



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
 STATE PUBLIC HEALTH LABORATORY  
**ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT**

RECEIVED  
 BY: Tracy Crowe at 8:48 am, 09/19/20

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 111779	PRINTER SN 09B.3589.547	DATE OF INSPECTION 09/19/2020
LOCATION OF INSTRUMENT (STREET AND CITY) Stone County Jail Galena MO		TIME OF INSPECTION 2057

**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 Guth LOT # 20190 EXP. DATE 04/06/2022
- SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIMULATOR SN SD2282 SIMULATOR EXP DATE 11/20/2020

- 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  .095	TEST 2  .097	TEST 3  .098
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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) 0	(.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).  
 Monthly Maint.

**INSPECTING OFFICER**

SIGNATURE 	PRINT NAME Sgt. Mark Rinker
TYPE II PERMIT NUMBER/EXPIRATION DATE 200156 / 04/10/2022	TELEPHONE NUMBER (417) 357-2044

**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

SELF

TEST 1

TEST 2

B

AS IV Serial no: 111779  
Version no: 532B

AS IV Serial no: 111779  
Version no: 532B

AS IV Serial no: 111779  
Version no: 532B

TEST RECORD 00324

TEST RECORD 00325

TEST RECORD 00326

Temp Date Time 21BL

Temp Date Time 21BL

Temp Date Time 21BL

Air Blank:  
09/19/20 20:52 .000  
Subject Test: Auto  
19 09/19/20 20:52 .000

Air Blank:  
09/19/20 20:57 .000  
Calibration Check:  
19 09/19/20 20:57 .000

Air Blank:  
09/19/20 21:00 .000  
Calibration Check:  
19 09/19/20 21:00 .000

Subject Name

Subject Name

Subject Name

SELF

TEST 1

TEST 2

Subject I.D.

Subject I.D.

Subject I.D.

MONTHLY MAINT

MONTHLY MAINT

MONTHLY MAINT

Operator Name, I.D.

Operator Name, I.D.

Operator Name, I.D.

MARK RINKER 200152

MARK RINKER 200152

MARK RINKER 200152

Location

Location

Location

STONE CO JAIL

STONE CO JAIL

STONE CO JAIL

TEST 3

AS IV Serial no: 111779  
Version no: 532B

AS IV Serial no: 111779  
Version no: 532B

TEST RECORD 00327

TEST RECORD 00328

Temp Date Time 21BL

Temp Date Time 21BL

Air Blank:  
09/19/20 21:03 .000  
Subject Test: Auto  
19 09/19/20 21:03 .000

Air Blank:  
19 09/19/20 21:07

Subject Name

Subject Name

TEST 3

RFI TEST

9/19/20

Subject I.D.

Subject I.D.

MONTHLY MAINT

MONTHLY MAINT

MONTHLY MAINT

Operator Name, I.D.

Operator Name, I.D.

STONE CO SHERIFF'S OFFICE

MARK RINKER 200152

MARK RINKER 200152

SGT. MARK RINKER

Location

Location

STONE CO JAIL

STONE CO JAIL

PERMIT # 200152

Exp DATE 4/10/22



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 111762	PRINTER SN 09B.3589.487	DATE OF INSPECTION 09/19/2020
LOCATION OF INSTRUMENT (STREET AND CITY) Stone County Jail Galena MO		TIME OF INSPECTION 2:15

**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)
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- PRINTER WORKING PROPERLY
- TIME AND DATE DISPLAYING PROPERLY

**BREATH ALCOHOL ACCURACY STANDARDS**

- SIMULATOR SOLUTION  COMPRESSED ETHANOL-GAS MIXTURE
- STANDARD SUPPLIER Guth LOT # 20190 EXP. DATE 04/06/2022
- SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIMULATOR SN SD2282 SIMULATOR EXP DATE 11/20/2020

- CALIBRATION CHECK – (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)  
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- 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  .105	TEST 2  .105	TEST 3  .105
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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) 0	(.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).  
Monthly Maint.

**INSPECTING OFFICER**

SIGNATURE 	PRINT NAME Sgt. Mark Rinker
TYPE / PERMIT NUMBER / EXPIRATION DATE 200156 / 04/10/2022	TELEPHONE NUMBER (417) 357-2044

**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



Self

AS IV Serial no: 111762  
Version no: 532B

TEST RECORD 00247

Temp	Date	Time	s/210L
Air Blank:			
	09/19/20	21:12	.000
Subject Test: Auto			
	19 09/19/20	21:12	.000

Subject Name

SELF TEST  
Subject I.D.

MONTHLY MAINT  
Operator Name, I.D.

MARK RINKER 200152  
Location

STONE CO JAIL

TEST 1

AS IV Serial no: 111762  
Version no: 532B

TEST RECORD 00248

Temp	Date	Time	s/210L
Air Blank:			
	09/19/20	21:15	.000
Calibration Check:			
	19 09/19/20	21:15	.105

Subject Name

TEST 1  
Subject I.D.

MONTHLY MAINT  
Operator Name, I.D.

MARK RINKER 200152  
~~MARK RINKER 200152~~  
Location

STONE CO JAIL

TEST 2

AS IV Serial no: 111762  
Version no: 532B

TEST RECORD 00249

Temp	Date	Time	s/210L
Air Blank:			
	09/19/20	21:20	.000
Calibration Check:			
	20 09/19/20	21:20	.105

Subject Name

TEST 2  
Subject I.D.

MONTHLY MAINT  
Operator Name, I.D.

MARK RINKER 200152  
Location

STONE CO JAIL

TEST 3

AS IV Serial no: 111762  
Version no: 532B

TEST RECORD 00250

Temp	Date	Time	s/210L
Air Blank:			
	09/19/20	21:22	.000
Calibration Check:			
	21 09/19/20	21:22	.105

Subject Name

TEST 3  
Subject I.D.

MONTHLY MAINT  
Operator Name, I.D.

MARK RINKER 200152  
Location

STONE CO JAIL

RFE

AS IV Serial no: 111762  
Version no: 532B

TEST RECORD 00252

Temp	Date	Time	s/210L
VOID: RFI			
	12 09/19/20	21:25	

Subject Name

RFE TEST  
Subject I.D.

MONTHLY MAINT  
Operator Name, I.D.

MARK RINKER 200152  
Location

STONE CO JAIL

9/19/20

MONTHLY MAINT  
STONE CO SHERIFF'S OFFICE  
SER MARK RINKER  
PERMIT # 200152  
EXP DATE 4/10/22



**GUTH LABORATORIES, INC.**

590 NORTH 67th STREET • HARRISBURG, PA 17111- 4511 • TELEPHONE: 717-564-5470

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## CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **20190** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **April 8, 2020**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.1206%** (w/vol) ethyl alcohol. The expiration date for this lot number is **April 6, 2022** at 11:59 PM.

When used in a calibrated Simulator, operating at



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

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**PERMIT  
 TYPE II**

**MARK RINKER**

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 4/10/2020

NUMBER 200156

EXPIRES 4/10/2022

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

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 RINKER, MARK  
 Permit No 200156  
 Date Issued 4/10/2020 Date Expires 4/10/2022