



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 119726	NAME OF AGENCY Chesterfield Police Department	DATE OF INSPECTION 12/27/2023
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LOCATION OF INSTRUMENT (STREET AND CITY) 690 Chesterfield Pkwy W, Chesterfield	TIME OF INSPECTION 3:08 pm
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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 # AG223501 EXP. DATE 08/23/2024

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 ➔ 0.081	TEST 2 ➔ 0.080	TEST 3 ➔ 0.080
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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-.04)	(.05-.09)	(.10-.14)	(.15-.19)	(OVER .19)
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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).

Instrument is operating within Missouri Department of Health Specifications.

INSPECTING OFFICER

SIGNATURE <i>P.O. Rupp #264</i>	PRINT NAME P.O. Rupp #264
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TYPE II PERMIT NUMBER/EXPIRATION DATE 230076 / 04/14/2025	TELEPHONE NUMBER (636) 537-3000
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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.

AS IV Serial no: 119726
Version no: 532C

TEST RECORD 00057
Temp Date Time g/
210L
Air Blank: 12/27/23 15:08 .000
Calibration Check: 16 12/27/23 15:08 .081

Subject Name
Test # 1
Subject I.D.
G. Rupp # 264
Operator Name, I.D.
230076
Location
Chesapeake PD

AS IV Serial no: 119726
Version no: 532C

TEST RECORD 00058
Temp Date Time g/
210L
Air Blank: 12/27/23 15:10 .000
Calibration Check: 18 12/27/23 15:10 .080

Subject Name
Test # 2
Subject I.D.
G. Rupp # 264
Operator Name, I.D.
230076
Location
Chesapeake PD

AS IV Serial no: 119726
Version no: 532C

TEST RECORD 00059
Temp Date Time g/
210L
Air Blank: 12/27/23 15:11 .000
Calibration Check: 19 12/27/23 15:11 .080

Subject Name
Test # 3
Subject I.D.
G. Rupp # 264
Operator Name, I.D.
230076
Location
Chesapeake PD

AS IV Serial no: 119726
Version no: 532C

TEST RECORD 00060
Temp Date Time g/
210L
VOID: RFI 12 12/27/23 15:14

Subject Name
RFI Test
Subject I.D.
G. Rupp # 264
Operator Name, I.D.
230076
Location
Chesapeake PD



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



PERMIT
TYPE II
GREGORY RUPP

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 4/14/2023

NUMBER 230076

EXPIRES 4/14/2025

Mike Massman

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Paula J. Nicholson

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 RUPP, GREGORY
Permit No 230076
Date Issued 4/14/2023 **Date Expires** 4/14/2025

