



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 Nixa 095961	NAME OF AGENCY Nixa Police Department	DATE OF INSPECTION 08/23/2023
LOCATION OF INSTRUMENT (STREET AND CITY) 715 W Center Circle, Nixa, MO 65714		TIME OF INSPECTION 3:35 am

**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 ACS LOT # 202205A EXP. DATE 05/17/2024

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIM. SN MP 5537 SIM. NIST EXP DATE 07/19/2024

- 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 .098      TEST 3 .100

- 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

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 Sgt. J Barton
TYPE II PERMIT NUMBER/EXPIRATION DATE 230030 02/17/2025	TELEPHONE NUMBER (417) 725-2510

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

# Nixa Police Department

## Calibration Check slip's

AS IV Serial no: 095961  
Version no: 532B

TEST RECORD 02726

Temp	Date	Time	s/ 210L
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Air Blank:  
08/23/23 03:38 .000  
Calibration Check:  
26 08/23/23 03:38 .100

Subject Name  
TEST 1

Subject I.D.

Operator Name, I.D.  
[Signature] 403

Location

AS IV Serial no: 095961  
Version no: 532B

TEST RECORD 02727

Temp	Date	Time	s/ 210L
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Air Blank:  
08/23/23 03:40 .000  
Calibration Check:  
27 08/23/23 03:40 .098

Subject Name  
TEST 2

Subject I.D.

Operator Name, I.D.  
[Signature] 403

Location

AS IV Serial no: 095961  
Version no: 532B

TEST RECORD 02728

Temp	Date	Time	s/ 210L
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Air Blank:  
08/23/23 03:43 .000  
Calibration Check:  
27 08/23/23 03:43 .100

Subject Name  
TEST 3

Subject I.D.

Operator Name, I.D.  
[Signature] 463

Location

# Nixa Police Department

## RFI Evidence slip

AS IV Serial no: 095961			
Version no: 532B			
TEST RECORD 02729			
Temp	Date	Time	9/ 210L
-----			
VOID: RFI			
12 08/23/23 03:44			
-----			
Subject Name			
RFI			
-----			
Subject I.D.			
-----			
Operator Name, I.D.			
403			
-----			
Location			
-----			
-----			

# Nixa Police Department

## Blank (Zero) test Evidence slip

AS IV Serial no: 095961			
Version no: 532B			
TEST RECORD 02730			
Temp	Date	Time	a/ 210L
-----			
Air Blank:			
	08/23/23	03:46	.000
Subject Test: Auto			
26	08/23/23	03:46	.000
-----			
Subject Name			
<u>BLANK</u>			
-----			
Subject I.D.			
-----			
Operator Name, I.D.			
<u>[Signature]</u> 403			
-----			
Location			
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## Reference Material Certificate of Analysis

Product Identification: Alcohol Reference Solution (ARS)  
 CRM: Ethanol in aqueous solution  
 Reference concentration: 1.2100 g/L  
 Analytical concentration: 1.2163 g/L  
 Batch size: 2291 bottles  
 Lot number: 202205A  
 Date of production: 2022.05.17 (yyyy.mm.dd)

This certificate covers the production, analysis and certification of the Certified Reference Material (CRM) manufactured by Alcohol Countermeasure Systems Corp (ACS), located at 60 International Boulevard, Toronto, ON M9W 6J2 CANADA.

This metrology laboratory is accredited in accordance with international standards ISO/IEC 17025:2017 for competence of testing and calibration laboratories, and ISO/IEC 17084:2016 for the competence of reference material producers, demonstrating technical competence within the defined scope and the operation of a laboratory quality management system.

The analysis for certification of each lot of ARS is conducted within ACS forensic laboratory by an independent chemist using the direct injection, flame ionization gas chromatographic procedure coupled with the internal standard technique commensurate with forensic alcohol analysis.

This certificate is valid only for the ARS lot number identified above and does not extend to any other production lot of alcohol reference solution.

This certificate may only be reproduced in full.



For and on behalf of the company,  
ALCOHOL COUNTERMEASURE  
SYSTEMS CORP.



Felix JE Comeau, B.Sc (Honours)  
Laboratory Director



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

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**PERMIT**  
**TYPE II**  
**JOSHUA C. BARTON**

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 2/17/2023

*Mike Massum*

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

NUMBER 230030

*Paula F. Richardson*

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

EXPIRES 2/17/2025

MO 680-0771 (8-10)

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 BARTON, JOSHUA  
 Permit No 230030  
 Date Issued 2/17/2023 Date Expires 2/17/2025

