



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 107982	NAME OF AGENCY MSHP	DATE OF INSPECTION 04/29/2021
LOCATION OF INSTRUMENT (STREET AND CITY) 201 S. Franklin Street, Kirksville, MO 63501		TIME OF INSPECTION 3:08 pm

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
<input checked="" type="checkbox"/> STANDARD SUPPLIER <u>RepCo Marketing Inc.</u> LOT # <u>20001</u> EXP. DATE <u>10/07/2022</u>	
<input checked="" type="checkbox"/> SIMULATOR TEMPERATURE (34°C ± 0.2°C) <u>34.0</u> SIM. SN <u>MP2519</u> SIM. NIST EXP DATE <u>05/05/2021</u>	

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 ← 0.102	TEST 2 ← 0.102	TEST 3 ← 0.102
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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)	1	(.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 Cpl G. L. Gaines, #801
TYPE II PERMIT NUMBER/EXPIRATION DATE 200091 / 2/18/2022	TELEPHONE NUMBER (660) 385-2132

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: 107982
Version no: 532B

TEST RECORD 00666
Temp Date Time 210L

Air Blank:
04/29/21 15:09 .000
Calibration Check:
22 04/29/21 15:09 .102

Subject Name
TEST #1
Subject I.D.

Operator Name, I.D.

COL. L. L. CANNES #2000091
Location

201 S. FRANKLIN ST.,

KIRKSVILLE, MO

 #001

AS IV Serial no: 107982
Version no: 532B

TEST RECORD 00667
Temp Date Time 210L

Air Blank:
04/29/21 15:13 .000
Calibration Check:
23 04/29/21 15:13 .102

Subject Name
TEST #2
Subject I.D.

Operator Name, I.D.

COL. L. L. CANNES #2000091
Location

201 S. FRANKLIN ST.,

KIRKSVILLE, MO

 #001

AS IV Serial no: 107982
Version no: 532B

TEST RECORD 00668
Temp Date Time 210L

Air Blank:
04/29/21 15:15 .000
Calibration Check:
23 04/29/21 15:15 .102

Subject Name
TEST #3
Subject I.D.

Operator Name, I.D.

COL. L. L. CANNES #2000091
Location

201 S. FRANKLIN ST.,

KIRKSVILLE, MO

 #001

AS IV Serial no: 107982
Version no: 532B

TEST RECORD 00669
Temp Date Time 210L

VOID: RFI
12 04/29/21 15:16

Subject Name
RFT
Subject I.D.

Operator Name, I.D.

COL. L. L. CANNES #2000091
Location

201 S. FRANKLIN ST.,

KIRKSVILLE, MO

 #001



SIMULATOR CERTIFICATION REPORT

SIMULATOR INFORMATION

Simulator Serial Number: MP2519 Manufacturer: Guth
 Model Number: 12V500
 Agency: MSHP (GHQ)
 Agency Address: 1510 E ELM ST, JEFFERSON CITY, MO 65101

NIST THERMOMETER INFORMATION

Serial Number: 307715 Bias: 0.00
 Uncertainty: 0.02
 Date of Certification: 9/2/2019 Date of Expiration: 9/2/2020

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	34.01	.03

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

ADJUSTMENT RESULTS

No adjustment was needed.

Date of testing: 5/5/2020
 Certification Expiration: 5/5/2021
 Simulator testing technician: J. CLEVELAND

Notes on Condition: none

Deviation(s) from method: none

DHSS BAP Scientist Approving: B. LUTMER
 Certification No: MP2519_552020

X *Brian Lutmer*

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: 20001
EXPIRATION DATE: October 7, 2022 at 11:59 p.m.

RepCo Marketing Co. certifies the following:

RepCo Marketing Co. prepared, tested and supplied Lot Number 20001 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 .1227 gms/dl +/-0.003 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 8, 2020 The expiration date for this lot number is October 7, 2022 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
GRAYDON L GAINES

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 2/18/2020

NUMBER 200091

EXPIRES 2/18/2022

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 GAINES, GRAYDON
 Permit No 200091
 Date Issued 2/18/2020 Date Expires 2/18/2022