



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

RECEIVED
 By Carol Day at 8:09 am, Jul 01, 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 097462	PRINTER SN 096.3580.960	DATE OF INSPECTION 6/29/14
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LOCATION OF INSTRUMENT (STREET AND CITY) 1781 Zumbeth Rd., St Charles, Mo 63303	TIME OF INSPECTION 2022hrs
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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) **ok**

TEMPERATURE OF ALCO SENSOR (10°C - 40°C) **ok**

PRINTER WORKING PROPERLY **ok**

TIME AND DATE DISPLAYING PROPERLY **ok**

BREATH ALCOHOL ACCURACY STANDARDS

SIMULATOR SOLUTION COMPRESSED ETHANOL-GAS MIXTURE

STANDARD SUPPLIER **Guth Laboratories** LOT # **14030** EXP. DATE **1/20/16**

SIMULATOR TEMPERATURE (34°C ± 0.2°C) **34.0°C** SIMULATOR SN **SD2248** SIMULATOR EXP DATE **1/17/15**

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 • .098	TEST 2 • .097	TEST 3 • .096
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RFI DETECTOR OPERATING **ok**

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
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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 Daniel Gibbons 324	PRINT NAME Daniel Gibbons 324
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TYPE II PERMIT NUMBER/EXPIRATION DATE 240034 2/11/16	TELEPHONE NUMBER (636) 949-3300 X2324
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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 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **14030** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **January 22, 2014**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.1215%** (w/vol) ethyl alcohol. The expiration date for this lot number is **January 20, 2016** 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: 097462
Version no: 532B

TEST RECORD 00038

Temp Date Time 210L

Air Blank:
06/29/14 20:22 .000
Calibration Check:
24 06/29/14 20:22 .098

Subject Name

Subject I.D.

Operator Name, I.D.

D. Gibbons 324

Location

1781 Zumbethi Rd.

St. Charles, Mo 63303

AS IV Serial no: 097462
Version no: 532B

TEST RECORD 00039

Temp Date Time 210L

Air Blank:
06/29/14 20:24 .000
Calibration Check:
25 06/29/14 20:24 .097

Subject Name

Subject I.D.

Operator Name, I.D.

D. Gibbons 324

Location

1781 Zumbethi Rd.

St. Charles, Mo 63303

AS IV Serial no: 097462
Version no: 532B

TEST RECORD 00040

Temp Date Time 210L

Air Blank:
06/29/14 20:25 .000
Calibration Check:
25 06/29/14 20:25 .096

Subject Name

Subject I.D.

Operator Name, I.D.

D. Gibbons 324

Location

1781 Zumbethi Rd.

St. Charles, Mo 63303

AS IV Serial no: 097462
Version no: 532B

TEST RECORD 00041

Temp Date Time 210L

VOID: RFI
12 06/29/14 20:27

Subject Name

Subject I.D.

Operator Name, I.D.

D. Gibbons 324

Location

1781 Zumbethi Rd.

St. Charles, MO 63303