



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

**RECEIVED**  
 By Carol Day at 9:50 am, Jun 18, 2014  
 REPORT #7

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 105447	PRINTER SN 099.3586.790	DATE OF INSPECTION 06/10/2014
LOCATION OF INSTRUMENT (STREET AND CITY) 231 S. Main Carthage, Mo		TIME OF INSPECTION 10:00 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 Repco LOT # 13002 EXP. DATE 06/19/2015
- SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIMULATOR SN SD3152 SIMULATOR EXP DATE 05/01/2015

- 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  .098	TEST 2  .098	TEST 3  .098
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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	0	(0-.04)	0	(.05-.09)	0	(.10-.14)	1	(.15-.19)	0	(OVER .19)	0
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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).  
 operating within DOHSS Standards

**INSPECTING OFFICER**

SIGNATURE 	PRINT NAME John Hicks
TYPE II PERMIT NUMBER/EXPIRATION DATE 230162 08-14-2015	TELEPHONE NUMBER (417) 358-8177

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: 13002

EXPIRATION DATE: June 19, 2015 at 11:59 p.m.

RepCo Marketing, Inc. certifies the following:

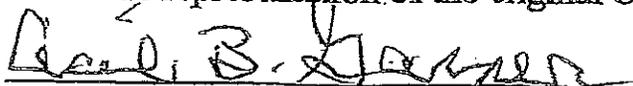
RepCo Marketing, Inc. manufactured, tested and supplied Lot Number 13002 of Alcohol Certified Solution for simulators. Random samples of said lot number were analyzed by an independent laboratory utilizing a gas chromatograph and found to contain .1217 gms/dl +/- .003 gms/dl wt/vol ethanol (95% Confidence).

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 June 20, 2013  
The expiration date for this lot number is June 19, 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 IU Serial no: 185447  
Version no: 532B

TEST RECORD 00302

Temp	Date	Time	s/
		210L	
Air Blank:			
	06/10/14	10:00	.000
Calibration Check:			
	25	06/10/14	10:00 .098

Subject Name

Acc Check

Subject I.D.

John Hicks

Operator Name, I.D.

230162 08/14/2015

Location

2315 Main

CALTAG MD

AS IU Serial no: 185447  
Version no: 532B

TEST RECORD 00303

Temp	Date	Time	s/
		210L	
Air Blank:			
	06/10/14	10:02	.000
Calibration Check:			
	25	06/10/14	10:02 .098

Subject Name

Acc Check

Subject I.D.

John Hicks

Operator Name, I.D.

230162 08/14/2015

Location

2315 Main

CALTAG MD

AS IU Serial no: 185447  
Version no: 532B

TEST RECORD 00304

Temp	Date	Time	s/
		210L	
Air Blank:			
	06/10/14	10:04	.000
Calibration Check:			
	27	06/10/14	10:04 .098

Subject Name

Acc Check

Subject I.D.

John Hicks

Operator Name, I.D.

230162 08/14/2015

Location

2315 Main

CALTAG MD

AS IU Serial no: 185447  
Version no: 532B

TEST RECORD 00305

Temp	Date	Time	s/
		210L	
UOID: RFI			
	12	06/10/14	10:05

Subject Name

REF TAG

Subject I.D.

John Hicks

Operator Name, I.D.

230162 08/14/2015

Location

2315 Main

CALTAG MD



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

2

**PERMIT**  
**TYPE II**  
**JOHN B HICKS**

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, INTOXILYZER 8000, ALCO-SENSOR IV  
 W/PRINTER**

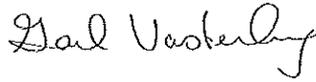
for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE 8/14/2013

NUMBER 230162

EXPIRES 8/14/2015

  
 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 HICKS, JOHN  
 Permit No 230162  
 Date Issued 8/14/2013 Date Expires 8/14/2015