



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
 STATE PUBLIC HEALTH LABORATORY  
**ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT**

**RECEIVED**  
 By Tracy Crews at 7:36 am, Apr 26, 2024

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 111667	NAME OF AGENCY Platte County Sheriff's Office	DATE OF INSPECTION 04/25/2024
LOCATION OF INSTRUMENT (STREET AND CITY) 11724 NW PLAZA CIR, KANSAS CITY, MO		TIME OF INSPECTION 7:36 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 Intoximeters, Inc. LOT # AG309501 EXP. DATE 04/05/2025
- 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  0.096	TEST 2  0.096	TEST 3  0.096
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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-.04)	(.05-.09)	(.10-.14)	(.15-.19)	(OVER .19)
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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).

<b>INSPECTING OFFICER</b>	
SIGNATURE 	PRINT NAME Daniel Gearhart
TYPE II PERMIT NUMBER/EXPIRATION DATE 240092/04-12-2026	TELEPHONE NUMBER (816) 858-3521

**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: 111667  
Version no: 532B

TEST RECORD 00892

Temp Date Time <sup>s/</sup> 210L

Air Blank:  
04/25/24 19:35 .000  
Calibration Check:  
22 04/25/24 19:35 .096

Subject Name

MAINTENANCE

Subject I.D.

TEST #1

Operator Name, I.D.

GEARHART 240092

Location

11724 NW PLAZA CIR

KCMO

AS IV Serial no: 111667  
Version no: 532B

TEST RECORD 00893

Temp Date Time <sup>s/</sup> 210L

Air Blank:  
04/25/24 19:37 .000  
Calibration Check:  
22 04/25/24 19:37 .096

Subject Name

MAINTENANCE

Subject I.D.

TEST #2

Operator Name, I.D.

GEARHART 240092

Location

11724 NW PLAZA CIR

KCMO

AS IV Serial no: 111667  
Version no: 532B

TEST RECORD 00894

Temp Date Time <sup>s/</sup> 210L

Air Blank:  
04/25/24 19:39 .000  
Calibration Check:  
23 04/25/24 19:39 .096

Subject Name

MAINTENANCE

Subject I.D.

TEST #3

Operator Name, I.D.

GEARHART 240092

Location

11724 NW PLAZA CIR

KCMO

AS IV Serial no: 111667  
Version no: 532B

TEST RECORD 00895

Temp Date Time <sup>s/</sup> 210L

VOID: RFI  
12 04/25/24 19:40

Subject Name

MAINTENANCE

Subject I.D.

TEST #4 - RFI

Operator Name, I.D.

GEARHART 240092

Location

11724 NW PLAZA CIR

KCMO





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



**PERMIT**  
**TYPE II**  
**DANIEL GEARHART**

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 4/12/2024

NUMBER 240092

EXPIRES 4/12/2026

*Mike Masson*

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

*Paula J. Nielson*

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** GEARHART, DANIEL  
**Permit No** 240092  
**Date Issued** 4/12/2024 **Date Expires** 4/12/2026

