



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 9:25 am, Apr 08, 2015

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 087972	PRINTER SN 08C.3556.386	DATE OF INSPECTION 03/24/2015
LOCATION OF INSTRUMENT (STREET AND CITY) TROOP D, ZONE 3 ZONE OFFICE, BOLIVAR		TIME OF INSPECTION 8:39 am

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) 20° C
- PRINTER WORKING PROPERLY
- TIME AND DATE DISPLAYING PROPERLY

BREATH ALCOHOL ACCURACY STANDARDS

- SIMULATOR SOLUTION COMPRESSED ETHANOL-GAS MIXTURE
- STANDARD SUPPLIER Guth Laboratories Inc. LOT # 13290 EXP. DATE 10/29/2015
- SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.00 SIMULATOR SN MP2146 SIMULATOR EXP DATE 06/18/2015

- 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 .100	TEST 2 .101	TEST 3 .102
--------------	--------------	--------------

- 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).

SET TIME FOR DAYLIGHT SAVINGS

INSPECTING OFFICER

SIGNATURE 	PRINT NAME JOSHUA L. WHITE
TYPE II PERMIT NUMBER/EXPIRATION DATE 240080 03/07/2016	TELEPHONE NUMBER (417) 895-6868

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 13290 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on October 31, 2013, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1202% (w/vol) ethyl alcohol. The expiration date for this lot number is October 29, 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: 087972
Version no: 004C

TEST RECORD 00300

Temp Date Time 210L ^{s/}

Air Blank:
03/24/15 08:43 .000
Calibration Check:
21 03/24/15 08:43 .102

Subject Name

Subject I.D.

Operator Name, I.D.

TPR. J.L. WHITE #1202

Location

TROOP D ZONE 3
ZONE OFFICE

BOLZUAR, MD

AS IV Serial no: 087972
Version no: 004C

TEST RECORD 00298

Temp Date Time 210L ^{s/}

Air Blank:
03/24/15 08:39 .000
Calibration Check:
20 03/24/15 08:39 .100

Subject Name

Subject I.D.

Operator Name, I.D.

TPR. J.L. WHITE 1202

Location

TROOP D ZONE 3
ZONE OFFICE

BOLZUAR, MD

AS IV Serial no: 087972
Version no: 004C

TEST RECORD 00301

Temp Date Time 210L ^{s/}

Void: RFI
12 03/24/15 08:44

Subject Name

Subject I.D.

TPR. J.L. WHITE #1202

Operator Name, I.D.

Location

TROOP D ZONE 3
ZONE OFFICE

BOLZUAR, MD

AS IV Serial no: 087972
Version no: 004C

TEST RECORD 00299

Temp Date Time 210L ^{s/}

Air Blank:
03/24/15 08:41 .000
Calibration Check:
21 03/24/15 08:41 .101

Subject Name

Subject I.D.

Operator Name, I.D.

TPR. J.L. WHITE 1202

Location

TROOP D ZONE 3
ZONE OFFICE

BOLZUAR MD



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

2

PERMIT
TYPE II
JOSHUA L WHITE

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 DMT, 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 3/7/2014

NUMBER 240080

EXPIRES 3/7/2016

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (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 **WHITE, JOSHUA**
Permit No **240080**
Date Issued **3/7/2014** Date Expires **3/7/2016**