



ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

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 108263	PRINTER SN 099.3586.834	DATE OF INSPECTION 08/30/2014
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LOCATION OF INSTRUMENT (STREET AND CITY) 4305 Woodson Rd., Woodson Terrace	TIME OF INSPECTION 4:30 pm
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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)
- TEMPERATURE OF ALCO SENSOR (10°C - 40°C)
- PRINTER WORKING PROPERLY
- TIME AND DATE DISPLAYING PROPERLY

BREATH ALCOHOL ACCURACY STANDARDS

<input checked="" type="checkbox"/> SIMULATOR SOLUTION	<input type="checkbox"/> COMPRESSED ETHANOL-GAS MIXTURE
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<input checked="" type="checkbox"/> STANDARD SUPPLIER <u>Guth Laboratories</u>	LOT # <u>14030</u>	EXP. DATE <u>01/20/2016</u>
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<input checked="" type="checkbox"/> SIMULATOR TEMPERATURE (34°C ± 0.2°C) <u>34.0</u>	SIMULATOR SN <u>DR3942</u>	SIMULATOR EXP DATE <u>04/23/2015</u>
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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 .101	TEST 2 .101	TEST 3 .101
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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-.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 	PRINT NAME Corporal James Simonpietri #80
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TYPE II PERMIT NUMBER/EXPIRATION DATE 240283 Expires 6/13/2016	TELEPHONE NUMBER (314) 427-5858
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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.



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

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PERMIT
TYPE II
JAMES SIMONPIETRI

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

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 6/13/2014

NUMBER 240283

EXPIRES 6/13/2016

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES



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

INSTRUMENT OPERATOR CARD

The named cardholder is authorized to operate an evidential breath alcohol instrument for the determination of the alcoholic content in breath form of expired air in Missouri.



Operator SIMONPIETRI, JAMES
 Permit No 240283
 Date Issued 6/13/2014 Date Expires 6/13/2016



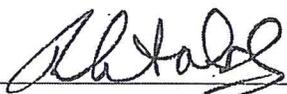
Simulator Calibration Report

This calibration report is to certify the alcohol reference simulator listed below has been examined and tested using standards traceable to the National Institute of Standards and Technology (NIST) in accordance with the standards set by the Missouri Department of Health and Senior Services Rules and Regulations:
19CSR 25-30.051 (4).

Checked: 4/23/2014 Expires: 04/23/2015
Digital Therm. SN:094948
MSC Tech: RW Temp:33.98
Agency: Woodson Terrace Police Dept.
DR 3942



Technician Printed Name: ROBERT WELSH

Technician Signature: 

Date: 04/23/2014

Contact: Missouri Safety Center
Breath Alcohol Instrument Training Program
660-543-4834

AS IV Serial no: 108263
Version no: 532B

TEST RECORD 00107

Temp Date Time ^{s/} 210L

Air Blank:
08/30/14 16:34 .000
Calibration Check:
22 08/30/14 16:34 .101

Subject Name

Subject I.D.

CAL #80
Operator Name, I.D.

4305 Woodson
Location
TEST # 1

AS IV Serial no: 108263
Version no: 532B

TEST RECORD 00108

Temp Date Time ^{s/} 210L

Air Blank:
08/30/14 16:36 .000
Calibration Check:
23 08/30/14 16:36 .101

Subject Name

Subject I.D.

CAL #80
Operator Name, I.D.

4305 Woodson
Location
TEST # 2

AS IV Serial no: 108263
Version no: 532B

TEST RECORD 00109

Temp Date Time ^{s/} 210L

Air Blank:
08/30/14 16:38 .000
Calibration Check:
24 08/30/14 16:38 .101

Subject Name

Subject I.D.

CAL #80
Operator Name, I.D.

4305 Woodson
Location
TEST # 3

AS IV Serial no: 108263
Version no: 532B

TEST RECORD 00110

Temp Date Time ^{s/} 210L

VOID: RFI
12 08/30/14 16:39

Subject Name

Subject I.D.

CAL #80
Operator Name, I.D.

4305 Woodson
Location

RFI CHECK