



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

RECEIVED
 By Tracy Crews at 10:35 am, Aug 03, 2023

ORIGINAL

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 087965	NAME OF AGENCY Cass County Sheriff's Office	DATE OF INSPECTION 8/1/23
LOCATION OF INSTRUMENT (STREET AND CITY) 2501 W. Mechanic, Harrisonville, MO		TIME OF INSPECTION 0923

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 # AG305102 EXP. DATE 02/20/2025
- SIMULATOR TEMPERATURE (34°C ± 0.2°C) SIM. SN SIM. NIST 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 • .102	TEST 2 • .102	TEST 3 • .102
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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) 6	(.10-.14) 2	(.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 Det. Cpl James Rew #563
TYPE II PERMIT NUMBER/EXPIRATION DATE 220231 09/09/2024	TELEPHONE NUMBER (816) 380-5200

Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office by mail, fax, or email.

AS IV Serial no: 087965
Version no: 532B

TEST RECORD 00692

Temp Date Time ^{a/} 210L

Air Blank:
08/01/23 09:23 .000
Calibration Check:
20 08/01/23 09:23 .102

Subject Name

Test 1

Subject I.D.

Operator Name, I.D.

Rev 563 220231 9/9/24

Location

2501 W. Mecklenburg

AS IV Serial no: 087965
Version no: 532B

TEST RECORD 00693

Temp Date Time ^{a/} 210L

Air Blank:
08/01/23 09:25 .000
Calibration Check:
21 08/01/23 09:25 .102

Subject Name

Test 2

Subject I.D.

Operator Name, I.D.

Rev 563 220231 9/9/24

Location

2501 W. Mecklenburg

AS IV Serial no: 087965
Version no: 532B

TEST RECORD 00694

Temp Date Time ^{a/} 210L

Air Blank:
08/01/23 09:27 .000
Calibration Check:
21 08/01/23 09:27 .102

Subject Name

Test 3

Subject I.D.

Operator Name, I.D.

Rev 563 220231 9/9/24

Location

2501 W. Mecklenburg

AS IV Serial no: 087965
Version no: 532B

TEST RECORD 00695

Temp Date Time ^{a/} 210L

UOIID: RFI
12 08/01/23 09:29

Subject Name

Test RFI

Subject I.D.

Operator Name, I.D.

Rev 563 220231 9/9/24

Location

2501 W. Mecklenburg

AS IV Serial no: 087965
Version no: 532B

TEST RECORD 00696

Temp Date Time ^{a/} 210L

Air Blank:
08/01/23 09:31 .000
Subject Test: Auto
22 08/01/23 09:31 .000

Subject Name

Test Blank

Subject I.D.

Operator Name, I.D.

Rev 563 220231 9/9/24

Location



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



PERMIT
TYPE II

JAMES N. REW

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 9/9/2022

NUMBER 220231

EXPIRES 9/9/2024

Laura E. Way

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Donald A. Kamm

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES