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By Tracy Crews at 9:13 am, Oct 23, 2023



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 10/20/2023
LOCATION OF INSTRUMENT (STREET AND CITY) 715 W Center Circle, Nixa, MO 65714		TIME OF INSPECTION 1:45 pm

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.

<input checked="" type="checkbox"/> DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)
<input checked="" type="checkbox"/> TEMPERATURE OF ALCO SENSOR (10°C - 40°C)
<input checked="" type="checkbox"/> PRINTER WORKING PROPERLY
<input checked="" type="checkbox"/> TIME AND DATE DISPLAYING PROPERLY

BREATH ALCOHOL ACCURACY STANDARDS

<input checked="" type="checkbox"/> SIMULATOR SOLUTION	<input type="checkbox"/> COMPRESSED ETHANOL-GAS MIXTURE
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<input checked="" type="checkbox"/> STANDARD SUPPLIER <u>ACS</u>	LOT # <u>202205A</u>	EXP. DATE <u>05/17/2024</u>
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<input checked="" type="checkbox"/> SIMULATOR TEMPERATURE (34°C ± 0.2°C) <u>34.0</u>	SIM. SN <u>MP 5537</u>	SIM. NIST EXP DATE <u>07/19/2024</u>
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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)

<input checked="" type="checkbox"/> 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE
<input type="checkbox"/> 0.080% STANDARD - MUST READ BETWEEN 0.076% and 0.084% INCLUSIVE
<input type="checkbox"/> 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE

TEST 1 .100	TEST 2 .100	TEST 3 .101
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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 Sgt. J. Barton
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TYPE II PERMIT NUMBER/EXPIRATION DATE 230030 02/17/2025	TELEPHONE NUMBER (417) 725-2510
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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 02770

Temp	Date	Time	s/ 210L
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Air Blank:
10/20/23 13:50 .000
Calibration Check:
26 10/20/23 13:50 .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 02771

Temp	Date	Time	s/ 210L
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Air Blank:
10/20/23 13:52 .000
Calibration Check:
26 10/20/23 13:52 .100

Subject Name
TEST 2

Subject I.D.

Operator Name, I.D.
[Signature] 403

Location

AS IV Serial no: 095961
Version no: 532B

TEST RECORD 02772

Temp	Date	Time	s/ 210L
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Air Blank:
10/20/23 13:55 .000
Calibration Check:
26 10/20/23 13:55 .101

Subject Name
TEST 3

Subject I.D.

Operator Name, I.D.
[Signature] 403

Location

Nixa Police Department

RFI Evidence slip

AS IV Serial no: 095961			
Version no: 532B			
TEST RECORD 02773			
Temp	Date	Time	s/ 210L
VOID: RFI			
12 10/20/23 13:57			
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 02774			
Temp	Date	Time	210L ^{a/}

Air Blank:			
	10/20/23	13:58	.000
Subject Test: Auto			
26	10/20/23	13:58	.000

Subject Name			
<u>BLANK</u>			

Subject I.D.			

Operator Name, I.D.			
<u>[Signature]</u> 403			

Location			

Reference Material Certificate of Analysis

Product Identification: Alcohol Reference Solution (ARS)
ORM: Ethanol in aqueous solution
Reference concentration: 1.2100 g/L
Analytical concentration: 1.2158 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 80 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 17084:2018 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 Cormeau, B.Sc (Honours)
Laboratory Director



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

2

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 Mason

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

NUMBER 230030

EXPIRES 2/17/2025

David L. Nicholson

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 660-0771 (6-10)

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**

