



ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7  
**REVIEWED**  
By Carol Day at 3:51 pm, Mar 20, 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 <b>097442</b>	PRINTER SN <b>096.3580.954</b>	DATE OF INSPECTION <b>2/27/2014</b>
LOCATION OF INSTRUMENT (STREET AND CITY) <b>TANEY COUNTY ZONE OFFICE BRANSON</b>		TIME OF INSPECTION <b>11:02</b>

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** LOT # **13001** EXP. DATE **3/7/2015**

SIMULATOR TEMPERATURE (34°C ± 0.2°C) **34°** SIMULATOR SN **F26168** 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 • <b>.099</b>	TEST 2 • <b>099</b>	TEST 3 • <b>.099</b>
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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 <b>0</b>	(0-.04) <b>0</b>	(.05-.09) <b>0</b>	(.10-.14) <b>0</b>	(.15-.19) <b>0</b>	(OVER .19) <b>0</b>
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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).

<b>INSPECTING OFFICER</b>	
SIGNATURE: <b>W. Hadlock</b>	PRINT NAME: <b>JA. HADLOCK</b>
TYPE II PERMIT NUMBER-EXPIRATION DATE: <b>230201 09/19/2015</b>	TELEPHONE NUMBER: <b>417.895.6868</b>

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:

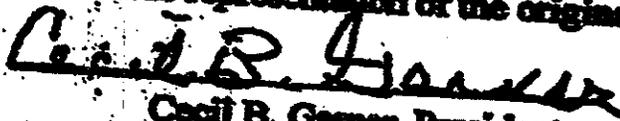
RepCo Marketing, Inc. manufactured, tested and supplied Lot Number 13001 of Alcohol Certified Solution for simulators. Random samples of said lot number were analyzed by an independent laboratory utilizing a gas chromatograph and found to contain .1215 gms/dl +/- .003 gms/dl wt/vol ethanol (95% Confidence).

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: 097442  
Version no: 004C

TEST RECORD 00144

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

Air Blank:  
02/27/14 11:02 .000  
Calibration Check:  
17 02/27/14 11:02 .099

Subject Name

Subject I.D.

Operator Name, I.D.

*T. H. H. H. H.*

Location

ZONE OFFICE

AS IV Serial no: 097442  
Version no: 004C

TEST RECORD 00146

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

Air Blank:  
02/27/14 11:05 .000  
Calibration Check:  
18 02/27/14 11:05 .099

Subject Name

Subject I.D.

Operator Name, I.D.

*T. H. H. H. H.*

Location

ZONE OFFICE

AS IV Serial no: 097442  
Version no: 004C

TEST RECORD 00145

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

Air Blank:  
02/27/14 11:04 .000  
Calibration Check:  
17 02/27/14 11:04 .099

Subject Name

Subject I.D.

Operator Name, I.D.

*T. H. H. H. H.*

Location

ZONE OFFICE

AS IV Serial no: 097442  
Version no: 004C

TEST RECORD 00147

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

Void: RFI  
12 02/27/14 11:06

Subject Name

Subject I.D.

Operator Name, I.D.

*T. H. H. H. H.*

Location

ZONE OFFICE



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

**PERMIT  
TYPE II**

**TODD A HADLOCK**

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

**ALCO-SENSOR IV WITH PRINTER, DATAMAST**

for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE 9/19/2013  
NUMBER 230201  
EXPIRES 9/19/2015

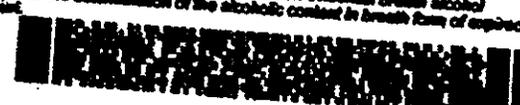
MO 680-0771 (6-10)

  
DIRECTOR OF STATE PUBLIC HEALTH LABORATORY  
**Garl Vosterly**  
acting director  
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

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 from of expired air in Missouri.



Operator **HADLOCK, TODD**  
Permit No **230201**  
Date Issued **9/19/2013** Date Expires **9/19/2015**