



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 8:57 am, Mar 10, 2015

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.

ALCO SENSOR IV SN 107993	PRINTER SN 099.3586.836	DATE OF INSPECTION 03/09/2015
LOCATION OF INSTRUMENT (STREET AND CITY) 9623 St Charles Rock Road St Louis MO 63114 (Breckenridge Hills PD)		TIME OF INSPECTION 11:42 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 # 14200 EXP. DATE 08/05/2016

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIMULATOR SN SD2309 SIMULATOR EXP DATE 06/02/2015

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 <input checked="" type="checkbox"/> .100	TEST 2 <input checked="" type="checkbox"/> .101	TEST 3 <input checked="" type="checkbox"/> .101
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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
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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 Brian Keller
TYPE II PERMIT NUMBER/EXPIRATION DATE 240276 03/16/16	TELEPHONE NUMBER (314) 426-1214

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.**

650 NORTH 67th STREET • HARRISBURG, PA 17111-4811 • TELEPHONE: 717-684-6470

**CERTIFICATE OF ANALYSIS****Certified Alcohol Reference Solution for Simulator**

Random Samples of Lot Number 14200 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on August 6, 2014, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1213% (w/vol) ethyl alcohol. The expiration date for this lot number is August 5, 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: 107993  
Version no: 532B

TEST RECORD 00151

Temp Date Time <sup>s/</sup> 210L

Air Blank:  
03/09/15 12:07 .000  
Calibration Check:  
25 03/09/15 12:07 .101

Subject Name

*MAINTENANCE*

Subject I.D.

*PO De #277*

Operator Name, I.D.

*9623 MO-180*

Location

*St Louis MO 63114*

AS IV Serial no: 107993  
Version no: 532B

TEST RECORD 00150

Temp Date Time <sup>s/</sup> 210L

Air Blank:  
03/09/15 12:01 .000  
Calibration Check:  
24 03/09/15 12:01 .101

Subject Name

*MAINTENANCE*

Subject I.D.

*PO De #277*

Operator Name, I.D.

*9623 MO-180*

Location

*St Louis MO 63114*

AS IV Serial no: 107993  
Version no: 532B

TEST RECORD 00152

Temp Date Time <sup>s/</sup> 210L

VOID: RFI  
12 03/09/15 12:09

Subject Name

*MAINTENANCE*

Subject I.D.

*PO De #277*

Operator Name, I.D.

*9623 MO-180*

Location

*St Louis MO 63114*

AS IV Serial no: 107993  
Version no: 532B

TEST RECORD 00149

Temp Date Time <sup>s/</sup> 210L

Air Blank:  
03/09/15 11:58 .000  
Calibration Check:  
24 03/09/15 11:58 .100

Subject Name

*MAINTENANCE*

Subject I.D.

*PO De #277*

Operator Name, I.D.

*9623 MO-180*

Location

*St Louis MO 63114*



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



PERMIT  
TYPE II

**BRIAN P KELLER**

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: 6/13/2014

NUMBER 240276

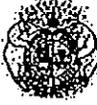
EXPIRES 6/13/2016

MO 589.0771 (6-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB 4 (10-10)

 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 KELLER, BRIAN  
Permit No 240276  
Date issued 6/13/2014 . Date Expires 6/13/2016