



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

RECEIVED
 By Carol Day at 8:58 am, Jul 11, 2016

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 107980	PRINTER SN 099.3586.795	DATE OF INSPECTION 07/07/2016
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LOCATION OF INSTRUMENT (STREET AND CITY) 1200 South Holden Street Warrensburg (Franklin County Sheriff's Office)	TIME OF INSPECTION 1:33 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 Intoximeters LOT # AG602301 EXP. DATE 01/23/2018

SIMULATOR TEMPERATURE (34°C ± 0.2°C) SIMULATOR SN 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 → 0.099

TEST 2 → 0.099

TEST 3 → 0.099

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
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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).

Replaced capacitor and calibrated.

INSPECTING OFFICER

SIGNATURE

PRINT NAME
Dan Lucas

TYPE II PERMIT NUMBER/EXPIRATION DATE
250138 06/15/2017

TELEPHONE NUMBER
(660) 543-4573

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: 107980
Version no: 532B

TEST RECORD 00188

Temp Date Time 210L

Air Blank:
07/07/16 13:33 .000
Calibration Check:
25 07/07/16 13:33 .099

Subject Name

Test #1

Subject I.D.
#1

Operator Name, I.D.

DAN LUCAS 250138

Location EXP 06/15/2017

1200 South Holden Street

Warrensburg MO 64093

AS IV Serial no: 107980
Version no: 532B

TEST RECORD 00189

Temp Date Time 210L

Air Blank:
07/07/16 13:35 .000
Calibration Check:
25 07/07/16 13:35 .099

Subject Name

Test

Subject I.D.
#2

Operator Name, I.D.

DAN LUCAS 250138

Location EXP 06/15/2017

1200 South Holden Street

Warrensburg MO 64093

AS IV Serial no: 107980
Version no: 532B

TEST RECORD 00190

Temp Date Time 210L

Air Blank:
07/07/16 13:37 .000
Calibration Check:
26 07/07/16 13:37 .099

Subject Name

Test

Subject I.D.
#3

Operator Name, I.D.

DAN LUCAS 250138

Location EXP 06/15/2017

1200 South Holden Street

Warrensburg MO 64093

RFI

AS IV Serial no: 107980
Version no: 532B

TEST RECORD 00191

Temp Date Time 210L

VOID: RFI
12 07/07/16 13:39

Subject Name

Test

Subject I.D.
RFI

Operator Name, I.D.

DAN LUCAS 250138

Location EXP 06/15/2017

1200 South Holden Street

Warrensburg MO 64093

AS IV Serial no: 107980
Version no: 532B

TEST RECORD 00192

Temp Date Time 210L

Air Blank:
07/07/16 13:41 .000
Subject Test: Auto
26 07/07/16 13:41 .000

Subject Name

Blank Test

Subject I.D.

Operator Name, I.D.

DAN LUCAS 250138

Location EXP 06/15/2017

1200 South Holden Street

Warrensburg MO 64093



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

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PERMIT
TYPE II
DAN R LUCAS

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, INTOX 8000, INTOX EC/IR II, ASIV 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 6/15/2015

NUMBER 250138

EXPIRES 6/15/2017

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES