

RECEIVED

By Tracy Crews at 8:55 am, Nov 16, 2021

001/005



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 102458 093.3578.252	NAME OF AGENCY Brookfield Police Dept.	DATE OF INSPECTION 11/16/2021
LOCATION OF INSTRUMENT (STREET AND CITY) 116 W. Brooks St. Brookfield, MO 64628		TIME OF INSPECTION 7:04 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 RepCo LOT # 21001 EXP. DATE 06/16/2023

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIM. SN SD2763 SIM. NIST EXP DATE 01/07/2022

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 → 0.099

TEST 2 → 0.100

TEST 3 → 0.099

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)	1	(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 meets Department of Health standards.

INSPECTING OFFICER

SIGNATURE

PRINT NAME
Stuart HughesTYPE II PERMIT NUMBER/EXPIRATION DATE
200188 06/15/2022TELEPHONE NUMBER
(660) 258-3385

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

AS 19 Serial no: 182458
Version no: 532B

TEST RECORD 00896

Temp Date Time 210L

Air Blank:

11/16/21 07:14 .000

Calibration Check:

23 11/16/21 07:14 .099

Subject Name

Simulator

Subject I.D.

Operator Name: I.D.

S. Hughes 200188

Location

BPD

AS 19 Serial no: 182458
Version no: 532B

TEST RECORD 00897

Temp Date Time 210L

Air Blank:

11/16/21 07:17 .000

Calibration Check:

24 11/16/21 07:17 .100

Subject Name

Simulator

Subject I.D.

Operator Name: I.D.

S. Hughes 200188

Location

BPD

AS 19 Serial no: 182458
Version no: 532B

TEST RECORD 00898

Temp Date Time 210L

Air Blank:

11/16/21 07:20 .000

Calibration Check:

25 11/16/21 07:20 .099

Subject Name

Simulator

Subject I.D.

Operator Name: I.D.

S. Hughes 200188

Location

BPD

AS 19 Serial no: 182458
Version no: 532B

TEST RECORD 00899

Temp Date Time 210L

NOTE: PE1

12 11/16/21 07:22

Subject Name

Simulator

Subject I.D.

Operator Name: I.D.

S. Hughes 200188

Location

BPD



Missouri Department of Health and Senior Services
P.O. Box 170, Jefferson City, MO 64503-0170 Phone: 660-252-6300 FAX: 660-252-6310
RELAY MISSOURI for Hearing and Speech Impaired 1-800-368-2868 VOICEMAIL 800-735-2460
Kathleen W. Williams, MD, FACOG
Director

Missouri Department of Health and Senior Services
Lawrence

SIMULATOR CERTIFICATION REPORT

SIMULATOR INFORMATION

Simulator Serial Number: SD2763 Manufacturer: Gosh
Model Number: 10-1D
Agency: BROOKFIELD PD
Agency Address: 116 W BROOKS, BROOKFIELD, MO 64620

NIST THERMOMETER INFORMATION

Serial Number: 17KMM00690 Bias: 0.00
Uncertainty: 0.02
Date of Certification: 11/6/2020 Date of Expiration: 11/6/2021

ENVIRONMENTAL CONDITIONS

The environmental conditions during testing are within the tolerances of DHSS BAP method 3.

VERIFICATION RESULTS

<u>Simulator Average</u>	<u>NIST Average</u>	<u>Combined Uncertainty</u>
34.00	34.02	.04

The combined uncertainty is calculated with a k = 2 value.

ADJUSTMENT RESULTS

No adjustment was needed.

Date of testing: 1/7/2021
Certification Expiration: 1/7/2022
Simulator testing technician: D. DEBOARD

Notes on Condition: none

Deviation(s) from method: none

DHSS BAP Scientist Approving: B. LUTMER
Certification No: SD2763_172021

X
DHSS BAP Scientist Approving

RepCo Marketing Co
3101-188 Stony Brook Drive
Raleigh, NC 27604
919-876-5480

CERTIFICATE OF ANALYSIS

MANUFACTURER AND SUPPLIER: RepCo Marketing Co.
LOT NUMBER: 21001
EXPIRATION DATE: June 16, 2023 at 11:59 p.m.

RepCo Marketing Co. certifies the following:

RepCo Marketing Co. prepared, tested and supplied Lot Number 21001 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 .1222 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 June 17, 2021 The expiration date for this lot number is June 16, 2023 at 11:59 p.m.

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



Alma Palmer, Operations Manager
RepCo Marketing Co.

STUART W HUGHES

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, 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 209.020 through 209.077, RSMo and 209.111 through 209.119 RSMo.

6/15/2020

200188

6/15/2022

[Signature]
DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

[Signature]
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 **HUGHES, STUART**
 Permit No **200188**
 Date Issued **6/15/2020** Date Expires **6/15/2022**

