



**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 102459	PRINTER SN 096.3580.930	DATE OF INSPECTION 07/02/2020
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LOCATION OF INSTRUMENT (STREET AND CITY) Troop F Headquarters, 2920 Shamrock Drive, Jefferson City	TIME OF INSPECTION 10:14 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 RepCo LOT # 19002 EXP. DATE 10/16/2021

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.00 SIMULATOR SN MP2123 SIMULATOR EXP DATE 12/20/2020

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 .103

TEST 2 .104

TEST 3 .104

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)	1	(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).

**INSPECTING OFFICER**

SIGNATURE

PRINT NAME  
M.A. Dickens

TYPE II PERMIT NUMBER/EXPIRATION DATE  
290283 12/11/2021

TELEPHONE NUMBER  
(573) 751-1000

**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: 182459  
Version no: 532B

TEST RECORD 00610

Temp Date Time <sup>s/</sup> 210L

Air Blank:  
07/02/20 22:14 .000  
Calibration Check:  
19 07/02/20 22:14 .103

Subject Name

**Test 1**

Subject I.D.

Operator Name, I.D.

**Dickens, 290283**

Location

**Troop F**

AS IV Serial no: 182459  
Version no: 532B

TEST RECORD 00611

Temp Date Time <sup>s/</sup> 210L

Air Blank:  
07/02/20 22:16 .000  
Calibration Check:  
19 07/02/20 22:16 .104

Subject Name

**Test 2**

Subject I.D.

Operator Name, I.D.

**Dickens, 290283**

Location

**Troop F**

AS IV Serial no: 182459  
Version no: 532B

TEST RECORD 00612

Temp Date Time <sup>s/</sup> 210L

Air Blank:  
07/02/20 22:18 .000  
Calibration Check:  
20 07/02/20 22:18 .104

Subject Name

**Test 3**

Subject I.D.

Operator Name, I.D.

**Dickens, 290283**

Location

**Troop F**

AS IV Serial no: 182459  
Version no: 532B

TEST RECORD 00613

Temp Date Time <sup>s/</sup> 210L

VOID: RFI  
12 07/02/20 22:19

Subject Name

**RFI**

Subject I.D.

Operator Name, I.D.

**Dickens 290283**

Location

**Troop F**



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

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**PERMIT**  
**TYPE II**  
**MARYLYN A DICKENS**

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 DMT**

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 12/11/2019

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

NUMBER 290283

EXPIRES 12/11/2021

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 DICKENS, MARYLYN  
 Permit No 290283  
 Date Issued 12/11/2019 Date Expires 12/11/2021



## CERTIFICATE OF ANALYSIS

**MANUFACTURER AND SUPPLIER: RepCo Marketing Co.**

**LOT NUMBER: 19002**

**EXPIRATION DATE: October 16, 2021 at 11:59 p.m.**

RepCo Marketing Co. certifies the following:

RepCo Marketing Co. prepared, tested and supplied Lot Number 19002 of Alcohol Certified Solution for simulators. This solution was manufactured and tested by RepCo Marketing Co., with confirmation by ISO 17025 and ISO 17034 accredited institution Alcohol Countermeasure Systems, using NIST standards. Random samples were analyzed by Alcohol Countermeasure Systems utilizing a gas chromatograph and found to contain .1231 gms/dl +/-0.003 gms/dl wt/vol ethanol (95% Confidence).

The alcohol and distilled water used in the solution were found to be free of any interfering substance.

This solution will produce a vapor alcohol value of .100 +/-3% gms/210L breath when heated to 34 Degrees Celsius +/-0.2 Degrees Celsius in a simulator (95% Confidence).

The date of manufacture for this lot number is October 17, 2019 The expiration date for this lot number is October 16, 2021 at 11:59 p.m.

This document is a true representation of the original Certificate of Analysis.



Alma Palmer, Operations Manager  
RepCo Marketing Co.