



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 105449	PRINTER SN 097.3585.012	DATE OF INSPECTION 08/08/2020
LOCATION OF INSTRUMENT (STREET AND CITY) 200 HIGHLANDS BLVD DR MANCHESTER MO 63011		TIME OF INSPECTION 0045

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) 23°C

PRINTER WORKING PROPERLY

TIME AND DATE DISPLAYING PROPERLY

BREATH ALCOHOL ACCURACY STANDARDS

SIMULATOR SOLUTION COMPRESSED ETHANOL-GAS MIXTURE

STANDARD SUPPLIER INTOXIMETERS LOT # AG826202 EXP. DATE 09/19/2020

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 .102

TEST 2 .101

TEST 3 .099

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) 2 (OVER .19) 1

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 SCOTT A. WEST
TYPE II PERMIT NUMBER/EXPIRATION DATE 290267 11/05/2021	TELEPHONE NUMBER (636) 227-1410

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

GS 1U Serial no: 185449
Version no: 5320

TEST RECORD 00697

Temp Date Time ^{s/} 2100

Air Blank:
08/08/20 08:53 .080
Calibration Check:
23 08/08/20 08:54 .102

Subject Name

Subject I.D.

Operator Name: J.J.

Location

GS 1U Serial no: 185449
Version no: 5320

TEST RECORD 00700

Temp Date Time ^{s/} 2100

VOID: NP
12 08/08/20 08:57

Subject Name

Operator Name: J.J.

Location

GS 1U Serial no: 185449
Version no: 5320

TEST RECORD 00698

Temp Date Time ^{s/} 2100

Air Blank:
08/08/20 08:52 .080
Calibration Check:
23 08/08/20 08:52 .101

Subject Name

Subject I.D.

Operator Name: J.J.

Location

GS 1U Serial no: 185449
Version no: 5320

TEST RECORD 00699

Temp Date Time ^{s/} 2100

Air Blank:
08/08/20 08:54 .080
Calibration Check:
23 08/08/20 08:54 .099

Subject Name

Subject I.D.

Operator Name: J.J.

Location



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

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PERMIT
TYPE II
DANNY E WEST

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 11/5/2019

NUMBER 290267

EXPIRES 11/5/2021

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 660-0771 (6-10)

LAB-1 (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 WEST, DANNY
Permit No 290267
Date Issued 11/5/2019 **Date Expires** 11/5/2021