



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

RECEIVED
 By Brian Lutmer at 10:47 am, Oct 30, 2015

REPORT #7

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 097415	PRINTER SN 03A2436040	DATE OF INSPECTION 10/14/2015
LOCATION OF INSTRUMENT (STREET AND CITY) MSHP Zone 4 Office, Branson, MO		TIME OF INSPECTION 9:21 pm

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 LOT # 13280 EXP. DATE 10/16/2015

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34 SIMULATOR SN MP2423 SIMULATOR EXP DATE _____

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 ← .102

TEST 3 ← .101

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-.04)	(.05-.09)	(.10-.14)	(.15-.19)	(OVER .19)
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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 	PRINT NAME T.A. Hadlock
TYPE II PERMIT NUMBER/EXPIRATION DATE 240054 / 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

AS IV Serial no: 097415
Version no: 502B

TEST RECORD 00001

Temp Date Time 210L

Air Blank: 12/14/15 21:21 .000

Calibration Check: 12/14/15 21:21 .103

Subject Name

Subject I.D.

Operator Name, I.D.

Location

TA. Hadlock 789

ZONE 4 OFFICE

AS IV Serial no: 097415
Version no: 502B

TEST RECORD 00002

Temp Date Time 210L

Air Blank: 15/14/15 21:22 .000

Calibration Check: 23/10/14/15 21:22 .102

Subject Name

Subject I.D.

Operator Name, I.D.

Location

TA. Hadlock 789

ZONE 4 OFFICE

AS IV Serial no: 097415
Version no: 502B

TEST RECORD 00003

Temp Date Time 210L

Air Blank: 18/14/15 21:24 .000

Calibration Check: 24/10/14/15 21:24 .101

Subject Name

Subject I.D.

Operator Name, I.D.

Location

TA. Hadlock 789

ZONE 4 OFFICE

AS IV Serial no: 097415
Version no: 502B

TEST RECORD 00004

Temp Date Time 210L

VOID: RFI 12/10/14/15 21:25

Subject Name

Subject I.D.

Operator Name, I.D.

Location

TA. Hadlock 789

ZONE 4 OFFICE



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 **13280** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **October 18, 2013**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.1217%** (w/vol) ethyl alcohol. The expiration date for this lot number is **October 16, 2015** 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 FNI22211-02 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.



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

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PERMIT
 TYPE II

TODD A HADLOCK

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 906.111 through 906.113 RSMo.

DATE 3/7/2014

NUMBER 240054

EXPIRES 3/7/2016

MO 9807 PL (8-10)

[Signature]

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

[Signature]

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB 4 (8-10)

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 **HADLOCK, TODD**
 Permit No **240054**
 Date Issued **3/7/2014** Date Expires **3/7/2016**