



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

**RECEIVED**  
 By Carol Day at 2:41 pm, Sep 07, 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<br><b>108272</b>  | PRINTER SN<br><b>099.3586.807</b> | DATE OF INSPECTION<br><b>9-6-16</b>  |
| LOCATION OF INSTRUMENT (STREET AND CITY)<br><b>2920 N. Shamrock, Jefferson City</b> |                                   | TIME OF INSPECTION<br><b>2:40 pm</b> |

**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) **24°C**
- PRINTER WORKING PROPERLY
- TIME AND DATE DISPLAYING PROPERLY **14:46**

**BREATH ALCOHOL ACCURACY STANDARDS**

- SIMULATOR SOLUTION  COMPRESSED ETHANOL-GAS MIXTURE
- STANDARD SUPPLIER **Repco Marketing** LOT # **16001** EXP. DATE **5-8-18**
- SIMULATOR TEMPERATURE (34°C ± 0.2°C) **33.99** SIMULATOR SN **MP2316** SIMULATOR EXP DATE **03-15-17**

- 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 • <b>.099</b> | TEST 2 • <b>.098</b> | TEST 3 • <b>.098</b> |
|----------------------|----------------------|----------------------|

- 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 <b>0</b> | (0-.04) <b>0</b> | (.05-.09) <b>0</b> | (.10-.14) <b>0</b> | (.15-.19) <b>0</b> | (OVER .19) <b>0</b> |
|-------------------|------------------|--------------------|--------------------|--------------------|---------------------|

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).

**3300F Capacitor that actuates sampling solenoid replaced.**

|   |   |
|---|---|
| <b>INSPECTING OFFICER</b>   |   |
| SIGNATURE<br><i>Jimmy L. Cleveland</i>                            | PRINT NAME<br><b>Jimmy L. Cleveland</b> |
| TYPE II PERMIT NUMBER/EXPIRATION DATE<br><b>250155 / 07-22-17</b> | TELEPHONE NUMBER<br><b>573-526-6193</b> |

**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: 108272  
Version no: 532B

TEST RECORD 00107

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

Air Blank:  
09/06/16 14:46 .000  
Calibration Check:  
24 09/06/16 14:46 .099

Subject Name

MAINT 1

Subject I.D.

Operator Name, I.D.

Jimmy L. Cleveland

Location

2920 N. Shamrock

Jefferson City

AS IV Serial no: 108272  
Version no: 532B

TEST RECORD 00108

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

Air Blank:  
09/06/16 14:49 .000  
Calibration Check:  
25 09/06/16 14:49 .098

Subject Name

MAINT 2

Subject I.D.

Operator Name, I.D.

Jimmy L. Cleveland

Location

2920 N. Shamrock

Jefferson City

AS IV Serial no: 108272  
Version no: 532B

TEST RECORD 00109

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

Air Blank:  
09/06/16 14:52 .000  
Calibration Check:  
25 09/06/16 14:52 .098

Subject Name

MAINT 3

Subject I.D.

Operator Name, I.D.

Jimmy L. Cleveland

Location

2920 N. Shamrock

Jefferson City

AS IV Serial no: 108272  
Version no: 532B

TEST RECORD 00110

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

VOID: RFI  
12 09/06/16 14:53

Subject Name

RFI TEST

Subject I.D.

Operator Name, I.D.

Jimmy L. Cleveland

Location

2920 N. Shamrock

Jefferson City

**CERTIFICATE OF ANALYSIS**

**MANUFACTURER AND SUPPLIER: RepCo Marketing, Inc.**

**LOT NUMBER: 16001**

**EXPIRATION DATE: May 8, 2018 at 11:59 p.m.**

RepCo Marketing, Inc. certifies the following:

RepCo Marketing, Inc. manufactured, tested and supplied Lot Number 16001 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 .1209 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 9, 2016  
The expiration date for this lot number is May 8, 2018 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**

**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 (R5-10)



**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