



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

**RECEIVED**

By Carol Day at 2:04 pm, Aug 25, 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 145446	PRINTER SN 03A2436040	DATE OF INSPECTION 08/18/2015
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LOCATION OF INSTRUMENT (STREET AND CITY) MSHP Zone 4 Office, Branson, MO	TIME OF INSPECTION 6:00 pm
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**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 # 14001 EXP. DATE 04/30/2016

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34 SIMULATOR SN MP2423 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  .104	TEST 2  .104	TEST 3  .104
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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-.04)	(.05-.09)	(.10-.14)	(.15-.19)	(OVER .19)
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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 T.A. Hadlock
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TYPE II PERMIT NUMBER/EXPIRATION DATE 240054 03/07/2016	TELEPHONE NUMBER (417) 895-6868
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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 +/-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, President  
RepCo Marketing, Inc.



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 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 3/7/2014

NUMBER 240054

EXPIRES 3/7/2016

MO 5800771 (6-10)

*[Signature]*

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

*[Signature]*

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (RS-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 **HADLOCK, TODD**  
 Permit No **240054**  
 Date Issued **3/7/2014** Date Expires **3/7/2016**

AS IV Serial no: 097415  
Version no: 532B

TEST RECORD 00283

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

Air Blank:  
08/18/15 18:04 .000  
Calibration Check:  
27 08/18/15 18:04 .104

Subject Name

Subject I.D.

Operator Name, I.D.

T.A. HADLOCK #789

Location

ZONE 4 OFFICE

AS IV Serial no: 097415  
Version no: 532B

TEST RECORD 00282

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

Air Blank:  
08/18/15 18:02 .000  
Calibration Check:  
28 08/18/15 18:02 .104

Subject Name

Subject I.D.

Operator Name, I.D.

T.A. HADLOCK #789

Location

ZONE 4 OFFICE

AS IV Serial no: 097415  
Version no: 532B

TEST RECORD 00281

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

Air Blank:  
08/18/15 18:00 .000  
Calibration Check:  
28 08/18/15 18:00 .104

Subject Name

Subject I.D.

Operator Name, I.D.

T.A. HADLOCK #789

Location

ZONE 4 OFFICE

AS IV Serial no: 097415  
Version no: 532B

TEST RECORD 00284

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

VOID: RFI  
12 08/18/15 18:06

Subject Name

Subject I.D.

Operator Name, I.D.

T.A. HADLOCK #789

Location

ZONE 4 OFFICE