



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 104293	NAME OF AGENCY Gladstone Police Department	DATE OF INSPECTION 04/11/2023
LOCATION OF INSTRUMENT (STREET AND CITY) 6437 N. Prospect Ave., Gladstone		TIME OF INSPECTION 12:20 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.

- 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 # AG300603 EXP. DATE 09/06/2024
- 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 ➔ .103	TEST 2 ➔ .103	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)	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).

REST DATE/TIME TO SHOW CORRECT DATE AND TIME.

INSPECTING OFFICER

SIGNATURE ▶	PRINT NAME Christopher McBane
TYPE II PERMIT NUMBER/EXPIRATION DATE 210088 04/27/2023	TELEPHONE NUMBER (816) 271-4755

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

AS IU Serial no: 104293
Version no: 532B

TEST RECORD 01642

Temp Date Time 210L
g/

Air Blank:
04/11/23 12:20 .000
Calibration Check:
22 04/11/23 12:20 .103

Subject Name

Subject I.D.

Operator Name, I.D.

Location

AS IU Serial no: 104293
Version no: 532B

TEST RECORD 01643

Temp Date Time 210L
g/

Air Blank:
04/11/23 12:22 .000
Calibration Check:
22 04/11/23 12:22 .103

Subject Name

Subject I.D.

Operator Name, I.D.

Location

AS IU Serial no: 104293
Version no: 532B

TEST RECORD 01645

Temp Date Time 210L
g/

Air Blank:
04/11/23 12:40 .000
Calibration Check:
23 04/11/23 12:40 .102

Subject Name

Subject I.D.

Operator Name, I.D.

Location

AS IU Serial no: 104293
Version no: 532B

TEST RECORD 01646

Temp Date Time 210L
g/

VOID: RPI
12 04/11/23 12:42

Subject Name

Subject I.D.

Operator Name, I.D.

Location



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



PERMIT
TYPE II
CHRISTOPHER MCBANE

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 4/27/2021

NUMBER 210088

EXPIRES 4/27/2023

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

 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 MCBANE, CHRISTOPHER
 Permit No 210088
 Date Issued 4/27/2021 Date Expires 4/27/2023

