



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

**RECEIVED**  
 By Carol Day at 1:51 pm, May 19, 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 097414	PRINTER SN 08C.3527.127	DATE OF INSPECTION 05/09/2014
LOCATION OF INSTRUMENT (STREET AND CITY) 7777 NE Birmingham Rd      Randolph, Mo    64161		TIME OF INSPECTION 5:31 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 LABS      LOT # 13210      EXP. DATE 07/29/2015

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0    SIMULATOR SN SD3141    SIMULATOR EXP DATE 09/18/2014

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 ➡ .101

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	1	(0-.04)	0	(.05-.09)	0	(.10-.14)	0	(.15-.19)	1	(OVER .19)	1
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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).

REPLACED PRINTER BATTERY ---- INTOXIMETER # 27-6860-00

PERFORMED ACCURACY TEST

PERFORMED MONTHLY MAINTENANCE CHECK

**INSPECTING OFFICER**

SIGNATURE <i>Ed Kline</i> #656	PRINT NAME ED KLINE
TYPE II PERMIT NUMBER/EXPIRATION DATE 230205    09/23/2015	TELEPHONE NUMBER (816) 455-9323

**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



## GUTH LABORATORIES, INC.

690 NORTH 67th STREET • HARRISBURG, PA 17111-4611 • TELEPHONE: 717-564-5470

### CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **13210** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **July 31, 2013**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.1216%** (w/vol) ethyl alcohol. The expiration date for this lot number is **July 29, 2015** 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 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.*



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



**PERMIT**  
**TYPE II**  
**EDDIE J KLINE**

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

**ALCO-SENSOR IV WITH PRINTER**

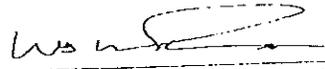
for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections  
577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

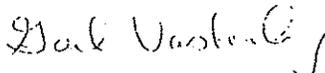
DATE 9/23/2013

NUMBER 230205

EXPIRES 9/23/2015

MO-35 (7/15/10)

  
DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

  
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES, acting director

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 KLINE, EDDIE  
Permit No 230205  
Date Issued 9/23/2013 Date Expires 9/23/2015

02 17 89781 001 897811  
00000000000000000000

1100 64700 00000  
Date Time 200  
00 0000  
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Monthly Check

Kline 656  
Randolph P.D.

02 17 89781 001 897811  
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1100 64700 00000  
Date Time 200  
00 0000  
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Monthly Check

Kline 656  
Randolph P.D.

02 17 89781 001 897811  
00000000000000000000

1100 64700 00000  
Date Time 200  
00 0000  
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Monthly Check

Kline 656  
Randolph P.D.

02 17 89781 001 897811  
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1100 64700 00000  
Date Time 200  
00 0000  
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Monthly Check

Kline 656  
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