



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

RECEIVED
 By Carol Day at 3:09 pm, Jun 19, 2014

DOR

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 102939	PRINTER SN 096.3580.522	DATE OF INSPECTION 06/16/2014
LOCATION OF INSTRUMENT (STREET AND CITY) 16405 MO-180		TIME OF INSPECTION 2335 hrs

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 LAB** LOT # **13280** EXP. DATE **10/16/2015**

SIMULATOR TEMPERATURE (34°C ± 0.2°C) **34.0** SIMULATOR SN **Dr2856** 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 = **.100** TEST 2 = **.106** TEST 3 = **.100**

- 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) **1** (.05-.09) **0** (.10-.14) **1** (.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).

INSTRUMENT TESTS WITHIN DOR SPECIFICATIONS

INSPECTING OFFICER	
SIGNATURE William M. Goodrich	PRINT NAME WILLIAM M GOODRICH
TYPE II PERMIT NUMBER/EXPIRATION DATE 240245 05/19/2016	TELEPHONE NUMBER (314) 427-8000

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.

890 NORTH 67th STREET • HARRISBURG, PA 17111-4811 • TELEPHONE: 717-564-5470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 13280 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on October 18, 2013, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1217% (w/vol) ethyl alcohol. The expiration date for this lot number is October 16, 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.

AS IV Serial no: 102939
Version no: 0140

TEST RECORD 00635

Temp Date Time ZPAC
Air Blank: 06/16/14 23:57 .999
Calibration: 25 06/16/14 23:57 .100

Subject Name
Subject I.D.
TEST

Operator Name, I.D.
Location
Goodrich 240245

10405 Mo.180
ST ANN

AS IV Serial no: 102939
Version no: 0140

TEST RECORD 00634

Temp Date Time ZPAC
Air Blank: 06/16/14 23:55 .999
Calibration: 25 06/16/14 23:55 .100

Subject Name
Subject I.D.
TEST

Operator Name, I.D.
Goodrich 240245

Location
10405 Mo.180

ST ANN

AS IV Serial no: 102939
Version no: 0140

TEST RECORD 00634

Temp Date Time ZPAC
Air Blank: 06/16/14 23:51 .999
Calibration: 27 06/16/14 23:51 .100

Subject Name
Subject I.D.
TEST

Operator Name, I.D.
Goodrich 240245

Location
10405 Mo.180

ST ANN

AS IV Serial no: 102939
Version no: 0140

TEST RECORD - REPRINT

TEST RECORD 00631

Temp Date Time ZPAC
Air Blank: 06/16/14 23:44 .999
Calibration: 27 06/16/14 23:44 .100

Subject Name
Subject I.D.
TEST

Operator Name, I.D.
Goodrich 240245

Location
10405 Mo.180

ST ANN



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

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PERMIT
TYPE II

WILLIAM M GOODRICH

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 WITH PRINTER, INTOX EC/IR II

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 5/19/2014

NUMBER 240245

EXPIRES 5/19/2016

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES