



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

RECEIVED

REPORT #7

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

By Carol Day at 11:20 am, May 05, 2015

ALCO SENSOR IV SN 030800	PRINTER SN 84.9324.155	DATE OF INSPECTION 04/29/2015
LOCATION OF INSTRUMENT (STREET AND CITY) 400 First St Hillsboro		TIME OF INSPECTION 1930 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.

<input checked="" type="checkbox"/> DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)	
<input type="checkbox"/> TEMPERATURE OF ALCO SENSOR (10°C - 40°C)	
<input checked="" type="checkbox"/> PRINTER WORKING PROPERLY	
<input checked="" type="checkbox"/> TIME AND DATE DISPLAYING PROPERLY	
BREATH ALCOHOL ACCURACY STANDARDS	
<input checked="" type="checkbox"/> SIMULATOR SOLUTION	<input type="checkbox"/> COMPRESSED ETHANOL-GAS MIXTURE
<input checked="" type="checkbox"/> STANDARD SUPPLIER Guth Lab	LOT # 14110 EXP. DATE 05/01/2016
<input checked="" type="checkbox"/> SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34°	SIMULATOR SN SID0000 SIMULATOR EXP DATE 03/01/2015

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)

<input checked="" type="checkbox"/> 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE
<input type="checkbox"/> 0.080% STANDARD - MUST READ BETWEEN 0.076% and 0.084% INCLUSIVE
<input type="checkbox"/> 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE

TEST 1 .099	TEST 2 .099	TEST 3 .098
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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
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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 [Signature]	PRINT NAME Det. Richard Beattie 197
TYPE II PERMIT NUMBER/EXPIRATION DATE 240268 06/12/2016	TELEPHONE NUMBER 636 797-5000
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: 0308800
Version no: 532B

TEST RECORD 00079

Temp Date Time 210L
s/

VOID: RFI
12 04/29/15 19:40

Subject Name
RFI Test

Subject I.D.

Operator Name, I.D.
Dop B Beattie 197

Location
400 First St

Hillsboro, Mo 63058

AS IV Serial no: 0308800
Version no: 532B

TEST RECORD 00078

Temp Date Time 210L
s/

Air Blank: 04/29/15 19:38 .000
Calibration Check: 27 04/29/15 19:38 .098

Subject Name
Test #3

Subject I.D.

Operator Name, I.D.
Dop B Beattie 197

Location
400 First St

Hillsboro, Mo 63058

AS IV Serial no: 0308800
Version no: 532B

TEST RECORD 00077

Temp Date Time 210L
s/

Air Blank: 04/29/15 19:36 .000
Calibration Check: 27 04/29/15 19:36 .099

Subject Name
Test #2

Subject I.D.

Operator Name, I.D.
Dop B Beattie 197

Location
400 First St

Hillsboro, Mo 63058

AS IV Serial no: 0308800
Version no: 532B

TEST RECORD 00076

Temp Date Time 210L
s/

Air Blank: 04/29/15 19:33 .000
Calibration Check: 27 04/29/15 19:33 .099

Subject Name
Test #1

Subject I.D.

Operator Name, I.D.
Dop B Beattie 197

Location
400 First St

Hillsboro, Mo 63058



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

2

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

LAB-4 (R6-10)

MO 580-0771 (6-10)



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