



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

RECEIVED

REPORT #7

Complete this report in duplicate at the time of the regular monthly preventive maintenance check, and whenever instrument is repaired. Send copy to Department of Health and Senior Services; retain original in department file.

By Carol Day at 10:28 am, Jul 27, 2015

ALCO SENSOR IV SN 099365	PRINTER SN 097.3584.346	DATE OF INSPECTION 07/15/2015
LOCATION OF INSTRUMENT (STREET AND CITY) 147 S. Main St. Laurie, MO 65038		TIME OF INSPECTION 0:47 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)
- PRINTER WORKING PROPERLY
- TIME AND DATE DISPLAYING PROPERLY

BREATH ALCOHOL ACCURACY STANDARDS

- SIMULATOR SOLUTION COMPRESSED ETHANOL-GAS MIXTURE
- STANDARD SUPPLIER Guth Laboratories Inc. LOT # 14030 EXP. DATE 01/20/2016
- SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIMULATOR SN DR 6929 SIMULATOR EXP DATE 08/14/2015

- 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 ← 0.101	TEST 2 ← 0.101	TEST 3 ← 0.100
----------------	----------------	----------------

- 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)	1	(.10-.14)	0	(.15-.19)	0	(OVER .19)	1
----------	---	---------	---	-----------	---	-----------	---	-----------	---	------------	---

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 311	PRINT NAME Scott DeWayne Craig
TYPE II PERMIT NUMBER/EXPIRATION DATE 250048 02/20/2017	TELEPHONE NUMBER (573) 374-4871

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 14030 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on January 22, 2014, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1215% (w/vol) ethyl alcohol. The expiration date for this lot number is January 20, 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: 099365
Version no: 532B

TEST RECORD 00315

Temp Date Time ^{g/} 210L

Air Blank:
07/15/15 00:48 .000
Subject Test: Auto
23 07/15/15 00:48 .000

Subject Name

Monthly Maintenance

Subject I.D.

Blank Test

Operator Name, I.D.

Scott Craig 250048

Location

147 South Main St.

Laurie, MO 65038

AS IV Serial no: 099365
Version no: 532B

TEST RECORD 00317

Temp Date Time ^{g/} 210L

Air Blank:
07/15/15 00:52 .000
Calibration Check:
25 07/15/15 00:52 .101

Subject Name

Monthly Maintenance

Subject I.D.

Test #1

Operator Name, I.D.

Scott Craig 250048

Location

147 South Main St.

Laurie, MO 65038

AS IV Serial no: 099365
Version no: 532B

TEST RECORD 00319

Temp Date Time ^{g/} 210L

Air Blank:
07/15/15 00:55 .000
Calibration Check:
26 07/15/15 00:55 .100

Subject Name

Monthly Maintenance

Subject I.D.

Test #3

Operator Name, I.D.

Scott Craig 250048

Location

147 South Main St.

Laurie, MO 65038

AS IV Serial no: 099365
Version no: 532B

TEST RECORD 00316

Temp Date Time ^{g/} 210L

VOID: R/I
12 07/15/15 00:48

Subject Name

Monthly Maintenance

Subject I.D.

RFI Test

Operator Name, I.D.

Scott Craig 250048

Location

147 South Main St.

Laurie, MO 65038

AS IV Serial no: 099365
Version no: 532B

TEST RECORD 00318

Temp Date Time ^{g/} 210L

Air Blank:
07/15/15 00:53 .000
Calibration Check:
25 07/15/15 00:53 .101

Subject Name

Monthly Maintenance

Subject I.D.

Test #2

Operator Name, I.D.

Scott Craig 250048

Location

147 South Main St.

Laurie, MO 65038



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

2

PERMIT
TYPE II
SCOTT D CRAIG

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 308.111 through 308.119 RSMo.

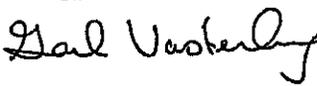
DATE 2/20/2015

NUMBER 250048

EXPIRES 2/20/2017

MO 580-0771 (8-10)


DIRECTOR OF STATE PUBLIC HEALTH LABORATORY


acting director
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (18-10)

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 **CRAIG, SCOTT**
Permit No **250048**
Date issued **2/20/2015** Date Expires **2/20/2017**