

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

RECEIVED

By Carol Day at 1:33 pm, Jul 28, 2014

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 094802	PRINTER SN 097.3584.333	DATE OF INSPECTION 07/20/2014
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LOCATION OF INSTRUMENT (STREET AND CITY) 300 NORTH NEW BALLAS ROAD, CREVE COEUR	TIME OF INSPECTION 11:12 pm
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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 REPCO MARKETING INC. LOT # 13001 EXP. DATE 03/07/2015

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34 SIMULATOR SN SD2784 SIMULATOR EXP DATE 07/15/2015

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  .101%

TEST 2  .100%

TEST 3  .100%

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	8	(0-.04)	1	(.05-.09)	2	(.10-.14)	6	(.15-.19)	5	(OVER .19)	3
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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).

INSPECTING OFFICER

SIGNATURE <i>PO Michael Vaclavik 692</i>	PRINT NAME Michael Vaclavik 692
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TYPE II PERMIT NUMBER/EXPIRATION DATE 220194 08/13/2014	TELEPHONE NUMBER (314) 872-0946
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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

**CERTIFICATE OF ANALYSIS**

**MANUFACTURER AND SUPPLIER: RepCo Marketing, Inc.**

**LOT NUMBER: 13001**

**EXPIRATION DATE: March 7, 2015 at 11:59 p.m.**

RepCo Marketing, Inc. certifies the following:

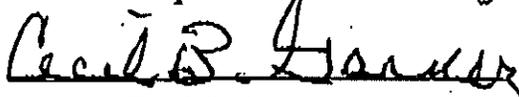
RepCo Marketing, Inc. manufactured, tested and supplied Lot Number 13001 of Alcohol Certified Solution for simulators. Random samples of said lot number were analyzed by an independent laboratory utilizing a gas chromatograph and found to contain .1215 gms/dl +/- .003 gms/dl wt/vol ethanol (95% Confidence).

The alcohol and distilled water used in the solution were found to be free of any interfering substance.

This solution will produce a vapor alcohol value of .100 +/- 3% gms/210L Breath when heated to 34 Degrees Celsius +/- 0.2 Degrees Celsius in a simulator (95% Confidence).

The date of manufacture for this lot number is March 8, 2013  
The expiration date for this lot number is March 7, 2015 at  
11:59 p.m.

This document is a true representation of the original Certificate of Analysis.



Cecil B. Garner, President  
RepCo Marketing, Inc.

AS IV Serial no: 094802  
Version no: 532B

TEST RECORD 00374 s/  
Temp Date Time 210L

WDIR: RTI  
12 07/20/14 23:13  
Subject Name

Subject I.D.

Operator Name, I.D.

PO MACLANK 692  
Location

CCPD BARKING

AS IV Serial no: 094802  
Version no: 532B

TEST RECORD 00375

Temp Date Time 210L  
Air Blank: s/  
07/20/14 23:15 .000

Calibration Check:  
25 07/20/14 23:15 .100  
Subject Name

Subject I.D.

Operator Name, I.D.

PO MACLANK 692  
Location

CCPD BARKING

AS IV Serial no: 094802  
Version no: 532B

TEST RECORD 00373 s/  
Temp Date Time 210L

Air Blank:  
07/20/14 23:12 .000  
Calibration Check:  
24 07/20/14 23:12 .101

Subject Name

Subject I.D.

Operator Name, I.D.

PO MACLANK 692  
Location

CCPD BARKING

AS IV Serial no: 094802  
Version no: 532B

TEST RECORD 00376 s/  
Temp Date Time 210L

Air Blank:  
07/20/14 23:18 .000  
Calibration Check:  
25 07/20/14 23:18 .100

Subject Name

Subject I.D.

Operator Name, I.D.

PO MACLANK 692  
Location

CCPD BARKING

State of Missouri  
DEPARTMENT OF HEALTH



P E R M I T  
TYPE II



MICHAEL J VACLAVIK

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field repairs, and operate the following breath analyzer(s):

**INTOXILYZER 5000; ALCO-SENSOR IV W/PRINTER**

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

Date 08/13/2012

Number 220194

Expires 08/13/2014

MO 560-0771 (7-88)

Director of State Public Health Laboratory

Director, Department of Health

Lab. 4 (A7-88)