



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 111655	PRINTER SN 09B.3589.464	DATE OF INSPECTION 01/10/2024
LOCATION OF INSTRUMENT (STREET AND CITY) 115 E. 69 Highway, Claycomo, MO 64119		TIME OF INSPECTION 4:07 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

COMPRESSED ETHANOL-GAS MIXTURE

STANDARD SUPPLIER Intoximeters LOT # AG309501 EXP. DATE 04/05/2025

SIMULATOR TEMPERATURE (34°C ± 0.2°C) SIMULATOR SN SIMULATOR 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 \bullet .098

TEST 2 \bullet .098

TEST 3 \bullet .098

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 operating within MO DOHSS standards and guidelines.

INSPECTING OFFICER

SIGNATURE
Lt. Jeffrey Kirk

PRINT NAME
Lt. Jeffrey Kirk # 104

TYPE II PERMIT NUMBER/EXPIRATION DATE
220076 03/09/2024

TELEPHONE NUMBER
(816) 452-4613

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 IU Serial no: 111635
Version no: 532B

AS IU Serial no: 111635
Version no: 532B

AS IU Serial no: 111635
Version no: 532B

TEST RECORD - REPRINT

TEST RECORD 01213

TEST RECORD 01214

TEST RECORD 01215

Temp Date Time 213L

Temp Date Time 213L

Temp Date Time 213L

Air Blank:
01/10/24 04:27 .000
Calibration Check:
20 01/10/24 04:27 .098

Air Blank:
01/10/24 04:29 .000
Calibration Check:
20 01/10/24 04:29 .092

Air Blank:
01/10/24 04:30 .000
Calibration Check:
20 01/10/24 04:30 .098

Subject Name

TEST # 1

Subject I.D.

Subject Name

TEST # 2

Subject I.D.

Subject Name

TEST # 3

Subject I.D.

Operator Name: I.D. 220076

Operator Name: I.D. 220076

Operator Name: I.D. 220076

LT. Jeffrey Kirk #104
Location Claycomo P.D.
115 E US 69 Hwy

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Clay como, mo 64119

Clay como, mo 64119

Clay como, mo 64119

AS IU Serial no: 111635
Version no: 532B

TEST RECORD 01216

Temp Date Time 213L

AIR RFI
12 01/10/24 04:34

Subject Name

RFI

Subject I.D.

Operator Name: I.D. 220076

LT. Jeffrey Kirk #104
Location Claycomo P.D.
115 E US 69 Hwy

Clay como, mo 64119



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



PERMIT
TYPE II
JEFFREY KIRK

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 3/9/2022

NUMBER 220076

EXPIRES 3/9/2024

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

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 KIRK, JEFFREY
Permit No 220076
Date Issued 3/9/2022 Date Expires 3/9/2024