



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

RECEIVED

By Tracy Crews at 10:08 am, Jun 22, 2022

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 111636	NAME OF AGENCY Missouri State Highway Patrol	DATE OF INSPECTION 06/17/2022
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LOCATION OF INSTRUMENT (STREET AND CITY) Weigh Station A-3 West, Mayview, MO	TIME OF INSPECTION 8:49 am
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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**

☒ SIMULATOR SOLUTION ☐ COMPRESSED ETHANOL-GAS MIXTURE

☒ STANDARD SUPPLIER REPCO MARKETING CO LOT # 20001 EXP. DATE 10/07/2022

☒ SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.01 SIM. SN MP2327 SIM. NIST EXP DATE 12/29/2022

☒ 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 .097

TEST 2 .097

TEST 3 .096

☒ 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)

(.05-.09)

(.10-.14)

(.15-.19)

(OVER .19)

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

#1426

PRINT NAME

Nicholas A. Perez

TYPE II PERMIT NUMBER/EXPIRATION DATE

220137 05/11/2024

TELEPHONE NUMBER

(816) 622-0800

**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: 111636  
Version no: 582B

TEST RECORD 00581

Temp Date Time 210L

Air Blank:

06/17/22 20:38 .000

Calibration Check:

23 06/17/22 20:38 .097

Subject Name

TEST #1

Subject I.D.

Operator Name, I.D.

MA PEREZ 220137

Location

A-3 WEST

MAVUEW, MO

AS IV Serial no: 111636  
Version no: 102B

TEST RECORD 00582

Temp Date Time 210L

Air Blank:

06/17/22 20:38 .000

Calibration Check:

23 06/17/22 20:39 .097

Subject Name

TEST #2

Subject I.D.

Operator Name, I.D.

MA PEREZ 220137

Location

A-3 WEST

MAVUEW, MO

AS IV Serial no: 111636  
Version no: 102B

TEST RECORD 00583

Temp Date Time 210L

Air Blank:

06/17/22 20:41 .000

Calibration Check:

24 06/17/22 20:41 .086

Subject Name

TEST #3

Subject I.D.

Operator Name, I.D.

MA PEREZ 220137

Location

A-3 WEST

MAVUEW, MO

AS IV Serial no: 111636  
Version no: 102B

TEST RECORD 00584

Temp Date Time 210L

VOID: GPI

12 06/17/22 20:42

Subject Name

RFI TEST

Subject I.D.

Operator Name, I.D.

MA PEREZ 220137

Location

A-3 WEST

MAVUEW, MO



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

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**PERMIT**  
**TYPE II**  
**NICHOLAS A PEREZ**

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 5/11/2022

NUMBER 220137

EXPIRES 5/11/2024

*Laura P. Nagy*

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

*David L. Nicholson*

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 PEREZ, NICHOLAS

Permit No 220137

Date Issued 5/11/2022 Date Expires 5/11/2024

