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By Tracy Crews at 8:09 am, Apr 12, 2021



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 111331 NAME OF AGENCY Missouri State Highway Patrol DATE OF INSPECTION 04/05/2021

LOCATION OF INSTRUMENT (STREET AND CITY) 3131 E Kearney, Springfield, Missouri 65803 TIME OF INSPECTION 09:05

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.

- [X] DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)
- [X] TEMPERATURE OF ALCO SENSOR (10°C - 40°C)
- [X] PRINTER WORKING PROPERLY
- [X] TIME AND DATE DISPLAYING PROPERLY

BREATH ALCOHOL ACCURACY STANDARDS

[X] SIMULATOR SOLUTION [ ] COMPRESSED ETHANOL-GAS MIXTURE

[X] STANDARD SUPPLIER REPCO LOT # 19002 EXP. DATE 10/16/2021

[X] SIMULATOR TEMPERATURE (34°C ± 0.2°C) 33.97 SIM. SN MP2306 SIM. NIST EXP DATE 01/07/2022

[X] 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)  
[X] 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 ← .099 TEST 2 ← .102 TEST 3 ← .102

[X] 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-.04) (0.05-.09) (.10-.14) 1 (.15-.19) 2 (OVER .19) 1

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).

completed calibration/ changed time + 1 hour due to recent time change

INSPECTING OFFICER SIGNATURE [Signature] # 727 PRINT NAME D W Henley #727  
TYPE II PERMIT NUMBER/EXPIRATION DATE 200224 8/13/2022 TELEPHONE NUMBER ( 417 ) 895 - 6868

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: 111331  
Version no: 532B

TEST RECORD 00766

Temp	Date	Time	%
Air Blank:	04/05/21	09:24	.000
Calibration:	23 04/05/21	09:24	.100

Subject Name  
CALIBRATE  
Subject I.D.

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Operator Name, I.D.  
D W HENLEY # 727  
Location  
3131 E KEARNEY  
SPRINGFIELD, MO  
D. J. # 727

AS IV Serial no: 111331  
Version no: 532B

TEST RECORD 00767

Temp	Date	Time	%
Air Blank:	04/05/21	09:35	.000
Calibration Check:	23 04/05/21	09:35	.099

Subject Name  
TEST 1  
Subject I.D.

AS IV Serial no: 111331  
Version no: 532B

TEST RECORD 00768

Temp	Date	Time	%
Air Blank:	04/05/21	09:36	.000
Calibration Check:	23 04/05/21	09:36	.102

Subject Name  
TEST 2  
Subject I.D.

AS IV Serial no: 111331  
Version no: 532B

TEST RECORD 00769

Temp	Date	Time	%
Air Blank:	04/05/21	09:37	.000
Calibration Check:	23 04/05/21	09:37	.102

Subject Name  
TEST 3  
Subject I.D.

AS IV Serial no: 111331  
Version no: 532B

TEST RECORD 00770

Temp	Date	Time	%
VOID: RFI	12 04/05/21	09:38	

Subject Name  
RFI  
Subject I.D.

Operator Name, I.D.  
D W HENLEY # 727  
Location  
3131 E KEARNEY

Operator Name, I.D.  
D W HENLEY # 727  
Location  
3131 E KEARNEY

Operator Name, I.D.  
D W HENLEY # 727  
Location  
3131 E KEARNEY

Operator Name, I.D.  
D W HENLEY # 727  
Location  
3131 E KEARNEY

SPRINGFIELD, MO  
D. J. # 727

SPRINGFIELD, MO  
D. J. # 727

SPRINGFIELD, MO  
D. J. # 727

SPRINGFIELD, MO  
D. J. # 727



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**  
**DAVID W HENLEY, JR.**

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**

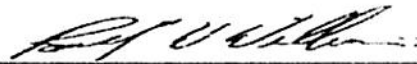
for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE 8/13/2020

  
 DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

NUMBER 200224

EXPIRES 8/13/2022

  
 DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580.0771 (5-10)

LAB-4 (R5-10)

 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 HENLEY, JR., DAVID  
 Permit No 200224  
 Date Issued 8/13/2020 Date Expires 8/13/2022

