



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

RECEIVED
 By Tracy Crews at 7:57 am, Feb 21, 2023

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 Sparta 107985 | NAME OF AGENCY Sparta Police Department | DATE OF INSPECTION 02/21/2023 |
| LOCATION OF INSTRUMENT (STREET AND CITY) 715 W Center Circle, Nixa, Mo 65714 | | TIME OF INSPECTION 1:40 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 .100 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 07/11/2023

- 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 <u>.099</u> | TEST 2 <u>.100</u> | TEST 3 <u>.099</u> |
|--------------------|--------------------|--------------------|

- RFI DETECTOR OPERATING

INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT: (DO NOT INCLUDE SELF-ADMINISTERED TESTS)

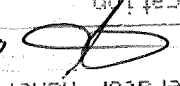
| | | | | | | | | | | | |
|----------|----------|---------|----------|-----------|----------|-----------|----------|-----------|----------|------------|----------|
| REFUSALS | <u>0</u> | (0-.04) | <u>0</u> | (.05-.09) | <u>0</u> | (.10-.14) | <u>0</u> | (.15-.19) | <u>0</u> | (OVER .19) | <u>0</u> |
|----------|----------|---------|----------|-----------|----------|-----------|----------|-----------|----------|------------|----------|


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).

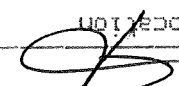
| | |
|--|------------------------------------|
| INSPECTING OFFICER | |
| SIGNATURE | PRINT NAME Sgt. J. Barton |
| TYPE II PERMIT NUMBER/EXPIRATION DATE 230030 02/17/2025 | TELEPHONE NUMBER (417) 725-2510 |

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

TEST RECORD 01351
 Temp Date Time 210L
 Air Blank:
 02/21/23 01:40 .000
 Calibration Check:
 22 02/21/23 01:40 .099
 Subject Name
 TEST 1
 Subject I.D.
 Operator Name, I.D.  403
 Location

AS IV Serial no: 107985
 Version no: 532B
 TEST RECORD 01352
 Temp Date Time 210L
 Air Blank:
 02/21/23 01:42 .000
 Calibration Check:
 22 02/21/23 01:42 .100
 Subject Name
 TEST 2
 Subject I.D.
 Operator Name, I.D.  403
 Location

AS IV Serial no: 107985
 Version no: 532B
 TEST RECORD 01354
 Temp Date Time 210L
 Air Blank:
 02/21/23 01:45 .000
 Calibration Check:
 24 02/21/23 01:45 .099
 Subject Name
 TEST 3
 Subject I.D.
 Operator Name, I.D.  403
 Location

Nixa Police Department

RFI Evidence slip

AS IV Serial no: 107985
Version no: 532B

TEST RECORD - REPRINT

TEST RECORD 01355

Temp Date Time 210L^{s/}

VOID: RFI
12 02/21/23 01:53

Subject Name

RFI

Subject I.D.

Operator Name, I.D.

JH 403
Location

Nixa Police Department

Blank (Zero) test Evidence slip

AS IV Serial no: 107985
Version no: 532B

TEST RECORD 01356

| Temp | Date | Time | s/ 210L |
|------|------|------|------------|
|------|------|------|------------|

| | | | |
|--------------------|-------------|-------|------|
| Air Blank: | | | |
| | 02/21/23 | 01:56 | .000 |
| Subject Test: Auto | | | |
| | 24 02/21/23 | 01:56 | .000 |

Subject Name

BLANK

Subject I.D.

Operator Name, I.D.

96 403

Location

Reference Material Certificate of Analysis

| | |
|---------------------------|----------------------------------|
| Product Identification: | Alcohol Reference Solution (ARS) |
| CRM: | Ethanol in aqueous solution |
| Reference concentration: | <u>1.2100</u> g/L |
| Analytical concentration: | <u>1.2153</u> g/L |
| Batch size: | <u>2291</u> bottles |
| Lot number: | <u>202205A</u> |
| Date of production: | <u>2022.05.17</u> (yyyy.mm.dd) |

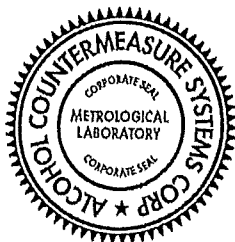
This certificate covers the production, analysis and certification of the Certified Reference Material (CRM) manufactured by Alcohol Countermeasure Systems Corp (ACS), located at 60 International Boulevard, Toronto, ON M9W 6J2 CANADA.

This metrology laboratory is accredited in accordance with international standards ISO/IEC 17025:2017 for competence of testing and calibration laboratories, and ISO/IEC 17034:2016 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

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



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



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

David J. Nickelson

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

EXPIRES 2/17/2025

MO 580-0771 (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

