

**RECEIVED**

By Carol Day at 8:53 am, Apr 11, 2016

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 097430	PRINTER SN 096.3580.928	DATE OF INSPECTION 04/10/2016
LOCATION OF INSTRUMENT (STREET AND CITY) 205 N Lexington St Harrisonville MO 64701		TIME OF INSPECTION 12:11 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 LOT # 15001 EXP. DATE 05/20/2017 SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34C SIMULATOR SN SD2254 SIMULATOR EXP DATE 07/15/2016 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 → 0.102

TEST 2 → 0.102

TEST 3 → 0.102

 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).

N/A

**INSPECTING OFFICER**

SIGNATURE

*Brian Kincaide 258*

PRINT NAME

Brian C. Kincaide

TYPE II PERMIT NUMBER/EXPIRATION DATE

250159 / 7-22-2017

TELEPHONE NUMBER

(816) 380-8940

**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: 097430  
Version no: 532B

TEST RECORD 00316

Temp Date Time 210L

Air Blank:  
04/10/16 12:16 .000  
Calibration Check:  
22 04/10/16 12:16 .102

Subject Name

Maintenance

Subject I.D.

Brian Kincaide #258

Operator Name, I.D.

Location

HPD

AS IV Serial no: 097430  
Version no: 532B

TEST RECORD 00317

Temp Date Time 210L

Air Blank:  
04/10/16 12:18 .000  
Calibration Check:  
23 04/10/16 12:18 .102

Subject Name

Brian Kincaide #258

Subject I.D.

Maintenance

Operator Name, I.D.

Location

HPD

AS IV Serial no: 097430  
Version no: 532B

TEST RECORD 00318

Temp Date Time 210L

Air Blank:  
04/10/16 12:19 .000  
Subject Test: Auto  
24 04/10/16 12:19 .000

Subject Name

Subject I.D.

Brian Kincaide #258

Operator Name, I.D.

HPD

Location

Sober Sample

AS IV Serial no: 097430  
Version no: 532B

TEST RECORD 00314

Temp Date Time 210L

Air Blank:  
04/10/16 12:11 .000  
Calibration Check:  
19 04/10/16 12:11 .102

Subject Name

Maintenance

Subject I.D.

Brian Kincaide #258

Operator Name, I.D.

HPD

AS IV Serial no: 097430  
Version no: 532B

TEST RECORD 00319

Temp Date Time 210L

VOID: RFI  
12 04/10/16 12:20

Subject Name

Subject I.D.

Brian Kincaide #258

Operator Name, I.D.

HPD

Location



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

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**PERMIT**  
**TYPE II**  
**BRIAN KINCAIDE**

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, INTOX EC/IR II**

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 7/22/2015

NUMBER 250159

EXPIRES 7/22/2017

MO 580-0771 (6-10)

  
 DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

  
 DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (P6-10)



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 KINCAIDE, BRIAN  
 Permit No 250159  
 Date Issued 7/22/2015 Date Expires 7/22/2017

**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 +/-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 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.