



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

RECEIVED
 By Carol Day at 2:57 pm, Dec 31, 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 108268	PRINTER SN 099.3586.791	DATE OF INSPECTION 12/27/2014
LOCATION OF INSTRUMENT (STREET AND CITY) 1781 Zumbeth Rd., St Charles, Mo 63303		TIME OF INSPECTION 1911hrs

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 1/20/2016
- SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0°C SIMULATOR SN SD2248 SIMULATOR EXP DATE 1/17/2015
- 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 • .103	TEST 2 • .103	TEST 3 • .103
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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 <i>Daniel Gibbons</i> 324	PRINT NAME Daniel Gibbons 324
TYPE II PERMIT NUMBER/EXPIRATION DATE 240034 2/11/2016	TELEPHONE NUMBER (636) 949-3300 x2324

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: 717-664-5470

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: 108268
Version no: 532B

TEST RECORD 00019

Temp	Date	Time	s/ 210L
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Air Blank:
12/27/14 19:11 .000
Calibration Check:
21 12/27/14 19:11 .103

Subject Name

Subject I.D.

Operator Name, I.D.

D. Gibbons 324

Location

1781 Zumbeth Rd.

St Charles, Mo 63303

AS IV Serial no: 108268
Version no: 532B

TEST RECORD 00020

Temp	Date	Time	s/ 210L
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Air Blank:
12/27/14 19:12 .000
Calibration Check:
22 12/27/14 19:12 .103

Subject Name

Subject I.D.

Operator Name, I.D.

D. Gibbons 324

Location

1781 Zumbeth Rd.

St. Charles, Mo 63303

AS IV Serial no: 108268
Version no: 532B

TEST RECORD 00021

Temp	Date	Time	s/ 210L
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Air Blank:
12/27/14 19:13 .000
Calibration Check:
23 12/27/14 19:13 .103

Subject Name

Subject I.D.

Operator Name, I.D.

D. Gibbons 324

Location

1781 Zumbeth Rd.

St. Charles, Mo 63303

AS IV Serial no: 108268
Version no: 532B

TEST RECORD 00022

Temp	Date	Time	s/ 210L
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VOID: REI
12 12/27/14 19:15

Subject Name

Subject I.D.

Operator Name, I.D.

D. Gibbons 324

Location

1781 Zumbeth Rd.

St. Charles, Mo 63303