, I.D.

Location 7533

AS IV Serial no: 113777 Version no: 5320

TEST RECORD 00431

Temp Date Time 210t

Air Blank: 03/28/25_11:04 000 Calibration Check: 21 03/28/25 11:04 095

Subject Name

Subject 1, D.

Operator Name, 1.0

1.0. TORE 4553 Location Precinct

AS IV-Serial no: 113777 Version no: 5320

Z LEST RECORD 00430

Temp Date Time 210

Air Blank: 03/28/25 11-02 .000 Calibration Check: 21 05/28/25 11:02 095

Subject Name

Subject

Operator Name, I.D.

P.O. TONE 4553 Location A

AS IV Serial no: 113777 Version no: 5320

TEST RECORD 00432

Temp Date Time 210

VOID: RFT 12 03/28/25 11:05

Subject Name

Subject

Operato: Name, I.D.



Airgas USA LLC (LAB) 3500 Bemard 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

Certified Concentration

Nitrogen

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 CC727498 253.0 ppm 150.0 ppm

Analytical Method: NDIR

Digitally signed by:Quality Control Reason:Dry gas standard certification of analysis Location:Afrgas 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

ROBERT TOSIE

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	n a sample of expired air. Permit issued under the provisions of sections 06.119 PSMo.
The state of the s	Mile Maguni
DATE5/29/2024	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 240128	
EXPIRES 5/29/2026	DONAL J. N. CAMPLON. DIRECTOR OF DEPARTMENT OF HEALTH AND SERVICES
MO: 580:0774, (8:40)	FVB本(BQ4(0): DECYMAL WEBT (-AL: LEVELH-MADA SEEM DA