



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

RECEIVED
 By Carol Day at 2:21 pm, Jun 26, 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 097435	PRINTER SN 096.3580.875	DATE OF INSPECTION 06/21/2014
LOCATION OF INSTRUMENT (STREET AND CITY) 602 S. Franklin St. Cuba		TIME OF INSPECTION 11:29 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 # 13100 EXP. DATE 04/23/2015

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIMULATOR SN SD 2752 SIMULATOR EXP DATE 03/06/2016

- 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 .099 TEST 3 .101

- 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)	1	(OVER .19)	1
----------	---	---------	---	-----------	---	-----------	---	-----------	---	------------	---

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>P.O. Adam Carnal</i> 341	PRINT NAME P.O. Adam Carnal DSN 341
TYPE II PERMIT NUMBER/EXPIRATION DATE 230009 exp. 01/11/2015	TELEPHONE NUMBER (573) 885-7979

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 6TH STREET • HARRISBURG, PA 17111-4611 • TELEPHONE: 717-684-6470

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 TU Serial no: 097435
Version no: 532B

TEST RECORD 00044

Temp Date Time 2101
s/

Air Blank:
06/21/14 23:29 .000
Calibration Check:
20 06/21/14 23:29 .130

Subject Name

Subject I.D.

Operator Name: I.D.

Location: P.O. Adam Crank 341

Location: 602 S. Franklin St.

CUSA

TEST 2

AS TU Serial no: 097435
Version no: 532B

TEST RECORD 00045

Temp Date Time 2101
s/

Air Blank:
06/21/14 23:31 .000
Calibration Check:
21 06/21/14 23:31 .099

Subject Name

Subject I.D.

Operator Name: I.D.

Location: P.O. Adam Crank 341

Location: 602 S. Franklin St.

CUSA

TEST 3

AS TU Serial no: 097435
Version no: 532B

TEST RECORD 00046

Temp Date Time 2101
s/

Air Blank:
06/21/14 23:32 .000
Calibration Check:
21 06/21/14 23:32 .101

Subject Name

Subject I.D.

Operator Name: I.D.

Location: P.O. Adam Crank 341

Location: 602 S. Franklin St.

CUSA

RFT TEST

AS TU Serial no: 097435
Version no: 532B

TEST RECORD 00047

Temp Date Time 2101
s/

NOTE: RFT
12 06/21/14 23:33

Subject Name

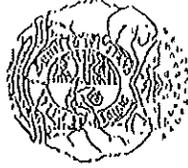
Subject I.D.

Operator Name: I.D.

Location: P.O. Adam Crank 341

Location: 602 S. Franklin St.

CUSA



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

2

**PERMIT
 TYPE III**

ADAM I CARNAL

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

ALCO-SENSOR IV W/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 577.044, RSMo and 306.111 through 306.119 RSMo.

DATE 01/11/2013

W. J. D.

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

NUMBER 230009

Shelley

EXPIRES 01/11/2015

Shelley

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LS-577-6-10

LS-4-19-09