



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

RECEIVED 6/15/14-CD **REPORT #7**

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

REVIEWED
 By Carol Day at 2:22 pm, Jun 26, 2014

ALCO SENSOR IV SN 097414	PRINTER SN 08C.3527.127	DATE OF INSPECTION 06/06/2014
LOCATION OF INSTRUMENT (STREET AND CITY) 7777 NE Birmingham Rd Randolph, Mo 64161		TIME OF INSPECTION 4:37 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 .102

TEST 2 .102

TEST 3 .103

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)	1	(.10-.14)	0	(.15-.19)	0	(OVER .19)	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).

PERFORMED MONTHLY MAINTENANCE CHECK

INSPECTING OFFICER

SIGNATURE

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 17111-4511 • 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.

AS IV Serial no: 097414
Version no: 532B

TEST RECORD 00221

Temp Date Time 210L

Air Blank:
06/06/14 16:41 .000
Calibration Check:
21 06/06/14 16:41 .103

Subject Name

Kline

Subject I.D.

656

Operator Name, I.D.

Monthly MAINT.

Location

RANDOLPH P.D.

AS IV Serial no: 097414
Version no: 532B

TEST RECORD 00220

Temp Date Time 210L

Air Blank:
06/06/14 16:39 .000
Calibration Check:
20 06/06/14 16:39 .102

Subject Name

Kline

Subject I.D.

656

Operator Name, I.D.

Monthly MAINT

Location

RANDOLPH P.D.

AS IV Serial no: 097414
Version no: 532B

TEST RECORD 00219

Temp Date Time 210L

Air Blank:
06/06/14 16:37 .000
Calibration Check:
19 06/06/14 16:37 .102

Subject Name

Kline

Subject I.D.

656

Operator Name, I.D.

Monthly MAINT

Location

RANDOLPH P.D.

AS IV Serial no: 097414
Version no: 532B

TEST RECORD 00222

Temp Date Time 210L

VOID: RET
12 06/06/14 16:42

Subject Name

Kline

Subject I.D.

656

Operator Name, I.D.

Monthly MAINT.

Location

RANDOLPH P.D.



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

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

acting director
 DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

HC 123 11/13/10



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