



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

RECEIVED
 By Tracy Crews at 1:29 pm, Sep 24, 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 087959	NAME OF AGENCY Saint Charles County Police Department	DATE OF INSPECTION 09/21/2021
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LOCATION OF INSTRUMENT (STREET AND CITY) 101 Sheriff Dierker Court, O'Fallon, Missouri 63366	TIME OF INSPECTION 12:37 pm
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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>AG109701</u> EXP. DATE <u>04/07/2023</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 ● .077	TEST 2 ● .077	TEST 3 ● .077
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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 Cpt. [Signature] 663	PRINT NAME Mike Johnson
TYPE II PERMIT NUMBER/EXPIRATION DATE 200198 / 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: 087959
Version no: 532B

TEST RECORD 00301

Temp Date Time %/ 210L

Air Blank:
09/21/21 12:37 .000
Calibration Check:
22 09/21/21 12:37 .077

Subject Name

Test #1

Subject I.D.

Operator Name, I.D.

Cpl. Johnson 200198

Location

SCCPD

AS IV Serial no: 087959
Version no: 532B

TEST RECORD 00302

Temp Date Time %/ 210L

Air Blank:
09/21/21 12:39 .000
Calibration Check:
23 09/21/21 12:39 .077

Subject Name

Test #2

Subject I.D.

Operator Name, I.D.

Cpl. Johnson 200198

Location

SCCPD

AS IV Serial no: 087959
Version no: 532B

TEST RECORD 00303

Temp Date Time %/ 210L

Air Blank:
09/21/21 12:41 .000
Calibration Check:
24 09/21/21 12:41 .077

Subject Name

Test #3

Subject I.D.

Operator Name, I.D.

Cpl. Johnson 200198

Location

SCCPD

AS IV Serial no: 087959
Version no: 532B

TEST RECORD 00304

Temp Date Time %/ 210L

VOID: RFI
12 09/21/21 12:41

Subject Name

RFI Test

Subject I.D.

Operator Name, I.D.

Cpl. Johnson 200198

Location

SCCPD

AS IV Serial no: 087959
Version no: 532B

TEST RECORD 00305

Temp Date Time %/ 210L

Air Blank:
09/21/21 12:43 .000
Subject Test: Auto
25 09/21/21 12:43 .000

Subject Name

Self-Test

Subject I.D.

Operator Name, I.D.

Cpl. Johnson 200198

Location

SCCPD



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

2

PERMIT
TYPE II
MIKE JOHNSON

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 200198

EXPIRES 7/8/2022

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 JOHNSON, MIKE
 Permit No 200198
 Date Issued 7/8/2020 Date Expires 7/8/2022

