



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 111766	PRINTER SN 09B.3589.48	DATE OF INSPECTION 1-12-2020
LOCATION OF INSTRUMENT (STREET AND CITY) 1915 W. Arrow St Marshall, Mo 65340		TIME OF INSPECTION 1635

**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 # AG912204 EXP. DATE 05-02-2021

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 ← 0.100      TEST 2 ← 0.101      TEST 3 ← 0.105

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)	2	(.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).

**INSPECTING OFFICER**

SIGNATURE 	PRINT NAME Richard Kendall
TYPE II PERMIT NUMBER/EXPIRATION DATE 280261/ 08-29-2020	TELEPHONE NUMBER 660-886-5511

**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: 111766  
Version no: 532B

TEST RECORD 00142

Temp	Date	Time	s/	210L
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Air Blank:  
01/12/20 17:42 .000  
Calibration Check:  
20 01/12/20 17:42 .100

Subject Name

TEST 1

Subject I.D.

TEST 1

Operator Name, I.D.

RICHARD KENDALL 280261

Location

1915 W. ARROW

SCSD

AS IV Serial no: 111766  
Version no: 532B

TEST RECORD 00143

Temp	Date	Time	s/	210L
------	------	------	----	------

Air Blank:  
01/12/20 17:43 .000  
Calibration Check:  
21 01/12/20 17:43 .101

Subject Name

TEST 2

Subject I.D.

TEST 2

Operator Name, I.D.

RICHARD KENDALL 280261

Location

1915 W. ARROW

SCSD

AS IV Serial no: 111766  
Version no: 532B

TEST RECORD 00144

Temp	Date	Time	s/	210L
------	------	------	----	------

Air Blank:  
01/12/20 17:44 .000  
Calibration Check:  
21 01/12/20 17:44 .105

Subject Name

TEST 3

Subject I.D.

TEST 3

Operator Name, I.D.

RICHARD KENDALL 280261

Location

1915 W. ARROW

SCSD

AS IV Serial no: 111766  
Version no: 532B

TEST RECORD 00147

Temp	Date	Time	s/	210L
------	------	------	----	------

VOID: RFI  
12 01/12/20 17:49

Subject Name

RFI TEST

Subject I.D.

RFI TEST

Operator Name, I.D.

RICHARD KENDALL 280261

Location

1915 W. ARROW

SCSD

AS IV Serial no: 111766  
Version no: 532B

TEST RECORD 00148

Temp	Date	Time	s/	210L
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Air Blank:  
01/12/20 17:51 .000  
Subject Test: Auto  
24 01/12/20 17:51 .000

Subject Name

RICHARD KENDALL

Subject I.D.

RICHARD KENDALL

Operator Name, I.D.

RICHARD KENDALL 280261

Location

1915 W. ARROW

SCSD







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

2

**PERMIT  
 TYPE II**

**RICHARD L. KENDALL**

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 8/29/2018

NUMBER 280261

EXPIRES 8/29/2020

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** KENDALL, RICHARD  
**Permit No** 280261  
**Date Issued** 8/29/2018 **Date Expires** 8/29/2020

