



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 Nixa 107987 | PRINTER SN Nixa 099.3580.875 | DATE OF INSPECTION 03/27/2022 |
| LOCATION OF INSTRUMENT (STREET AND CITY) 715 W. Center Circle, Nixa | | TIME OF INSPECTION 8:36 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.

- 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 Marketing Inc LOT # 21001 EXP. DATE 06/16/2023
- SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIMULATOR SN MP5537 SIMULATOR EXP DATE 09/03/2022

- 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 .100 | TEST 2 .099 | TEST 3 .100 |
|--------------|--------------|--------------|

- 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 |
|----------|---|---------|---|-----------|---|-----------|---|-----------|---|------------|---|

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).

Meets or Exceeds Department of Health and Senior Services Rules and Regulations.

INSPECTING OFFICER

| | |
|--|------------------------------------|
| SIGNATURE | PRINT NAME Sgt R Seiner |
| TYPE II PERMIT NUMBER/EXPIRATION DATE 200203 07/30/2022 | TELEPHONE NUMBER (417) 725-2510 |

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



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

2


PERMIT
TYPE II
ROBERT A SEINER

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 7/30/2020


 DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

NUMBER 200216

EXPIRES 7/30/2022


 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 SEINER, ROBERT
 Permit No 200216
 Date Issued 7/30/2020 Date Expires 7/30/2022



Nixa Police Department

Calibration Check slip's

AS IV Serial no: 107987
Version no: 532B

TEST RECORD 01597

AS IV Serial no: 107987
Version no: 532B

TEST RECORD 01598

| Temp | Date | Time | g/ 210L |
|--------------------|----------|-------|------------|
| Air Blank: | | | |
| | 03/27/22 | 20:32 | .000 |
| Calibration Check: | | | |
| 23 | 03/27/22 | 20:32 | .100 |

Subject Name
TEST 1

Subject I.D.

Operator Name, I.D.
RSEINER 200203

Location
NIXA PD

AS IV Serial no: 107987
Version no: 532B

TEST RECORD 01599

| Temp | Date | Time | g/ 210L |
|--------------------|----------|-------|------------|
| Air Blank: | | | |
| | 03/27/22 | 20:34 | .000 |
| Calibration Check: | | | |
| 24 | 03/27/22 | 20:34 | .099 |

Subject Name
TEST 2

Subject I.D.

Operator Name, I.D.
RSEINER 200203

Location
NIXA PD

AS IV Serial no: 107987
Version no: 532B

TEST RECORD 01600

| Temp | Date | Time | g/ 210L |
|--------------------|----------|-------|------------|
| Air Blank: | | | |
| | 03/27/22 | 20:36 | .000 |
| Calibration Check: | | | |
| 25 | 03/27/22 | 20:36 | .100 |

Subject Name
TEST 3

Subject I.D.

Operator Name, I.D.
RSEINER 200203

Location
NIXA PD

Nixa Police Department

RFI Evidence slip

| | | | |
|-------------------------|------|------|------------|
| AS IV Serial no: 107987 | | | |
| Version no: 532B | | | |
| TEST RECORD 01602 | | | |
| Temp | Date | Time | s/ 210L |
| VOID: RFI | | | |
| 12 03/27/22 20:38 | | | |
| Subject Name | | | |
| RFI TEST | | | |
| Subject I.D. | | | |
| Operator Name, I.D. | | | |
| RSONER 200243 | | | |
| Location | | | |
| NIXA PD | | | |

Nixa Police Department

Blank (Zero) test Evidence slip

| | | |
|-------------------------|----------|------------|
| AS IV Serial no: 107987 | | |
| Version no: 532B | | |
| TEST RECORD 01601 | | |
| Temp | Date | Time 210L |
| ----- | | |
| Air Blank: | | |
| | 03/27/22 | 20:37 .000 |
| Calibration Check: | | |
| 26 | 03/27/22 | 20:37 .000 |
| ----- | | |
| Subject Name | | |
| BLANK TEST | | |
| ----- | | |
| Subject I.D. | | |
| | | |
| ----- | | |
| Operator Name, I.D. | | |
| RSEINER 200203 | | |
| ----- | | |
| Location | | |
| NIXA PD | | |
| ----- | | |