



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

REPORT

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. **RECEIVED**
By Carol Day at 1:26 pm, Jul 09, 2015 Instrument is repaired

ALCO SENSOR IV SN 099361	PRINTER SN 097-3584-336	DATE OF INSPECTION 7-6-15
LOCATION OF INSTRUMENT (STREET AND CITY) 106 N 3rd St Garden City MO 64747		TIME OF INSPECTION 1655

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 **QUTH**

LOT # **15050** EXP. DATE **3-9-2017**

SIMULATOR TEMPERATURE (34°C ± 0.2°C) **34.0** SIMULATOR SN **SD 2314** SIMULATOR EXP DATE **11-3-15**

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 0.039% and 0.042% INCLUSIVE

TEST 1 = **.100**

TEST 2 = **.100**

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	(0-.04) 0	(.05-.09) 0	(.10-.14) 0	(.15-.19) 0	(OVER .19) 1
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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
Richard D Williams

PRINT NAME
Richard D Williams

TYPE II PERMIT NUMBER/EXPIRATION DATE
230347 12-31-2015

TELEPHONE NUMBER
816 773-8201

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: 717-664-6470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 15050 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on March 11, 2015, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1218% (w/vol) ethyl alcohol. The expiration date for this lot number is March 9, 2017 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 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.

AS IV Serial no: 099361
Version no: 532B

TEST RECORD 00237

Temp Date Time ^{s/} 210L

Air Blank:
07/06/15 16:59 .000
Calibration Check:
23 07/06/15 16:59 .100

Subject Name

Richard Williams
Subject I.D.

712

Operator Name, I.D.

230347

Location

CCPD

AS IV Serial no: 099361
Version no: 532B

TEST RECORD 00238

Temp Date Time ^{s/} 210L

Air Blank:
07/06/15 17:01 .000
Calibration Check:
23 07/06/15 17:01 .100

Subject Name

Richard Williams
Subject I.D.

712

Operator Name, I.D.

230347

Location

CCPD

AS IV Serial no: 099361
Version no: 532B

TEST RECORD 00239

Temp Date Time ^{s/} 210L

Air Blank:
07/06/15 17:03 .000
Calibration Check:
24 07/06/15 17:03 .101

Subject Name

Richard Williams
Subject I.D.

712

Operator Name, I.D.

230347

Location

CCPD

AS IV Serial no: 099361
Version no: 532B

TEST RECORD 00240

Temp Date Time ^{s/} 210L

VOID: RFI
12 07/06/15 17:05

Subject Name

Richard Williams
Subject I.D.

712

Operator Name, I.D.

230347

Location

CCPD



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



PERMIT
TYPE II

RICHARD D WILLIAMS

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 12/31/2013

NUMBER 230347

EXPIRES 12/31/2015

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

,acting director

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 680-0771 (6-10)

LAQ-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 WILLIAMS, RICHARD
Permit No 230347
Date Issued 12/31/2013 Date Expires 12/31/2015