



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

RECEIVED

REPORT #7

By Carol Day at 12:42 pm, Nov 17, 2015

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 NIXA 107987	PRINTER SN NIXA 099.3586.819	DATE OF INSPECTION 11/14/2015
LOCATION OF INSTRUMENT (STREET AND CITY) 715 W. CENTER CIRCLE, NIXA		TIME OF INSPECTION 3:45 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 MARKETING LOT # 14001 EXP. DATE 04/30/2016

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIMULATOR SN SD2731 SIMULATOR EXP DATE 08/12/2016

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 .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)	0	(.05-.09)	2	(.10-.14)	3	(.15-.19)	1	(OVER .19)	3
----------	---	---------	---	-----------	---	-----------	---	-----------	---	------------	---

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).

ADJUSTED TIME FOR DAYLIGHT SAVINGS.

INSTRUMENT MEETS OR EXCEEDS DOHSS GUIDELINES

INSPECTING OFFICER

SIGNATURE

PRINT NAME
 DARREN WHISNANT

TYPE II PERMIT NUMBER/EXPIRATION DATE
 250195

TELEPHONE NUMBER
 (417) 725-2510

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: 14001
EXPIRATION DATE: April 30, 2016 at 11:59 p.m.

RepCo Marketing, Inc. certifies the following:

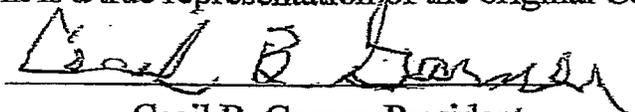
RepCo Marketing, Inc. manufactured, tested and supplied Lot Number 14001 of Alcohol Certified Solution for simulators. Random samples of said lot number were analyzed by an independent laboratory utilizing a gas chromatograph and found to contain .1216 gms/dl +/- .003 gms/dl wt/vol ethanol (95% Confidence).

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 May 1, 2014
The expiration date for this lot number is April 30, 2016 at
11:59 p.m.

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



Cecil B. Garner, President
RepCo Marketing, Inc.



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



**PERMIT
 TYPE II**

DARREN WHISNANT

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

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 8/18/2015

NUMBER 250195

EXPIRES 8/18/2017

MO 580:0771 (8-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (B6-10)



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 WHISNANT, DARREN
 Permit No 250195
 Date Issued 8/18/2015 Date Expires 8/18/2017

Nixa Police Department

Blank (Zero) test Evidence slip

AS IV Serial no: 107987
Version no: 532B

TEST RECORD 00091

Temp Date Time ^{a/} 210L

Air Blank:

11/14/15 16:03 .000

Subject Test: Auto

26 11/14/15 16:03 .000

Subject Name

Subject I.D.

J. Whisman 421

Operator Name: I.D.

Nixa P.D.

Location

Nixa Police Department

Calibration Check slip's

AS IV Serial no: 107987
Version no: 532B

TEST RECORD 00088

Temp	Date	Time	s/ 210L
------	------	------	------------

Air Blank:	11/14/15	15:58	.000
Calibration Check:	25 11/14/15	15:58	.101

Subject Name

Subject I.D.

P. Whisman 421
Operator Name, I.D.

NIXA P.D.
Location

AS IV Serial no: 107987
Version no: 532B

TEST RECORD 00090

Temp	Date	Time	s/ 210L
------	------	------	------------

Air Blank:	11/14/15	16:02	.000
Calibration Check:	26 11/14/15	16:02	.101

Subject Name

Subject I.D.

P. Whisman 421
Operator Name, I.D.

NIXA P.D.
Location

AS IV Serial no: 107987
Version no: 532B

TEST RECORD 00089

Temp	Date	Time	s/ 210L
------	------	------	------------

Air Blank:	11/14/15	16:00	.000
Calibration Check:	25 11/14/15	16:00	.100

Subject Name

Subject I.D.

P. Whisman 421
Operator Name, I.D.

NIXA P.D.
Location

Nixa Police Department

RFI Evidence slip

AS IV Serial no: 107987
Version no: 532B

TEST RECORD 00092

Temp Date Time 210L

VOID: RFI
12 11/14/15 16:06

Subject Name

Subject I.D.

D. Williams 421

Operator Name, I.D.

NIXA P.D.

Location