



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 030788	PRINTER SN 093.3567.011	DATE OF INSPECTION 07/29/2020
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LOCATION OF INSTRUMENT (STREET AND CITY) Jefferson County Sheriff's Office, 410 First Street, Hillsboro, MO 63050	TIME OF INSPECTION 6:56 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
<input checked="" type="checkbox"/> STANDARD SUPPLIER <u>Intoximeter</u> LOT # <u>AG912204</u> EXP. DATE <u>05/02/2021</u>	
<input type="checkbox"/> 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 .097	TEST 2 .097	TEST 3 .097
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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) 1	(.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).

INSPECTING OFFICER

SIGNATURE	PRINT NAME Deputy Nicholas Gamm #549
TYPE II PERMIT NUMBER/EXPIRATION DATE 200190 / 06/22/2022	TELEPHONE NUMBER (636) 797-5000

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: 030788
Version no: 532B

TEST RECORD 00336

Temp Date Time 210L

Air Blank:
07/29/20 19:18 .000
Calibration Check:
30 07/29/20 19:18 .097

Subject Name

Subject I.D.

Test #2

Operator Name, I.D.

Location

AS IV Serial no: 030788
Version no: 532B

TEST RECORD 00336

Temp Date Time 210L

Air Blank:
07/29/20 19:15 .000
Calibration Check:
30 07/29/20 19:15 .097

Subject Name

Aug Maintenance

Subject I.D.

Test #1

Operator Name, I.D.

Dep Gamu 549

Location

200190 / 06/26/2022

AS IV Serial no: 030788
Version no: 532B

TEST RECORD 00338

Temp Date Time 210L

Air Blank:
07/29/20 19:21 .000
Calibration Check:
30 07/29/20 19:21 .097

Subject Name

Subject I.D.

Test #3

Operator Name, I.D.

Location

AS IV Serial no: 030788
Version no: 532B

TEST RECORD 00339

Temp Date Time 210L

VOID: RFI
12 07/29/20 19:22

Subject Name

Subject I.D.

RFI Test

Operator Name, I.D.

Location



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 GAMM, NICHOLAS

Permit No 200190

Date Issued 6/26/2020 **Date Expires** 6/26/2022

