



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 097421 | NAME OF AGENCY Branson West Police Department | DATE OF INSPECTION 11/29/2023 |
| LOCATION OF INSTRUMENT (STREET AND CITY) 110 Silver Lady Ln., Branson West, MO, 65737 | | TIME OF INSPECTION 10:59 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

| | |
|---|--|
| <input type="checkbox"/> SIMULATOR SOLUTION | <input checked="" type="checkbox"/> COMPRESSED ETHANOL-GAS MIXTURE |
| <input checked="" type="checkbox"/> STANDARD SUPPLIER <u>Intoximeters</u> | LOT # <u>AG319402</u> EXP. DATE <u>07/13/2025</u> |
| <input type="checkbox"/> 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 .098 | TEST 2 .097 | TEST 3 .097 |
|--------------|--------------|--------------|

- 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).

Set time

| | |
|--|------------------------------------|
| INSPECTING OFFICER | |
| SIGNATURE | PRINT NAME Sgt Aaron Hoeft |
| TYPE II PERMIT NUMBER/EXPIRATION DATE 230260 11-21-2025 | TELEPHONE NUMBER (417) 272-3400 |

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

03. 10. 2021 11:00 002421
Bijzondere no. 1020

TEST BUREAU BWPB
Pag. 1048. Totaal 2100.

010. 010
11/29/21 11:00 0000
11/29/21 11:00 0000
11/29/21 11:00 0000

Subjekt Heeft
Test 1
test 1
Hoeft 230260
BWPB

03. 10. 2021 11:00 002421
Bijzondere no. 1020

TEST BUREAU BWPB
Pag. 1048. Totaal 2100.

010. 010
11/29/21 11:00 0000
11/29/21 11:00 0000
11/29/21 11:00 0000

Subjekt Heeft
Test 2
test 2
Hoeft 230260
BWPB

03. 10. 2021 11:00 002421
Bijzondere no. 1020

TEST BUREAU BWPB
Pag. 1048. Totaal 2100.

010. 010
11/29/21 11:00 0000
11/29/21 11:00 0000
11/29/21 11:00 0000

Subjekt Heeft
Test 3
test 3
Hoeft 230260
BWPB

03. 10. 2021 11:00 002421
Bijzondere no. 1020

TEST BUREAU BWPB
Pag. 1048. Totaal 2100.

010. 010
11/29/21 11:00 0000

Subjekt Heeft
RFI test
test RFI
Hoeft 230260
BWPB



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



PERMIT
TYPE II

AARON HOEFT

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 11/21/2023

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

M. De Mearns

NUMBER 230260

EXPIRES 11/21/2025

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

David J. Redden