



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

RECEIVED
 By Carol Day at 12:59 pm, Jul 21, 2014

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 <i>087971</i>	PRINTER SN <i>08C-3556.195</i>	DATE OF INSPECTION <i>07/07/14</i>
LOCATION OF INSTRUMENT (STREET AND CITY) <i>330 N 2nd Street Poplar Bluff MO 63901</i>		TIME OF INSPECTION <i>0400</i>

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) *PASSED*
- TEMPERATURE OF ALCO SENSOR (10°C - 40°C) *19°C*
- PRINTER WORKING PROPERLY *PASSED*
- TIME AND DATE DISPLAYING PROPERLY *PASSED*

BREATH ALCOHOL ACCURACY STANDARDS

<input checked="" type="checkbox"/> SIMULATOR SOLUTION	<input type="checkbox"/> COMPRESSED ETHANOL-GAS MIXTURE
<input checked="" type="checkbox"/> STANDARD SUPPLIER <i>BOTH LAB</i>	LOT # <i>14110</i> EXP. DATE <i>05/01/16</i>
<input checked="" type="checkbox"/> SIMULATOR TEMPERATURE (34°C ± 0.2°C) <i>34°C</i>	SIMULATOR SN <i>SD2748</i> SIMULATOR EXP DATE <i>01/13/15</i>

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)

<input checked="" type="checkbox"/> 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE
<input type="checkbox"/> 0.080% STANDARD - MUST READ BETWEEN 0.076% and 0.084% INCLUSIVE
<input type="checkbox"/> 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE

TEST 1 <i>.096</i>	TEST 2 <i>.096</i>	TEST 3 <i>.096</i>
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RFI DETECTOR OPERATING *PASSED*

INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT: (DO NOT INCLUDE SELF-ADMINISTERED TESTS)

REFUSALS <i>0</i>	(0-.04) <i>0</i>	(.05-.09) <i>0</i>	(.10-.14) <i>0</i>	(.15-.19) <i>0</i>	(OVER .19) <i>0</i>
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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).

No New Parts Added

INSPECTING OFFICER	
SIGNATURE <i>Cpt Richard W. Knapp #2055</i>	PRINT NAME <i>RICHARD W. KNAPP</i>
TYPE II PERMIT NUMBER/EXPIRATION DATE <i>230135 07/14/15</i>	TELEPHONE NUMBER <i>573-785-5776</i>

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

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**PERMIT
 TYPE II**

RICHARD W KNAPP

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, INTOXILYZER 5000

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 7/11/2013

NUMBER 230135

EXPIRES 7/11/2015

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

,acting director
 DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-16)

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 KNAPP, RICHARD
 Permit No 230135
 Date Issued 7/11/2013 Date Expires 7/11/2015



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 14110 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on May 5, 2014, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1206% (w/vol) ethyl alcohol. The expiration date for this lot number is May 1, 2016 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.

AS IV Serial no: 087971
Version no: 004C

TEST RECORD 00370

Temp Date Time 210L

Air Blank:
07/07/14 04:03 .000
Subject Test: Man
21 07/07/14 04:03 .096

Subject Name

Subject I.D.

Operator Name, I.D.

KNAPP
Location

AS IV Serial no: 087971
Version no: 004C

TEST RECORD 00369

Temp Date Time 210L

Air Blank:
07/07/14 04:02 .000
Subject Test: Man
20 07/07/14 04:02 .096

Subject Name

Subject I.D.

Operator Name, I.D.

KNAPP
Location

AS IV Serial no: 087971
Version no: 004C

TEST RECORD 00368

Temp Date Time 210L

Air Blank:
07/07/14 04:00 .000
Subject Test: Man
19 07/07/14 04:00 .096

Subject Name

Subject I.D.

Operator Name, I.D.

KNAPP
Location

AS IV Serial no: 087971 Version no: 004C	TEST RECORD 00371
Temp Date Time 210L	Void: RFI
12 07/07/14 04:04	Subject Name
Subject Name	Subject I.D.
Operator Name, I.D.	Location
<i>KNAPP</i>	