



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

received 1/21/14-cd  
 REPORT #7

**REVIEWED**  
 By Carol Day at 9:30 am, Feb 06, 2014  
 instrument is repaired.

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 10461	PRINTER SN 0963680931	DATE OF INSPECTION 01/13/2014
LOCATION OF INSTRUMENT (STREET AND CITY) 100 N Main, O'Fallon		TIME OF INSPECTION 12:50 pm

**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 # 12002 EXP. DATE 08/29/2014

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34 SIMULATOR SN SD3500 SIMULATOR EXP DATE 11/21/2014

- 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 → .099      TEST 2 → .099      TEST 3 → .099

- 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)	0	(.05-.09)	2	(.10-.14)	1	(.15-.19)	2	(OVER .19)	1
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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 ▶	PRINT NAME Robert Schrum
TYPE II PERMIT NUMBER/EXPIRATION DATE 230297      11/26/2015	TELEPHONE NUMBER (636) 240-3200

**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: 12002  
EXPIRATION DATE: August 29, 2014 at 11:59 p.m.

RepCo Marketing, Inc. certifies the following:

RepCo Marketing, Inc. manufactured, tested and supplied Lot Number 12002 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 1209 gms/dl +/- 0.03 gms/dl w/ 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/2100L 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 August 30, 2012  
the expiration date for this lot number is August 29, 2014 at 11:59 p.m.

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

Cecil B. Garner  
Cecil B. Garner, President  
RepCo Marketing, Inc.

AS IV Serial no: 104641  
Version no: 004C

TEST RECORD 00497 s/

Temp Date Time 210L

Air Blank: 01/13/14 13:34 .000

Calibration Check: 27 01/13/14 13:34 .009

Subject Name TEST 3

Subject I.D. [Signature] 34

Operator Name, I.D. Station

Location

AS IV Serial no: 104641  
Version no: 004C

TEST RECORD 00496 s/

Temp Date Time 210L

Air Blank: 01/13/14 13:32 .000

Calibration Check: 26 01/13/14 13:32 .009

Subject Name TEST 2

Subject I.D. [Signature] 34

Operator Name, I.D. Station

Location

AS IV Serial no: 104641  
Version no: 004C

TEST RECORD 00495 s/

Temp Date Time 210L

Air Blank: 01/13/14 13:31 .000

Calibration Check: 25 01/13/14 13:31 .009

Subject Name TEST 1

Subject I.D. [Signature] 34

Operator Name, I.D. Station

Location

AS IV Serial no: 104641  
Version no: 004C

TEST RECORD 00498 s/

Temp Date Time 210L

Void: NFI 12 01/13/14 13:35

Subject Name [Signature]

Subject I.D. [Signature] 34

Operator Name, I.D. Station

Location



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

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**PERMIT**  
**TYPE II**  
**ROBERT SCHRUM**

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

**DATAMASTER, INTOX EC/IR II, ALCO-SENSOR IV W/PRINTER**

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 11/26/2013

NUMBER 230297

EXPIRES 11/26/2015

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

,acting director

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

LAB-4 (16-10)



**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 **SCHRUM, ROBERT**  
 Permit No **230297**  
 Date issued **11/26/2013** Date Expires **11/26/2015**