



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

RECEIVED 3/14/14 REPORT #7

REVIEWED

Complete this report in duplicate at the time of the regular monthly preventative maintenance check, and By Carol Day at 3:57 pm, Mar 31, 2014 d.
Send copy to Department of Health and Senior Services; retain original in department file.

ALCO SENSOR IV SN 097444	PRINTER SN 096.3580.952	DATE OF INSPECTION 03/08/2014
LOCATION OF INSTRUMENT (STREET AND CITY) 9623 SAINT CHARLES ROCK ROAD, BRECKENRIDGE HILLS POLICE DEPARTMENT		TIME OF INSPECTION 4:33 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) 23°C

PRINTER WORKING PROPERLY

TIME AND DATE DISPLAYING PROPERLY

BREATH ALCOHOL ACCURACY STANDARDS

SIMULATOR SOLUTION COMPRESSED ETHANOL-GAS MIXTURE

STANDARD SUPPLIER GUTH LABORATORIES, INC. LOT # 13210 EXP. DATE 07/29/2015

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIMULATOR SN SD2309 SIMULATOR EXP DATE 12/16/2014

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 ← .103

TEST 3 ← .104

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 2 (0-.04) (.05-.09) 3 (.10-.14) 2 (.15-.19) (OVER .19)

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 Michael Presson	PRINT NAME MICHAEL PRESSON
TYPE II PERMIT NUMBER/EXPIRATION DATE 230108, 06/04/2015	TELEPHONE NUMBER (314) 426-1214

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.**

590 NORTH 87th STREET • HARRISBURG, PA 17111-4611 • TELEPHONE: 717-604-6470

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°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.100 g/210L +/- 3%.

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 FNI22211-02 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: 097444
Version no: 0040

TEST RECORD 00019

Temp Date Time 210L

Air Blank:
03/08/14 16:33 .000
Calibration Check:
23 03/08/14 16:33 .102

Subject Name

Subject I.D.

Operator Name: I.D.

Sgt Michael Purnell
Location

9623 St. Charles Rock Road

AS IV Serial no: 097444
Version no: 0040

TEST RECORD 00020

Temp Date Time 210L

Air Blank:
03/08/14 16:35 .000
Calibration Check:
23 03/08/14 16:35 .103

Subject Name

Subject I.D.

Operator Name: I.D.

Sgt Michael Purnell
Location

9623 St. Charles Rock Road

AS IV Serial no: 097444
Version no: 0040

TEST RECORD 00021

Temp Date Time 210L

Air Blank:
03/08/14 16:37 .000
Calibration Check:
23 03/08/14 16:37 .104

Subject Name

Subject I.D.

Operator Name: I.D.

Sgt Michael Purnell
Location

9623 St. Charles Rock Road

AS IV Serial no: 097444
Version no: 0040

TEST RECORD 00022

Temp Date Time 210L

Air Blank:
03/08/14 16:38

Subject Name

Subject I.D.

Operator Name: I.D.

Sgt Michael Purnell
Location
9623 St. Charles Rock Road



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



PERMIT
TYPE II

MICHAEL B PRESSON

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and 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 air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE 06/04/2013

NUMBER 230108

EXPIRES 06/04/2015

MO 590-0771 (6-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Acting Director

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (58-10)