



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 042311	NAME OF AGENCY Saint Charles County Police Department	DATE OF INSPECTION 02/15/2021
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LOCATION OF INSTRUMENT (STREET AND CITY) 101 Sheriff Dierker Court, O'Fallon, Missouri 63366	TIME OF INSPECTION 6:13 am
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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 type="checkbox"/> SIMULATOR SOLUTION	<input checked="" type="checkbox"/> COMPRESSED ETHANOL-GAS MIXTURE
<input checked="" type="checkbox"/> STANDARD SUPPLIER <u>Intoximeters</u> LOT # <u>AG003405</u> EXP. DATE <u>10/03/2021</u>	
<input type="checkbox"/> 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 ➔ .084	TEST 2 ➔ .083	TEST 3 ➔ .083
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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	(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).

INSPECTING OFFICER

SIGNATURE 	PRINT NAME Scott Ronald
TYPE II PERMIT NUMBER/EXPIRATION DATE 200202 / July 8, 2022	TELEPHONE NUMBER (636) 949-3000

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: 042311
Version no: 532C

TEST RECORD 00162

Temp Date Time ^{s/} 210L

Air Blank:
02/15/21 06:13 .000
Calibration Check:
21 02/15/21 06:13 .084

Subject Name

TEST

Subject I.D.

#1

Operator Name, I.D.

RONALD 200202

Location

SCCPD

AS IV Serial no: 042311
Version no: 532C

TEST RECORD 00163

Temp Date Time ^{s/} 210L

Air Blank:
02/15/21 06:15 .000
Calibration Check:
22 02/15/21 06:15 .083

Subject Name

TEST

Subject I.D.

#2

Operator Name, I.D.

RONALD 200202

Location

SCCPD

AS IV Serial no: 042311
Version no: 532C

TEST RECORD 00164

Temp Date Time ^{s/} 210L

Air Blank:
02/15/21 06:16 .000
Calibration Check:
23 02/15/21 06:16 .083

Subject Name

TEST

Subject I.D.

#3

Operator Name, I.D.

RONALD 200202

Location

SCCPD

AS IV Serial no: 042311
Version no: 532C

TEST RECORD 00165

Temp Date Time ^{s/} 210L

VOID: RFI
12 02/15/21 06:18

Subject Name

TEST VOID

Subject I.D.

RFI

Operator Name, I.D.

RONALD 200202

Location

SCCPD

AS IV Serial no: 042311
Version no: 532C

TEST RECORD 00166

Temp Date Time ^{s/} 210L

Air Blank:
02/15/21 06:19 .000
Subject Test: Auto
24 02/15/21 06:19 .000

Subject Name

SELF TEST

Subject I.D.

#1

Operator Name, I.D.

RONALD 200202

Location

SCCPD



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



PERMIT
TYPE II
SCOTT RONALD

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 7/8/2020

NUMBER 200202

EXPIRES 7/8/2022

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

 **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 RONALD, SCOTT
 Permit No 200202
 Date Issued 7/8/2020 Date Expires 7/8/2022

