



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 108269	PRINTER SN 099.3586.809	DATE OF INSPECTION 09/04/2020
-----------------------------	----------------------------	----------------------------------

LOCATION OF INSTRUMENT (STREET AND CITY) Zone D-14 / Cassville, MO	TIME OF INSPECTION 10:55 pm
---	--------------------------------

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 checked="" type="checkbox"/> SIMULATOR SOLUTION	<input type="checkbox"/> COMPRESSED ETHANOL-GAS MIXTURE
--	---

<input checked="" type="checkbox"/> STANDARD SUPPLIER RepCo Marketing, Inc.	LOT # 19001	EXP. DATE 03/12/2021
---	-------------	----------------------

<input checked="" type="checkbox"/> SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.02	SIMULATOR SN MP2467	SIMULATOR EXP DATE 01/07/2021
--	---------------------	-------------------------------

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 ← 0.101%	TEST 2 ← 0.101%	TEST 3 ← 0.101%
-----------------	-----------------	-----------------

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
----------	---	---------	---	-----------	---	-----------	---	-----------	---	------------	---

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).

Set clock.
New solution was added to the simulator and the AS-IV was calibrated.

INSPECTING OFFICER

SIGNATURE D.R. Hukill #383	PRINT NAME Tpr. D.R. Hukill / #383
-------------------------------	---------------------------------------

TYPE II PERMIT NUMBER/EXPIRATION DATE 290043 / 02/26/2021	TELEPHONE NUMBER (417) 895-6868
--	------------------------------------

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: 108269
Version no: 532B

TEST RECORD 00544 s/
Temp Date Time 210L

Air Blank: 09/04/20 11:09 .000
Calibration Check: 23 09/04/20 11:09 .101

Subject Name

Maint

Subject I.D.

Test # 1

Operator Name, I.D.

Tpr. D. Hukill #383

Location

Zone D-14

Cassville

AS IV Serial no: 108269
Version no: 532B

TEST RECORD 00545 s/
Temp Date Time 210L

Air Blank: 09/04/20 11:11 .000
Calibration Check: 24 09/04/20 11:11 .101

Subject Name

Maint

Subject I.D.

Test # 2

Operator Name, I.D.

Tpr. D. Hukill #383

Location

Zone D-14

Cassville

AS IV Serial no: 108269
Version no: 532B

TEST RECORD 00546 s/
Temp Date Time 210L

Air Blank: 09/04/20 11:14 .000
Calibration Check: 24 09/04/20 11:14 .101

Subject Name

Maint

Subject I.D.

Test # 3

Operator Name, I.D.

Tpr. D. Hukill #383

Location

Zone D-14

Cassville

AS IV Serial no: 108269
Version no: 532B

TEST RECORD 00547 s/
Temp Date Time 210L

UBID: RFI
12 09/04/20 11:16

Subject Name

Maint

Subject I.D.

RF I test

Operator Name, I.D.

Tpr. D. Hukill #383

Location

Zone D-14

Cassville

AS IV Serial no: 108269
Version no: 532B

TEST RECORD 00543

Temp Date Time 210L

Air Blank: 09/04/20 11:05 .000

Calibration: 23 09/04/20 11:05 .100

Subject Name

Calibration

Subject I.D.

.100 solution

Operator Name, I.D.

Tpr. D. Hukill #383

Location

Zone D-14

Cassville

CERTIFICATE OF ANALYSIS**MANUFACTURER AND SUPPLIER: RepCo Marketing Co.****LOT NUMBER: 19001****EXPIRATION DATE: March 12, 2021 at 11:59 p.m.**

RepCo Marketing Co. certifies the following:

RepCo Marketing Co. prepared, tested and supplied Lot Number 19001 of Alcohol Certified Solution for simulators. This solution was manufactured and tested by RepCo Marketing Co., with confirmation by accredited institution, Data Resources Inc., using NIST standards. Random samples were analyzed by Data Resources Inc. utilizing a gas chromatograph and found to contain .1210 gms/dl +/- .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 March 13, 2019
The expiration date for this lot number is March 12, 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.



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

2

PERMIT
TYPE II
DARWIN R HUKILL

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 2/26/2019

NUMBER 290043

EXPIRES 2/26/2021

MO 580-0771 (6-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

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 HUKILL, DARWIN
 Permit No 290043
 Date Issued 2/26/2019 Date Expires 2/26/2021

