



**GUTH LABORATORIES, INC.**

680 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-664-5470

**CERTIFICATE OF ANALYSIS**

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 13100 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on April 29, 2013, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1214% (w/vol) ethyl alcohol. The expiration date for this lot number is April 23, 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. 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.*

TEST 1

AS IU Serial no: 097435  
Version no: 532B

TEST RECORD 00004

Temp Date Time 210L  
g/

Air Blank: 03/11/14 05:01 .000  
Calibration Check: 21 03/11/14 05:01 .095

Subject Name

Subject I.D.

Operator Name, I.D.

P.O. Adam Grant 341

Location

602 S Franklin St

USA

TEST 2

AS IU Serial no: 097435  
Version no: 532B

TEST RECORD 00005

Temp Date Time 210L  
g/

Air Blank: 03/11/14 05:02 .000  
Calibration Check: 22 03/11/14 05:02 .097

Subject Name

Subject I.D.

Operator Name, I.D.

P.O. Adam Grant 341

Location

602 S Franklin St

CUBA

TEST 3

AS IU Serial no: 097435  
Version no: 532B

TEST RECORD 00006

Temp Date Time 210L  
g/

Air Blank: 03/11/14 05:04 .000  
Calibration Check: 23 03/11/14 05:04 .097

Subject Name

Subject I.D.

Operator Name, I.D.

P.O. Adam Grant 341

Location

602 S Franklin St

CUBA

RFI Test

AS IU Serial no: 097435  
Version no: 532B

TEST RECORD 00007

Temp Date Time 210L  
g/

NOID: RFI  
12 03/11/14 05:05

Subject Name

Subject I.D.

Operator Name, I.D.

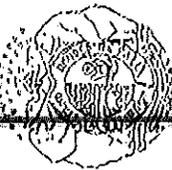
P.O. Adam Grant 341

Location

602 S Franklin St

CUBA

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



2

**PERMIT**  
**TYPE II**

ADAM L CARNAL

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzers:

**ALCO-SENSOR IV WRITER**

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 01/11/2013

NUMBER 730009

EXPIRES 01/11/2015

*W. W. S.*

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

*Deal Woodbury*

Acting Director

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LS-1 (RS-10)

MO 366577-10-10