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By Carol Day at 3:56 pm, Aug 01, 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 | PRINTER SN | DATE OF INSPECTION |
|---|---|---|
| 107979 | 099.3586.793 | 07/25/2016 |

| LOCATION OF INSTRUMENT (STREET AND CITY) | TIME OF INSPECTION |
|---|---|
| 2920 N. Shamrock, Jefferson City | 3:30 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 # 15001 EXP. DATE 05/20/2017
- ☑ SIMULATOR TEMPERATURE (34°C ± 0.2°C) 33.99 SIMULATOR SN MP2316 SIMULATOR EXP DATE 03/15/2017
- ☑ 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 ☛ .100 | 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-.04) | (.05-.09) | (.10-.14) | (.15-.19) | (OVER .19) |
|---|---|---|---|---|---|
| 0 | 0 | 0 | 0 | 0 | 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).

Instrument calibrated and maintenance tests performed.

**INSPECTING OFFICER**

| SIGNATURE ▸ | PRINT NAME |
|---|---|
| | Jimmy L. Cleveland |
| TYPE II PERMIT NUMBER/EXPIRATION DATE<br>250155 / 072217 | TELEPHONE NUMBER<br>(573) 526-6193 |

**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



AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER
services provided on a nondiscriminatory basis

AS IV Serial no: 107979
Version no: 532B

TEST RECORD 00385

| Temp | Date | Time | g/ 210L |
|---|---|---|---|
| Air Blank: | | | |
| | 07/25/16 | 15:39 | .000 |
| Calibration: | | | |
| 23 | 07/25/16 | 15:39 | .100 |

Subject Name
Calibration
Subject I.D.

Operator Name, I.D.
Jimmy L. Cleveland
Location
2920 N. Shamrock
Jefferson City

AS IV Serial no: 107979
Version no: 532B

TEST RECORD 00386

| Temp | Date | Time | g/ 210L |
|---|---|---|---|
| VOID: RFI | | | |
| 12 | 07/25/16 | 15:44 | |

Subject Name
RFI TEST
Subject I.D.

Operator Name, I.D.
Jimmy L. Cleveland
Location
2920 N. Shamrock
Jefferson City

AS IV Serial no: 107979
Version no: 532B

TEST RECORD 00387

| Temp | Date | Time | g/ 210L |
|---|---|---|---|
| Air Blank: | | | |
| | 07/25/16 | 15:46 | .000 |
| Calibration Check: | | | |
| 24 | 07/25/16 | 15:46 | .100 |

Subject Name
MAINT #1
Subject I.D.

Operator Name, I.D.
Jimmy L. Cleveland
Location
2920 N. Shamrock
Jefferson City

AS IV Serial no: 107979
Version no: 532B

TEST RECORD 00388

| Temp | Date | Time | g/ 210L |
|---|---|---|---|
| Air Blank: | | | |
| | 07/25/16 | 15:48 | .000 |
| Calibration Check: | | | |
| 24 | 07/25/16 | 15:48 | .099 |

Subject Name
MAINT #2
Subject I.D.

Operator Name, I.D.
Jimmy L. Cleveland
Location
2920 N. Shamrock
Jefferson City

AS IV Serial no: 107979
Version no: 532B

TEST RECORD 00389

| Temp | Date | Time | g/ 210L |
|---|---|---|---|
| Air Blank: | | | |
| | 07/25/16 | 15:50 | .000 |
| Calibration Check: | | | |
| 24 | 07/25/16 | 15:50 | .099 |

Subject Name
MAINT #3
Subject I.D.

Operator Name, I.D.
Jimmy L. Cleveland
Location
2920 N. Shamrock
Jefferson City

*REPCO MARKETING INC.*

3101-188 STONYBROOK DRIVE
RALEIGH, N.C. 27604
919-876-5480

# 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 interferring 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.

Form RM 02

# STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES

BREATH ALCOHOL PROGRAM

2

# PERMIT

## TYPE II

# JIMMY L CLEVELAND

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 DMT

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 250155

EXPIRES 7/22/2017

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

LAB-4 (R6-10)

**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** CLEVELAND, JIMMY
**Permit No** 250155
**Date Issued** 7/22/2015 **Date Expires** 7/22/2017