MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

RECEIVED
By Carol Day at 2:05 pm, Jan 14, 2014

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	PRINTER SN	DATE OF INSPECTION
030791	84.9324.152	01/14/2014

LOCATION OF INSTRUMENT (STREET AND CITY)	TIME OF INSPECTION
Hazelwood PD BAT VAN	12:50 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 Guth Laboratories, INC. LOT # 13010 EXP. DATE 01/09/2015

☑ SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIMULATOR SN SD2742 SIMULATOR EXP DATE 11/14/2014

☑ 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 ☛ .100	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-.04)	(.05-.09)	(.10-.14)	(.15-.19)	(OVER .19)
0	0	0	0	0	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).

The instrument is operating within D.O.H.S.S. specifications. No repairs were made to the instrument. Guth Laboratories certified alcohol reference solution was used, which created a .10 vapor, bottle number 1615

INSPECTING OFFICER

SIGNATURE	PRINT NAME
▸	Anthony T. Kristo
TYPE II PERMIT NUMBER/EXPIRATION DATE	**TELEPHONE NUMBER**
230269, 11-26-2015	(314) 838-5000

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

AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER
services provided on a nondiscriminatory basis

AS IV Serial no: 030791
Version no: 004C

TEST RECORD 00698

Temp	Date	Time	s/ 210L
Air Blank:			
	01/14/14	12:50	.000
Calibration Check:			
21	01/14/14	12:50	.100

Subject Name
TEST

Subject I.D.
N/A

Operator Name, I.D.
KR3TO, 230269

Location
415 Elm Grove Ln
Hazelwood, MO 63042

AS IV Serial no: 030791
Version no: 004C

TEST RECORD 00701

Temp	Date	Time	s/ 210L
Void: RFI			
12	01/14/14	12:54	

Subject Name
TEST

Subject I.D.
N/A

Operator Name, I.D.
KR3TO, 230269

Location
415 Elm Grove Ln
Hazelwood, MO
63042

AS IV Serial no: 030791
Version no: 004C

TEST RECORD 00699

Temp	Date	Time	s/ 210L
Air Blank:			
	01/14/14	12:51	.000
Calibration Check:			
21	01/14/14	12:51	.100

Subject Name
TEST

Subject I.D.
N/A

Operator Name, I.D.
KR3TO, 230269

Location
415 Elm Grove Ln
Hazelwood, MO
63042

AS IV Serial no: 030791
Version no: 004C

TEST RECORD 00700

Temp	Date	Time	s/ 210L
Air Blank:			
	01/14/14	12:53	.000
Calibration Check:			
22	01/14/14	12:53	.100

Subject Name
TEST

Subject I.D.
N/A

Operator Name, I.D.
KR3TO, 230269

Location
415 Elm Grove Ln
Hazelwood, MO 63042

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	PRINTER SN	DATE OF INSPECTION
097410	096.3580.983	01/14/2014
LOCATION OF INSTRUMENT (STREET AND CITY)		TIME OF INSPECTION
415 Elm Grove Lane Hazelwood		1:00 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.

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- ☑ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)
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- ☑ TIME AND DATE DISPLAYING PROPERLY

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- ☐ 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 ☛ .104	TEST 2 ☛ .104	TEST 3 ☛ .102

☑ 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)
1	0	0	0	1	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).

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INSPECTING OFFICER

SIGNATURE	PRINT NAME
# 378	Anthony T. Kristo
TYPE II PERMIT NUMBER/EXPIRATION DATE	TELEPHONE NUMBER
230269, 11-26-2015	(314) 838-5000

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

AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER
services provided on a nondiscriminatory basis

AS IV Serial no: 097410
Version no: 004C

TEST RECORD 01150

Temp	Date	Time	% 210L
Air Blank:			
	01/14/14	13:03	.000
Calibration Check:			
22	01/14/14	13:03	.102

Subject Name
TST

Subject I.D.
n/A

Operator Name, I.D.
KRISTO, 230269

Location
415 ELMGROVE LN
Hazelwood, MO
63042

AS IV Serial no: 097410
Version no: 004C

TEST RECORD 01148

Temp	Date	Time	% 210L
Air Blank:			
	01/14/14	13:00	.000
Calibration Check:			
21	01/14/14	13:00	.104

Subject Name
Test

Subject I.D.
n/A

Operator Name, I.D.
230269, KRISTO

Location
415 ELM GROVE LN
Hazelwood, MO
63042

AS IV Serial no: 097410
Version no: 004C

TEST RECORD 01149

Temp	Date	Time	% 210L
Air Blank:			
	01/14/14	13:02	.000
Calibration Check:			
21	01/14/14	13:02	.104

Subject Name
TST

Subject I.D.
n/A

Operator Name, I.D.
KRISTO, 230269

Location
415 ELM GROVE LN
Hazelwood, MO
63042

AS IV Serial no: 097410
Version no: 004C

TEST RECORD 01151

Temp	Date	Time	% 210L
Void: RFI			
12	01/14/14	13:04	

Subject Name
TEST

Subject I.D.
n/A

Operator Name, I.D.
KRISTO 230269

Location
415 ELM GROVE LN
Hazelwood, MO
63042

STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES

BREATH ALCOHOL PROGRAM

2

PERMIT

TYPE II

ANTHONY T KRISTO

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

DATAMASTER, INTOX EC/IR II, ALCO-SENSOR IV W/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 11/26/2013

NUMBER 230269

EXPIRES 11/26/2015

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Gail Vasterling ,acting director

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

LAB-4 (R6-10)

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 KRISTO, ANTHONY

Permit No 230269

Date Issued 11/26/2013 **Date Expires** 11/26/2015

GUTH LABORATORIES, INC.
590 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **13010** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **January 14, 2013,** using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.1218%** (w/vol) ethyl alcohol. The expiration date for this lot number is **January 9, 2015** at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of **0.100 g/210L +/- 3%.**

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President
GUTH LABORATORIES, INC.

NIST Traceability:
Testing was conducted using Cerilliant Reference Standard lot number FN122211-02 whose values are traceable to NIST.
All balances are calibrated annually by an outside agency using NIST traceable weights.
Calibration verification is done prior to each use utilizing NIST traceable weights.