



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

REPORT #7

RECEIVED
 By Carol Day at 8:46 am, Aug 10, 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 097413	PRINTER SN 091.3580.067	DATE OF INSPECTION 08/03/2005
LOCATION OF INSTRUMENT (STREET AND CITY) 52 YOUNG DR CALVERTON PARK MO 63135		TIME OF INSPECTION 1391

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 GUTH LABORATORIES LOT # 15120 EXP. DATE 04/29/2017

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34 SIMULATOR SN SD3327 SIMULATOR EXP DATE 01/20/2016

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 → .099

TEST 3 → .099

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	2	(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).

GUTH LAB .100 SOL LOT NUMBER 15120

INSPECTING OFFICER

SIGNATURE <i>Lowell Moore</i> 173	PRINT NAME Lowell Moore
TYPE II PERMIT NUMBER/EXPIRATION DATE 240234 05/12/2016	TELEPHONE NUMBER (314) 524-1212

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.

690 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 **15120** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **May 4, 2015**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.1209%** (w/vol) ethyl alcohol. The expiration date for this lot number is **April 29, 2017** 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 $0.100 \text{ g}/210\text{L} \pm 3\%$.

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 FN08051301 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.

3

AS IV Serial no: 097413
Version no: 084C

TEST RECORD 08555 s/
Temp Date Time 218L

Air Blank: 08/03/15 13:45 .000
Calibration Check: 23 08/03/15 13:45 .099

Subject Name L. Neal 177
Subject I.D. _____

Operator Name, I.D. _____

Location _____

2

AS IV Serial no: 097413
Version no: 084C

TEST RECORD 08554 s/
Temp Date Time 218L

Air Blank: 08/03/15 13:44 .000
Calibration Check: 22 08/03/15 13:44 .099

Subject Name _____

Subject I.D. _____

Operator Name, I.D. L. Neal 177

Location _____

1

AS IV Serial no: 097413
Version no: 084C

TEST RECORD 08553 s/
Temp Date Time 218L

Air Blank: 08/03/15 13:41 .000
Calibration Check: 21 08/03/15 13:41 .100

Subject Name _____

Subject I.D. _____

Operator Name, I.D. L. Neal 177

Location _____

V T L

AS IV Serial no: 097413
Version no: 004C

TEST RECORD 00556 g/

Temp Date Time 210L

Void# RTI
12 08/03/15 13:47

Subject Name

Subject I.D.

L. Max 173

Operator Name, I.D.

Location

COPY



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

2

PERMIT
TYPE II

LOWELL J MOORE

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 5/12/2014

NUMBER 240234

EXPIRES 5/12/2016

MO 680-0771 (6-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (88-10)

COPY

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 MOORE, LOWELL
Permit No 240234
Date Issued 5/12/2014 Date Expires 5/12/2016