



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

RECEIVED
By Carol Day at 12:55 pm, Dec 22, 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.

ALCO SENSOR IV SN 108267	PRINTER SN 099.3563.020	DATE OF INSPECTION 12/16/2015
LOCATION OF INSTRUMENT (STREET AND CITY) Troop A, 504 SE Blue Parkway, Lee's Summit, MO		TIME OF INSPECTION 12:19 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

<input checked="" type="checkbox"/> SIMULATOR SOLUTION	<input type="checkbox"/> COMPRESSED ETHANOL-GAS MIXTURE
<input checked="" type="checkbox"/> STANDARD SUPPLIER <u>RepCo Marketing, Inc.</u>	LOT # <u>14001</u> EXP. DATE <u>04/30/2016</u>
<input checked="" type="checkbox"/> SIMULATOR TEMPERATURE (34°C ± 0.2°C) <u>33.9</u>	SIMULATOR SN <u>MP2203</u> SIMULATOR EXP DATE <u>07/21/2016</u>

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 ➔ .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)	0	(.10-.14)	0	(.15-.19)	0	(OVER .19)	0
----------	---	---------	---	-----------	---	-----------	---	-----------	---	------------	---

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>SGT. Neil K. Johnson #1112</i>	PRINT NAME Neil K. Johnson #1112
TYPE II PERMIT NUMBER/EXPIRATION DATE 250173 / 7/28/2017	TELEPHONE NUMBER (816) 200-9350

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

AS IV Serial no: 108267
Version no: 532B

TEST RECORD 00024

Temp Date Time ^{s/} 210L

Air Blank:
12/16/15 12:19 .000
Subject Test: Auto
21 12/16/15 12:19 .000

Subject Name

SELF

Subject I.D.

Operator Name, I.D.

NEIL K. JOHNSON #1112

Location

TROOP A

LEE'S SUMMIT, MA.

AS IV Serial no: 108267
Version no: 532B

TEST RECORD 00025

Temp Date Time ^{s/} 210L

Air Blank:
12/16/15 12:21 .000
Calibration Check:
22 12/16/15 12:21 .101

Subject Name

MAINT

Subject I.D.

Operator Name, I.D.

NEIL K. JOHNSON #1112

Location

TROOP A

LEE'S SUMMIT, MA.

AS IV Serial no: 108267
Version no: 532B

TEST RECORD 00026

Temp Date Time ^{s/} 210L

Air Blank:
12/16/15 12:25 .000
Calibration Check:
23 12/16/15 12:25 .099

Subject Name

MAINT

Subject I.D.

Operator Name, I.D.

NEIL K. JOHNSON #1112

Location

TROOP A

LEE'S SUMMIT, MA

AS IV Serial no: 108267
Version no: 532B

TEST RECORD 00027

Temp Date Time ^{s/} 210L

Air Blank:
12/16/15 12:28 .000
Calibration Check:
23 12/16/15 12:28 .099

Subject Name

MAINT

Subject I.D.

Operator Name, I.D.

NEIL K. JOHNSON #1112

Location

TROOP A

LEE'S SUMMIT, MA.

AS IV Serial no: 108267
Version no: 532B

TEST RECORD 00028

Temp Date Time ^{s/} 210L

VOID: RFI
12 12/16/15 12:29

Subject Name

MAINT

Subject I.D.

Operator Name, I.D.

NEIL K. JOHNSON #1112

Location

TROOP A

LEE'S SUMMIT, MA



Missouri Department of Health and Senior Services
 P.O. Box 570, Jefferson City, MO 65102-0570 Phone: 573-751-6400 FAX: 573-751-6010
 RELAY MISSOURI for Hearing and Speech Impaired 1-800-735-2966 VOICE 1-800-735-2466
 Gail Vasterling
 Director



Jeremiah W. (Jay) Nixon
 Governor

Missouri Department of Health and Senior Services Breath Alcohol Program

SIMULATOR CALIBRATION REPORT

This is to certify that the simulator listed below has been examined and tested using standards traceable to the National Institute of Standards and Technology (NIST) in accordance to the standards set by the Rules of Missouri Department of Health and Senior Services, 19 CSR 25-30.

SIMULATOR INFORMATION

Agency: Missouri State Highway Patrol
 Serial Number: MP2203
 Manufacturer: Guth
 Model Number: 12V500

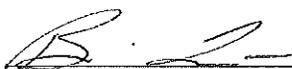
CALIBRATION RESULTS

<u>Reference</u>	<u>Simulator</u>
<u>Temperature</u>	<u>Temperature</u>
34.00	33.98

This calibration was performed with
 NIST-Traceable Thermometer SN: 093752

This simulator was tested by: DRL

This testing was performed: 07/21/2015

Signature of certifying DHSS Scientist: 

Name of certifying DHSS Scientist: Brian M. Lutmer



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



**PERMIT
TYPE II**

NEIL K JOHNSON

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 DMT, 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 7/28/2015

NUMBER 250173

EXPIRES 7/28/2017

MO 580.071 (6-10)

W. S. ...

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Paul Vandenby

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (06-10)

REPCO MARKETING INC.

3101 188 STONEYBROOK DRIVE
HALESKA, N.C. 27004
919-576-5480

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 +/-0.003 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

Cecil B. Garner, President
RepCo Marketing, Inc.