



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 097440	PRINTER SN 096.3580.989	DATE OF INSPECTION 05/26/2021
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LOCATION OF INSTRUMENT (STREET AND CITY) Zone 21 Office - Port of Kimberling Hotel - Kimberling City, MO	TIME OF INSPECTION 12:00 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.

<input checked="" type="checkbox"/> DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)
<input checked="" type="checkbox"/> TEMPERATURE OF ALCO SENSOR (10°C - 40°C)
<input checked="" type="checkbox"/> PRINTER WORKING PROPERLY
<input checked="" type="checkbox"/> TIME AND DATE DISPLAYING PROPERLY

BREATH ALCOHOL ACCURACY STANDARDS

<input checked="" type="checkbox"/> SIMULATOR SOLUTION	<input type="checkbox"/> COMPRESSED ETHANOL-GAS MIXTURE
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<input checked="" type="checkbox"/> STANDARD SUPPLIER <u>Repco Marketing</u> LOT # <u>19002</u> EXP. DATE <u>10/16/2021</u>

<input checked="" type="checkbox"/> SIMULATOR TEMPERATURE (34°C ± 0.2°C) <u>34.00</u> SIMULATOR SN <u>MP2307</u> SIMULATOR EXP DATE <u>01/07/2022</u>

<input checked="" type="checkbox"/> 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)
<input checked="" type="checkbox"/> 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE
<input type="checkbox"/> 0.080% STANDARD - MUST READ BETWEEN 0.076% and 0.084% INCLUSIVE
<input type="checkbox"/> 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE

TEST 1 ← .095	TEST 2 ← .097	TEST 3 ← .096
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<input checked="" type="checkbox"/> RFI DETECTOR OPERATING
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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).

This instrument is operating within Dept. of Health standards. .10 Solution used.

INSPECTING OFFICER

SIGNATURE <i>Mark D. Green</i>	PRINT NAME Mark D. Green
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TYPE II PERMIT NUMBER/EXPIRATION DATE 290244 10-16-2021	TELEPHONE NUMBER (417) 895-6868
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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 10 Serial no: 097440
Version no: 532B

TEST RECORD 00374
Temp Date Time 210L
s/

NOID: RPI
12 05/26/21 12:11

Subject Name
M.D. GREEN

Subject I.D.
940

Operator Name, I.D.
M.D. Green 940

Location
Zone Office

MONTHLY MAINT

AS 10 Serial no: 097440
Version no: 532B

TEST RECORD 00373
Temp Date Time 210L
s/

Air Blank:
05/26/21 12:10 .000

Calibration Check:
26 05/26/21 12:10 .096

Subject Name
M.D. GREEN

Subject I.D.
940

Operator Name, I.D.
M.D. Green 940

Location
Zone Office

MONTHLY MAINT

AS 10 Serial no: 097440
Version no: 532B

TEST RECORD - REPRINT
TEST RECORD 00372
Temp Date Time 210L
s/

Air Blank:
05/26/21 12:07 .000

Calibration Check:
-26 05/26/21 12:07 .097

Subject Name
M.D. GREEN

Subject I.D.
940

Operator Name, I.D.
M.D. Green 940

Location
Zone Office

MONTHLY MAINT

AS 10 Serial no: 097440
Version no: 532B

TEST RECORD 00371
Temp Date Time 210L
s/

Air Blank:
05/26/21 12:01 .000

Calibration Check:
25 05/26/21 12:01 .095

Subject Name
M.D. GREEN

Subject I.D.
940

Operator Name, I.D.
M.D. Green 940

Location
Zone Office

MONTHLY MAINT



RepCo Marketing Co
3101-188 Stony Brook Drive
Raleigh, NC 27604
888-828-0227

CERTIFICATE OF ANALYSIS

MANUFACTURER AND SUPPLIER: RepCo Marketing Co.
LOT NUMBER: 19002
EXPIRATION DATE: October 16, 2021 at 11:59 p.m.

RepCo Marketing Co. certifies the following:


RepCo Marketing Co. prepared, tested and supplied Lot Number 19002 of Alcohol Certified Solution for simulators. This solution was manufactured and tested by RepCo Marketing Co., with confirmation by ISO 17025 and ISO 17034 accredited institution Alcohol Countermeasure Systems, using NIST standards. Random samples were analyzed by Alcohol Countermeasure Systems utilizing a gas chromatograph and found to contain .1231 gms/dl +/- .003 gms/dl wt/vol ethanol (95% Confidence).

The alcohol and distilled water used in the solution were found to be free of any interfering substance.

This solution will produce a vapor alcohol value of .100 +/- 3% gms/210L breath when heated to 34 Degrees Celsius +/- 0.2 Degrees Celsius in a simulator (95% Confidence).

The date of manufacture for this lot number is October 17, 2019 The expiration date for this lot number is October 16, 2021 at 11:59 p.m.

This document is a true representation of the original Certificate of Analysis.


Alma Palmer, Operations Manager
RepCo Marketing Co.



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

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PERMIT
TYPE II
MARK D GREEN

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 DMT

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 10/16/2019

NUMBER 290244

EXPIRES 10/16/2021

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MC 550-0771 (6-10)

LFB-4 (10-1)

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 GREEN, MARK
Permit No 290244
Date Issued 10/16/2019 Date Expires 10/16/2021