



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 11629	NAME OF AGENCY University of Missouri Police Department	DATE OF INSPECTION 07/30/2022
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LOCATION OF INSTRUMENT (STREET AND CITY) 901 Virginia Avenue, Columbia MO 65211	TIME OF INSPECTION 7:04 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.

- 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**

<input type="checkbox"/> SIMULATOR SOLUTION	<input checked="" type="checkbox"/> COMPRESSED ETHANOL-GAS MIXTURE
<input checked="" type="checkbox"/> STANDARD SUPPLIER <u>Intoximeters</u> LOT # <u>AG211002</u> EXP. DATE <u>04/20/2024</u>	
<input type="checkbox"/> SIMULATOR TEMPERATURE (34°C ± 0.2°C) _____ SIM. SN _____ SIM. NIST EXP DATE _____	

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 ← .083	TEST 2 ← .083	TEST 3 ← .082
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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	4	(0-.04)	0	(.05-.09)	3	(.10-.14)	4	(.15-.19)	3	(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).

Taken to MO Safety Center, new Printer issued.

**INSPECTING OFFICER**

SIGNATURE 	PRINT NAME Kevin Stroer
TYPE / PERMIT NUMBER / EXPIRATION DATE #220139 / Expires 05/11/2023	TELEPHONE NUMBER (573) 882-7202

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



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 STATE PUBLIC HEALTH LABORATORY  
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PRINTER WORKING PROPERLY

TIME AND DATE DISPLAYING PROPERLY

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SIMULATOR SOLUTION  COMPRESSED ETHANOL-GAS MIXTURE

STANDARD SUPPLIER Intoximeters LOT # AG211002 EXP. DATE 04/20/2024

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(573) 882-7202

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AS IV Serial no: 111629  
Version no: 532B

TEST RECORD 01272

Temp	Date	Time	g/ 21OL
Air Blank:			
	07/30/22	19:54	.000
Calibration Check:			
21	07/30/22	19:54	.083

Subject Name

Test Record

Subject I.D.

#1

Operator Name, I.D.

Kevin J. Stroer  
Permit # 220139

Location

901 Virginia Avenue,

Columbia, MO 65211

AS IV Serial no: 111629  
Version no: 532B

TEST RECORD 01273

Temp	Date	Time	g/ 21OL
Air Blank:			
	07/30/22	19:58	.000
Calibration Check:			
21	07/30/22	19:58	.083

Subject Name

Test Record

Subject I.D.

#2

Operator Name, I.D.

Kevin J. Stroer  
Permit # 220139

Location

901 Virginia Avenue,

Columbia, MO 65201

AS IV Serial no: 111629  
Version no: 532B

TEST RECORD 01274

Temp	Date	Time	g/ 21OL
Air Blank:			
	07/30/22	20:05	.000
Calibration Check:			
22	07/30/22	20:05	.082

Subject Name

Test Record

Subject I.D.

#3

Operator Name, I.D.

Kevin J. Stroer  
Permit # 220139

Location

901 Virginia Avenue

Columbia, MO 65211

AS IV Serial no: 111629  
Version no: 532B

TEST RECORD 01275

Temp	Date	Time	g/ 21OL
VOID: RFI			
12	07/30/22	20:07	

Subject Name

Test Record

Subject I.D.

RFI void

Operator Name, I.D.

Kevin J. Stroer  
Permit # 220139

Location

901 Virginia Avenue

Columbia, MO 65211





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



**PERMIT**  
**TYPE II**  
**KEVIN STROER**

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 5/11/2022

*Laura E. Way*

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

NUMBER 220139

*David J. Nicholson*

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

EXPIRES 5/11/2024

 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 STROER, KEVIN  
 Permit No 220139  
 Date Issued 5/11/2022 Date Expires 5/11/2024

