



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

REPORT #7

RECEIVED
 By Carol Day at 3:01 pm, Jan 16, 2014

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

| | | |
|---|----------------------------|----------------------------------|
| ALCO SENSOR IV SN 21574 | PRINTER SN 097.3584.032 | DATE OF INSPECTION 01/03/2014 |
| LOCATION OF INSTRUMENT (STREET AND CITY) Midland Empire Alcholo Task Force Breath Alcohol Test Truck | | TIME OF INSPECTION 10:27 am |

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 # AG228503 EXP. DATE 10/11/2014

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 .098

TEST 2 .101

TEST 3 .101

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 | 0 | (0-.04) | 2 | (.05-.09) | 0 | (.10-.14) | 0 | (.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 all limits set forth by the Missouri Department of Health. 0.100 Dry Gas Standard, Lot #AG228503 Tank 22

INSPECTING OFFICER

| | |
|----------------|-----------------------------------|
| SIGNATURE: | PRINT NAME Larry R. Stobbs Jr. |
|----------------|-----------------------------------|

| | |
|--|------------------------------------|
| TYPE II PERMIT NUMBER/EXPIRATION DATE 230311 12/11/2015 | TELEPHONE NUMBER (816) 236-1474 |
|--|------------------------------------|

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: 021574
Version no: 7409

TEST RECORD 01423^{s/}
Temp Date Time 210L

Air Blank:
01/03/14 10:27 .000
Calibration Check:
22 01/03/14 10:27 .098

Subject Name

Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 021574
Version no: 7409

TEST RECORD 01422^{s/}
Temp Date Time 210L

Air Blank:
01/03/14 10:30 .000
Calibration Check:
24 01/03/14 10:30 .101

Subject Name

Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 021574
Version no: 7409

TEST RECORD 01421^{s/}
Temp Date Time 210L

Air Blank:
01/03/14 10:28 .000
Calibration Check:
23 01/03/14 10:28 .101

Subject Name

Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 021574
Version no: 7409

TEST RECORD 01420^{s/}
Temp Date Time 210L

Air Blank:
01/03/14 10:27 .000
Calibration Check:
22 01/03/14 10:27 .098

Subject Name

Subject I.D.

Operator Name, I.D.

Location



STATE OF MISSOURI
 DEPARTMENT OF HEALTH AND SENIOR SERVICES
 BREATH ALCOHOL PROGRAM

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**PERMIT
 TYPE II**

LARRY R STOBBS JR

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, DATAMASTER

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 12/11/2013

NUMBER 230311

EXPIRES 12/11/2015

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

,acting director

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 680-0771 (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 STOBBS JR, LARRY
 Permit No 230311
 Date Issued 12/11/2013 Date Expires 12/11/2015