



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

**RECEIVED** REPORT #7  
By Carol Day at 11:19 am, May 05, 2015

Complete this report in duplicate at the time of the regular monthly preventative maintenance check. Send copy to Department of Health and Senior Services; retain original in department file.

ALCO SENSOR IV SN <u>030789</u>	PRINTER SN <u>84.9324.154</u>	DATE OF INSPECTION <u>04/29/2015</u>
LOCATION OF INSTRUMENT (STREET AND CITY) <u>400 First St Hillsboro</u>		TIME OF INSPECTION <u>1900 hrs</u>

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 Both Lab      LOT # 14110      EXP. DATE 05/01/2016

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34°      SIMULATOR SN SD2000      SIMULATOR EXP DATE 03/20/2015

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 <u>.101</u>	TEST 2 <u>.101</u>	TEST 3 <u>.101</u>
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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)

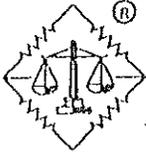
REFUSALS 0 (0-.04) 0 (.05-.09) 0 (.10-.14) 0 (.15-.19) 0 (OVER .19) 0

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).

**INSPECTING OFFICER**

SIGNATURE <u>[Signature]</u>	PRINT NAME <u>Dep. Richard Beuthe 197</u>
TYPE II PERMIT NUMBER/EXPIRATION DATE <u>240268 07/12/2016</u>	TELEPHONE NUMBER <u>636 797-5000</u>

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 07th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

## CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 14110 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on May 5, 2014, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1206% (w/vol) ethyl alcohol. The expiration date for this lot number is May 1, 2016 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: 030789  
Version no: 532B

TEST RECORD 00048

Temp Date Time 210L s/

Air Blank: 04/29/15 19:17 .000  
Calibration Check: 28 04/29/15 19:17 .101

Subject Name

Test #3

Subject I.D.

Operator Name, I.D.

Dep R. Beattie 197

Location

400 First St

Hillsboro, Mo 63050

AS IV Serial no: 030789  
Version no: 532B

TEST RECORD 00047

Temp Date Time 210L s/

Air Blank: 04/29/15 19:13 .000  
Calibration Check: 29 04/29/15 19:13 .101

Subject Name

Test #2

Subject I.D.

Operator Name, I.D.

Dep R. Beattie 197

Location

400 First St

Hillsboro, Mo 63050

AS IV Serial no: 030789  
Version no: 532B

TEST RECORD 00046

Temp Date Time 210L s/

Air Blank: 04/29/15 19:10 .000  
Calibration Check: 29 04/29/15 19:10 .101

Subject Name

Test #1

Subject I.D.

Operator Name, I.D.

Dep R. Beattie 197

Location

400 First St

Hillsboro, Mo 63050

AS IV Serial no: 030789  
Version no: 532B

TEST RECORD 00049

Temp Date Time <sup>s/</sup> 210L

VOID: RFI  
12 04/29/15 19:32

Subject Name

*RFI Test*

Subject I.D.

Operator Name, I.D.

*Dep. R Beattie 197*

Location

*400 First St*

*Hillsboro, Mo 63500*



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

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**PERMIT  
 TYPE II**

**RICHARD BEATTIE**

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

**DATAMASTER, INTOX EC/IR II, 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 6/12/2014

NUMBER 240268

EXPIRES 6/12/2016

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 583-0771 (6-10)

LAB-4 (R6-10)

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 BEATTIE, RICHARD  
 Permit No 240268  
 Date Issued 6/12/2014 Date Expires 6/12/2016