



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

RECEIVED REPORT #7
 By Carol Day at 10:57 am, May 12, 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 094719 | PRINTER SN 096.3580.861 | DATE OF INSPECTION 05/05/2014 |
| LOCATION OF INSTRUMENT (STREET AND CITY) 301 S Main Palmyra | | TIME OF INSPECTION 12:08 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 LOT # 13010 EXP. DATE 01/09/2015

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIMULATOR SN DR5308 SIMULATOR EXP DATE 07/10/2014

- 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 ● .096 TEST 2 ● .096 TEST 3 ● .096

- 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 |
|----------|---|---------|---|-----------|---|-----------|---|-----------|---|------------|---|

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).

| | |
|--|--|
| INSPECTING OFFICER | |
| SIGNATURE <i>Ronald C. Peer, Jr.</i> | PRINT NAME Ronald C. Peer, Jr. #501 |
| TYPE II PERMIT NUMBER/EXPIRATION DATE 220183/08-03-2014 | TELEPHONE NUMBER (573) 769-5540 |

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: 097419
Version no: 532B

TEST RECORD 00022

Temp Date Time 210L

Air Blank:
05/05/14 12:08 .000
Calibration Check:
21 05/05/14 12:08 .096

Subject Name

CALIBRATION CHECK

Subject I.D.

Operator Name, I.D.

Ronald C. Bay #501

Location

PACUYRA PD

AS IV Serial no: 097419
Version no: 532B

TEST RECORD 00023

Temp Date Time 210L

Air Blank:
05/05/14 12:09 .000
Calibration Check:
22 05/05/14 12:09 .096

Subject Name

CALIBRATION CHECK

Subject I.D.

Operator Name, I.D.

Ronald C. Bay #501

Location

PACUYRA PD

AS IV Serial no: 097419
Version no: 532B

TEST RECORD 00024

Temp Date Time 210L

Air Blank:
05/05/14 12:11 .000
Calibration Check:
23 05/05/14 12:11 .096

Subject Name

CALIBRATION CHECK

Subject I.D.

Operator Name, I.D.

Ronald C. Bay #501

Location

PACUYRA PD

AS IV Serial no: 097419
Version no: 532B

TEST RECORD 00025

Temp Date Time 210L

VOID: RFI
12 05/05/14 12:12

Subject Name

RFI TEST

Subject I.D.

Operator Name, I.D.

Ronald C. Bay #501

Location

PACUYRA PD



GUTH LABORATORIES, INC.

800 INDUSTRIAL STREET • BIRMGHAM, PA 17701-2001 • TELEPHONE: 717-854-4222

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 0.1213% (w/vol) nyl alcohol. The expiration date for this lot number is January 2, 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. Pawley, President
GUTH LABORATORIES, INC.

NIST Traceability:

*Testing was conducted using Certified Reference Standard lot number FNE2211-02 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



P E R M I T
TYPE II



RONALD C PEER JR

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

ALCO-SENSOR IV W/PRINTER

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

Date 08/03/2012

Number 220183

Expires 08/03/2014

MO 580-0771 (7-88)

Director of State Public Health Laboratory

Director, Department of Health

Lab. 4 (R7-88)