



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

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 NIXA 095961	PRINTER SN NIXA 099.3586.643	DATE OF INSPECTION 2-11-2016
LOCATION OF INSTRUMENT (STREET AND CITY) 715 W. CENTER CIRCLE, NIXA		TIME OF INSPECTION 17:00

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 INC** LOT # **15001** EXP. DATE **5-20-2017**

SIMULATOR TEMPERATURE (34°C ± 0.2°C) **34.0°C** SIMULATOR SN **SD2731** SIMULATOR EXP DATE **8-12-2016**

- 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 • **.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) **1** (.05-.09) **0** (.10-.14) **0** (.15-.19) **2** (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).

MEETS OR EXCEEDS D.O.H.S.S. GUIDELINES.

INSPECTING OFFICER

SIGNATURE <i>D. Whisnant</i>	PRINT NAME D. WHISNANT
TYPE II PERMIT NUMBER/EXPIRATION DATE 250195 8-18-2017	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

Nixa Police Department

Blank (Zero) test Evidence slip

AS IV Serial no: 095961
Version no: 532B

TEST RECORD 00972

Temp	Date	Time	9/ 210L
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Air Blank:
02/11/16 17:07 .000
Subject Test: Auto
27 02/11/16 17:07 .000

Subject Name

Subject I.D.

J. Whinnant 421

Operator Name, I.D.

Location

Nixa Police Department

RFI Evidence slip

AS IV Serial no: 095961
Version no: 532B

TEST RECORD 00973

Temp	Date	Time	^{9/} 210L

VOID: RFI
12 02/11/16 17:08

Subject Name

Subject I.D.

P. Whisna 421
Operator Name, I.D.

Location

Nixa Police Department

Calibration Check slip's

AS IV Serial no: 095961
Version no: 532B

TEST RECORD 00969

Temp	Date	Time	s/ 210L
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Air Blank:
02/11/16 17:01 .000
Calibration Check:
25 02/11/16 17:01 .099

Subject Name

Subject I.D.

P. Whinnant 421

Operator Name, I.D.

Location

AS IV Serial no: 095961
Version no: 532B

TEST RECORD 00970

Temp	Date	Time	s/ 210L
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Air Blank:
02/11/16 17:04 .000
Calibration Check:
25 02/11/16 17:04 .099

Subject Name

Subject I.D.

P. Whinnant 421

Operator Name, I.D.

Location

AS IV Serial no: 095961
Version no: 532B

TEST RECORD 00971

Temp	Date	Time	s/ 210L
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Air Blank:
02/11/16 17:05 .000
Calibration Check:
26 02/11/16 17:05 .099

Subject Name

Subject I.D.

P. Whinnant 421

Operator Name, I.D.

Location

CERTIFICATE OF ANALYSIS

MANUFACTURER AND SUPPLIER: RepCo Marketing, Inc.
LOT NUMBER: 15001
EXPIRATION DATE: May 20, 2017 at 11:59 p.m.

RepCo Marketing, Inc. certifies the following:

RepCo Marketing, Inc. manufactured, tested and supplied Lot Number 15001 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 .1206 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 21, 2015
The expiration date for this lot number is May 20, 2017 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.

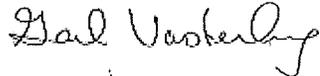
DATE 8/18/2015

NUMBER 250195

EXPIRES 8/18/2017

MO 580-0771 (6-10)


 DIRECTOR OF STATE PUBLIC HEALTH LABORATORY


 DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (116-10)



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 alcohol 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