



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

**RECEIVED**  
 By Carol Day at 11:34 am, Aug 29, 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 111337	PRINTER SN 09B.3589.009	DATE OF INSPECTION 08/22/2016
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LOCATION OF INSTRUMENT (STREET AND CITY) 108 S Commercial Street Crocker MO 65452	TIME OF INSPECTION 4:18 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**

<input checked="" type="checkbox"/> SIMULATOR SOLUTION	<input type="checkbox"/> COMPRESSED ETHANOL-GAS MIXTURE
<input checked="" type="checkbox"/> STANDARD SUPPLIER <u>RepCo Marketing Inc</u> LOT # <u>15001</u> EXP. DATE <u>05/20/2017</u>	
<input checked="" type="checkbox"/> SIMULATOR TEMPERATURE (34°C ± 0.2°C) <u>34</u> SIMULATOR SN <u>SD 2729</u> SIMULATOR EXP DATE <u>08/05/2017</u>	

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  .098	TEST 3  .098
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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).

**INSPECTING OFFICER**

SIGNATURE 	PRINT NAME Aaron Baker
TYPE II PERMIT NUMBER/EXPIRATION DATE 250304 12/22/2017	TELEPHONE NUMBER (573) 736-2211

**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: 111337  
Version no: 532B

TEST RECORD 00133

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

Air Blank:  
08/22/16 16:21 .000  
Calibration Check:  
26 08/22/16 16:21 .098

Subject Name

TEST 3

Subject I.D.

n/a

Operator Name, I.D.

A. BAKER

Location

108 S Commercial

Crocker MO

AS IV Serial no: 111337  
Version no: 532B

TEST RECORD 00132

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

Air Blank:  
08/22/16 16:20 .000  
Calibration Check:  
25 08/22/16 16:20 .098

Subject Name

TEST 2

Subject I.D.

n/a

Operator Name, I.D.

A. BAKER

Location

108 S Commercial

Crocker MO

AS IV Serial no: 111337  
Version no: 532B

TEST RECORD 00131

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

Air Blank:  
08/22/16 16:18 .000  
Calibration Check:  
24 08/22/16 16:18 .099

Subject Name

TEST 1

Subject I.D.

n/a

Operator Name, I.D.

A. BAKER

Location

108 S Commercial

Crocker MO

AS IV Serial no: 111337  
Version no: 532B

TEST RECORD 00134

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

Air Blank:  
08/22/16 16:22 .000  
Subject Test: Auto  
26 08/22/16 16:22 .000

Subject Name

Blank

Subject I.D.

n/a

Operator Name, I.D.

A. Baker

Location

108 S Commercial

Crocker MO

AS IV Serial no: 111337  
Version no: 532B

TEST RECORD 00135

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

VOID: RFI  
12 08/22/16 16:23

Subject Name

RFI

Subject I.D.

n/a

Operator Name, I.D.

A. BAKER

Location

108 S Commercial

Crocker MO

**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.



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

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**PERMIT**  
**TYPE II**  
**AARON BAKER**

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 12/22/2015

  
 DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

NUMBER 250304

  
 DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

EXPIRES 12/22/2017

 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 BAKER, AARON  
 Permit No 250304  
 Date Issued 12/22/2015 Date Expires 12/22/2017