



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

Complete this are to						
Send copy to Departing	n duplicate at the tim лепt of Health and Se	e of the regular monthly enior Services; retain ori	/ preventative ma ginal in departme	aintenance check, a ent file	and whenever instrument is repaire	
ALCO SENSOR IV SN 108388		NAME OF AGENCY	unty Police D		DATE OF INSPECTION 09/11/2020	
LOCATION OF INSTRUMENT 5030 Griffin Rd	NT (STREET AND CITY)	·		opartment	TIME OF INSPECTION	
			isfactory or if one	rating within actablic	09:10 shed limits. (Write in observed value	
where determined.) Ur	nmarked items must t	pe corrected before using	ig instrument.		oned minis. (varite in observed value	
✓ DIGITAL READO	UT (ALL ELEMENTS	OPERATIONAL)				
TEMPERATURE	OF ALCO SENSOR (10°C - 40°C)				
PRINTER WORK	ING PROPERLY			·		
TIME AND DATE	DISPLAYING PROPE	ERLY				
BREATH ALCOHOL A	ACCURACY STANDA	ARDS				
SIMULATOR SOL	.UTION		COMPRE	SSED ETHANOL-	CAC MIVILIDE	
		ro				
	PLIER Intoximeter			5503 EXP. DAT		
SIMULATOR TEM	IPERATURE (34°C ±	0.2°C) S	IM. SN	SIM.	NIST EXP DATE	
<u>⊔</u> 0.080% STAN	IDARD - MUST READ	D BETWEEN 0.095% ar D BETWEEN 0.076% ar D BETWEEN 0.038% ar	nd 0.084% INCLU	ISIVE		
TEST 1 • 0.099		TEST 2 → 0.099		TEST 3 - (TEST 3 → 0.098	
RFI DETECTOR O	PERATING					
INDICATE THE NUMB	ER OF BREATH TES	STS IN THE FOLLOWIN	IG RANGES SIN	ICE THE LAST MA	INTENANCE REPORT:	
(DO NOT INCLUDE SE	ELF-ADMINISTERED	TESTS)	1			
REFUSALS	(004)	(.0509)	(.1014)	(.1519)	(OVER .19)	
List any new parts and	describe any alterati	on or modification that	was made to res	tore the instrument	to operate satisfactorily and within	
established limits (use o	other side if necessar	у).			, ,,	
· · · · · · · · · · · · · · · · · · ·						
				<u> </u>		
		<u> </u>				
NSPECTING OFFICER						
SIGNATURE		•		PRINT NAME		
P.O. M.	mal 4427			Min NAME M	ike Maloney	
YPE II PERMIT NUMBER/EXPIRA	29006	3 / 03-08-20	21	TELEPHONE NUMBE (636) 529-8	R	
Return completed repo		cohol Program, MO De	partment of Healt	·	ces, Southeast District Office	
) 580-1351 (5-10)	by mall, i	ax, or email.				

TEST RECORD 00599

Jens Date Time 2101

Air Blanks

99/11/20 09:11

Calibration Chill

9 09/11/20

Fubject

Tcot # 1

N/A

Maloney HH27

15030 Gniffin

Airgas.

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: 8-Jun-2020

Lot # AG015503 Model 108cacd

Exp. Date 3-Jun-2022

Cyl. Type 108

Component

Ethanol Nitrogen **Certified Concentration**

0.100 ± 2% BrAC (272 ppm)

Balance

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

RGM Serial No. EB0010581

EB0010570

Concentration

259.8 ppm

EB0010285 EB0010561 103.6 ppm

EB0010681

CRM Serial No.

CC434668 CC234503

392.1 ppm

208.0 ppm

52.12 ppm

Concentration

800.0 ppm 253.0 ppm RGM Serial No.

EB0010603 EB0010559

EB0010595

EB0010562 EB0010579 393.0 ppm

258,2 ppm 208.3 ppm 104.2 ppm

Concentration

52.81 ppm

CRM Serial No. 0056649

0056662

Concentration 390.1 ppm

150,2 ppm

Analytical Method:

NDIR

Digitally signed by Quality Control Date: 2020.06.10 14:11:39 -05:00 Reason: Dry gas standard certification of analysis Location: Airgas USA LLC (Lab)

Approved for Release:

ISO 17025:2005 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

MICHAEL P MALONEY

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 sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE3/8/2019	usus
	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 290063	
EXPIRES 3/8/2021	for William
	DIRECTOR OF DEPARTMENT OF HEALTH AND SERVICES
MQ 580-0771 (6-10)	LAB-4 (Fig-10)