



**ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT**

RECEIVED  
By: Tracy Crowe at 8:05am, Aug 04, 2021

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 030809	NAME OF AGENCY OVERLAND POLICE DEPARTMENT	DATE OF INSPECTION 08/03/2021
LOCATION OF INSTRUMENT (STREET AND CITY) 2410 Goodale Ave. Overland, MO 63114		TIME OF INSPECTION 11:06 am

**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 Inc. LOT # AG007603 EXP. DATE 11/16/2021

SIMULATOR TEMPERATURE (34°C ± 0.2°C) \_\_\_\_\_ SIM. SN \_\_\_\_\_ SIM. NIST 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  .097	TEST 2  .097	TEST 3  .097
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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)	(.05-.09)	(.10-.14)	(.15-.19)	(OVER .19)
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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 Enes Gracanin
TYPE II PERMIT NUMBER/EXPIRATION DATE 200050 01/10/2022	TELEPHONE NUMBER (314) 428-1221

**Return completed report to the:** Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office by mail, fax, or email.

AS IV Serial no: 030809  
Version no: 532B

TEST RECORD 01348 s/

Temp Date Time 210L

VOID: RFI  
12 08/03/21 11:21

Subject Name  
RFI Test

Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 030809  
Version no: 532B

TEST RECORD 01347 s/

Temp Date Time 210L

Air Blank:  
08/03/21 11:19 .000

Calibration Check:  
25 08/03/21 11:19 .097

Subject Name  
Test #3

Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 030809  
Version no: 532B

TEST RECORD 01346 s/

Temp Date Time 210L

Air Blank:  
08/03/21 11:17 .000

Calibration Check:  
24 08/03/21 11:17 .097

Subject Name  
Test #2

Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 030809  
Version no: 532B

TEST RECORD 01345 s/

Temp Date Time 210L

Air Blank:  
08/03/21 11:16 .000

Calibration Check:  
24 08/03/21 11:16 .097

Subject Name  
Test #1

Subject I.D.

Operator Name, I.D.

Location





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

2

PERMIT  
 TYPE II  
 ENES GRACANIN

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 1/10/2020

NUMBER 200050

EXPIRES 1/10/2022

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 GRACANIN, ENES  
 Permit No 200050  
 Date Issued 1/10/2020    Date Expires 1/10/2022