



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 111769	NAME OF AGENCY Columbia Police Department	DATE OF INSPECTION 08/05/2023
LOCATION OF INSTRUMENT (STREET AND CITY) 600 E. Walnut St. Columbia		TIME OF INSPECTION 7:05 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

<input type="checkbox"/> SIMULATOR SOLUTION	<input checked="" type="checkbox"/> COMPRESSED ETHANOL-GAS MIXTURE
STANDARD SUPPLIER <u>Intoximeters</u> LOT # <u>AG209701</u> EXP. DATE <u>04/07/2024</u>	
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 ← .100	TEST 2 ← .100	TEST 3 ← .099
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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	1	(0-.04)	0	(.05-.09)	1	(.10-.14)	2	(.15-.19)	3	(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).

monthly maintenance

INSPECTING OFFICER

SIGNATURE ▶ <i>Mark D. Hoehne</i>	PRINT NAME Mark D. Hoehne
TYPE II PERMIT NUMBER/EXPIRATION DATE 220158 06/14/2024	TELEPHONE NUMBER (573) 874-7585

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

AS IV Serial no: 111769
Version no: 0028

TEST RESULT: PASS
Time: 215L

Boehme, Mark D. 2078
Operator Name: J.D.

Location:

Test # 1

Boehme, Mark D. 2078
Operator Name: J.D.

Location:

Time:

Time:

AS IV Serial no: 111769
Version no: 0028

TEST RESULT: PASS

Time: Date: Time: 215L

Boehme, Mark D. 2078
Operator Name: J.D.

Location:

Test # 2

Boehme, Mark D. 2078
Operator Name: J.D.

Location:

Time:

Time:

AS IV Serial no: 111769
Version no: 0028

TEST RESULT: PASS

Time: Date: Time: 215L

Boehme, Mark D. 2078
Operator Name: J.D.

Location:

Test # 3

Boehme, Mark D. 2078
Operator Name: J.D.

Location:

Time:

Time:

AS IV Serial no: 111769
Version no: 0028

TEST RESULT: PASS

Time: Date: Time: 215L

Boehme, Mark D. 2078
Operator Name: J.D.

RFI Check

Boehme, Mark D. 2078
Operator Name: J.D.

AS IV Serial no: 111769
Version no: 0028

TEST RESULT: PASS

Time: Date: Time: 215L

Boehme, Mark D. 2078
Operator Name: J.D.

Self Test

Boehme, Mark D. 2078
Operator Name: J.D.

Location:

Time:

Time:

AS IV Serial no: 111769
Version no: 532B

TEST RECORD 00397

Temp Date Time 218L

Air Blank:
08/05/23 19:05 .000
Calibration Check:
19 08/05/23 19:05 .100

Subject Name

Test # 1

Subject I.D.

Hoehne, Mark D. 2078
Operator Name: I.D.

Location

AS IV Serial no: 111769
Version no: 532B

TEST RECORD 00398

Temp Date Time 218L

Air Blank:
08/05/23 19:06 .000
Calibration Check:
19 08/05/23 19:06 .100

Subject Name

Test # 2

Subject I.D.

Hoehne, Mark D. 2078
Operator Name: I.D.

Location

AS IV Serial no: 111769
Version no: 532B

TEST RECORD 00399

Temp Date Time 218L

Air Blank:
08/05/23 19:07 .000
Calibration Check:
19 08/05/23 19:07 .100

Subject Name

Test # 3

Hoehne, Mark D. 2078
Operator Name: I.D.

AS IV Serial no: 111769
Version no: 532B

TEST RECORD 00400

Temp Date Time 218L

Air Blank:
17 08/05/23 19:11

Subject Name

RFI check

Subject I.D.

Hoehne, Mark D. 2078
Operator Name: I.D.

Location

AS IV Serial no: 111769
Version no: 532B

TEST RECORD 00401

Temp Date Time 218L

Air Blank:
08/05/23 19:12 .000
Subject Test: Auto
22 08/05/23 19:12 .000

Subject Name

Self Test

Subject I.D.

Hoehne, Mark D. 2078
Operator Name: I.D.

Location

Airgas

John Deane, D. Eng.
 10000 Highway 100
 Houston, TX 77036
 Tel: (713) 285-4400
 Fax: (713) 285-4400

Certificate of Analysis

Customer Name
 Analytical Supplier
 Houston, TX
 10000 Highway 100
 Houston, TX 77036

Test Date: 11-Apr-2002

Lot # A0200701 Model 100

Exp Date
 7-Apr-2004

Gas Type
 100

Component
 Ethanol
 Nitrogen

Certified Concentration
 0.100 ± 0.001 N2O (100 ppm)

Certification Reference to ASTM, NIST and to Gravimetric Standard

Batch Serial No.	Concentration	Batch Serial No.	Concentration
010010001	101.8 ppm	010010002	101.8 ppm
010010002	101.8 ppm	010010003	101.8 ppm
010010003	101.8 ppm	010010004	101.8 ppm
010010004	101.8 ppm	010010005	101.8 ppm
010010005	101.8 ppm	010010006	101.8 ppm
010010006	101.8 ppm	010010007	101.8 ppm
010010007	101.8 ppm	010010008	101.8 ppm
010010008	101.8 ppm	010010009	101.8 ppm
010010009	101.8 ppm	010010010	101.8 ppm

Analytical Method: NIST

Approved for Release

Approved for Release: John Deane
 John Deane

ISO 9001:2000 AS9100A certified, Certificate Number 00101001
 ISO 17025:2005 AS9100A certified, Certificate Number 00010101



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

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PERMIT
TYPE II

MARK D HOEHNE

do hereby authorize to install and supervise operators, train instructors, inspect, calibrate, perform field services and repairs, and operate the following breath analyzers:

ALCO-SUNSOR IV WITH PRINTER, INTOX DMT

for the determination of the alcoholic content of blood from a sample of expired air, from the provisions of sections 577.040 through 577.047, RSMo and 582.121 through 582.124, RSMo.

EXPIRES: 06/30/2003

ISSUED BY: [Signature]

DATE OF ISSUE: 06/24/2002

REVISED 01/01/02

Mike Mason

DEPARTMENT OF HEALTH AND SENIOR SERVICES

Donna M. [Signature]

DEPARTMENT OF HEALTH AND SENIOR SERVICES

10/16/02 (10/02)

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

INSTALLMENT CERTIFICATE CARD

THIS CARD IS VALID FOR THE PERIOD OF TIME SPECIFIED HEREON AND IS SUBJECT TO THE PROVISIONS OF SECTIONS 577.040 THROUGH 577.047, RSMO AND 582.121 THROUGH 582.124, RSMO.

ANALYZER: ALCO-SUNSOR IV WITH PRINTER
MODEL: INTOX DMT
DATE ISSUED: 06/24/2002