



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 062092	PRINTER SN 03A.2436.034	DATE OF INSPECTION 01/03/2024
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LOCATION OF INSTRUMENT (STREET AND CITY) 4001 NE Lakewood CT Lees Summit MO 64064	TIME OF INSPECTION 7:05 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

<input type="checkbox"/> SIMULATOR SOLUTION	<input checked="" type="checkbox"/> COMPRESSED ETHANOL-GAS MIXTURE
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<input checked="" type="checkbox"/> STANDARD SUPPLIER <u>Intoximeters</u>	LOT # <u>AG304002</u>	EXP. DATE <u>02/09/2025</u>
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<input type="checkbox"/> SIMULATOR TEMPERATURE (34°C ± 0.2°C)	SIMULATOR SN	SIMULATOR EXP DATE
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- 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 ← .101	TEST 2 ← .100	TEST 3 ← .100
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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).

Instrument meets all DHSS standards and guidelines.

INSPECTING OFFICER

SIGNATURE ▶	PRINT NAME Dep. C. Bennett #81/0481
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TYPE II PERMIT NUMBER/EXPIRATION DATE 230176 08/11/2025	TELEPHONE NUMBER (816) 541-8017
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Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office
 2875 James Boulevard
 Poplar Bluff, MO 63901

AS IV Serial no: 062092
Version no: 532B

TEST RECORD 01703 s/

Temp Date Time 210L

VOID: RFI
12 01/03/24 19:14

Subject Name

Test

Subject I.D.

RFL

Operator Name, I.D.

BENNETT 230195

Location

JCSO GHQ

AS IV Serial no: 062092
Version no: 532B

TEST RECORD 01702 s/

Temp Date Time 210L

Air Blank:
01/03/24 19:11 .000

Calibration Check:
25 01/03/24 19:11 .100

Subject Name

Test

Subject I.D.

3

Operator Name, I.D.

BENNETT 230195

Location

JCSO GHQ

AS IV Serial no: 062092
Version no: 532B

TEST RECORD 01701 s/

Temp Date Time 210L

Air Blank:
01/03/24 19:09 .000

Calibration Check:
24 01/03/24 19:09 .100

Subject Name

Test

Subject I.D.

2

Operator Name, I.D.

BENNETT 230195

Location

JCSO GHQ

AS IV Serial no: 062092
Version no: 532B

TEST RECORD 01700 s/

Temp Date Time 210L

Air Blank:
01/03/24 19:05 .000

Calibration Check:
21 01/03/24 19:05 .101

Subject Name

Test

Subject I.D.

1

Operator Name, I.D.

BENNETT 230195

Location

JCSO GHQ



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



**PERMIT
TYPE II**

CHRISTOPHER BENNETT

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 8/31/2023

Mike Mason

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

NUMBER 230195

David F. Nielson

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

EXPIRES 8/31/2025

MO 590-0771 (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 BENNETT, CHRISTOPHER
Permit No 230195
Date Issued 8/31/2023 **Date Expires** 8/31/2025

