



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

REPORT #7

RECEIVED
By Carol Day at 1:14 pm, Aug 14, 2014

Complete this report in duplicate at the time of the regular monthly preventative maintenance check, and send copy to Department of Health and Senior Services; retain original in department file.

ALCO SENSOR IV SN 0904801 Oakview MO	PRINTER SN 097.3584.332	DATE OF INSPECTION 08/01/2014
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LOCATION OF INSTRUMENT (STREET AND CITY) 6404 N. Locust, Oakview MO 64118 Oakview City Hall	TIME OF INSPECTION 5:13 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 Guth Laboratories LOT # 14110 EXP. DATE 05/01/2016

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34 SIMULATOR SN 093752 SIMULATOR EXP DATE 03/11/2015

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 .102

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	(0-.04)	0	(.05-.09)	0	(.10-.14)	0	(.15-.19)	0	(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).

Monthly test for Aug/2014

INSPECTING OFFICER

SIGNATURE

PRINT NAME
D. Littlejohn #230074

TYPE II PERMIT NUMBER/EXPIRATION DATE
230074-04/26/2015

TELEPHONE NUMBER
(816) 436-9150

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

AS IV Serial no: 094801
Version no: 532B

TEST RECORD 00272

Temp Date Time ^{s/} 210L

Air Blank:
08/01/14 05:06 .000
Calibration Check:
26 08/01/14 05:06 .102

Subject Name

Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 094801
Version no: 532B

TEST RECORD 00273

Temp Date Time ^{s/} 210L

Air Blank:
08/01/14 05:08 .000
Calibration Check:
27 08/01/14 05:08 .100

Subject Name

Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 094801
Version no: 532B

TEST RECORD 00274

Temp Date Time ^{s/} 210L

Air Blank:
08/01/14 05:09 .000
Calibration Check:
28 08/01/14 05:09 .100

Subject Name

Subject I.D.

Operator Name, I.D.

AS IV Serial no: 094801
Version no: 532B

TEST RECORD 00269

Temp Date Time ^{s/} 210L

Air Blank:
08/01/14 05:03 .000
Subject Test: Auto
24 08/01/14 05:03 .000

Subject Name

Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 094801
Version no: 532B

TEST RECORD 00270

Temp Date Time ^{s/} 210L

Air Blank:
08/01/14 05:04 .000
Subject Test: Man
25 08/01/14 05:04 .000

Subject Name

Subject I.D.

Operator Name, I.D.

AS IV Serial no: 094801
Version no: 532B

TEST RECORD 00271

Temp Date Time ^{s/} 210L

Air Blank:
08/01/14 05:05 .000
Calibration Check:
25 08/01/14 05:05 .000

Subject Name

Subject I.D.

Operator Name, I.D.

AS IV Serial no: 094801
Version no: 532B

TEST RECORD 00275

Temp Date Time ^{s/} 210L

Air Blank:
08/01/14 05:11 .000
Calibration Check:
28 08/01/14 05:11 .097

Subject Name

Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 094801
Version no: 532B

TEST RECORD 00276

Temp Date Time ^{s/} 210L

VOID: RFI
12 08/01/14 05:12

Subject Name

Subject I.D.

Operator Name, I.D.

Location



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 $34^{\circ}\text{C} \pm .2^{\circ}\text{C}$, this solution will give a breath alcohol analysis instrument reading of **0.100 g/210L** $\pm 3\%$.

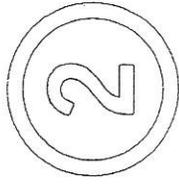
The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President
GUTH LABORATORIES, INC.

NIST Traceability:

Testing was conducted using Cerilliant Reference Standard lot number FNI22211-02 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.



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

**PERMIT
TYPE II**

DWON LITTLEJOHN

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 W/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 04/26/2013
NUMBER 230074
EXPIRES 04/26/2015

W. S. Vesterberg

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Dal Vesterberg
Acting Director

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

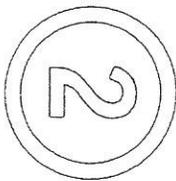
LAB-4 (R6-10)



MO 580-0771 (6-10)



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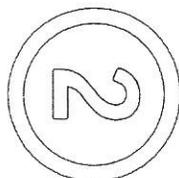
EXPIRES 04/26/2015

Acting Director

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES



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