



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

**RECEIVED**

By Carol Day at 2:00 pm, Jun 08, 2015

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 108264	PRINTER SN 099.3586.827	DATE OF INSPECTION 06/08/2015
LOCATION OF INSTRUMENT (STREET AND CITY) 315 S. Hudson, Buckner MO 64016		TIME OF INSPECTION 8:30 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 LOT # 13290 EXP. DATE 10/29/2015

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIMULATOR SN 2757 SIMULATOR EXP DATE 02/26/2016

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 → 1.00

TEST 2 → 1.00

TEST 3 → .99

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)	1	(.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  
Officer Lauren Onka

TYPE OF PERMIT NUMBER/EXPIRATION DATE  
240421 11-24-2016

TELEPHONE NUMBER  
(816) 650-3939

Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office  
 2875 Jarnes Boulevard  
 Poplar Bluff, MO 63901





## GUTH LABORATORIES, INC.

890 NORTH 87th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

### CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 13290 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on October 31, 2013, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1202% (w/vol) ethyl alcohol. The expiration date for this lot number is October 29, 2015 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: 108264  
Version no: 532B

TEST RECORD 00081

9/

Temp Date Time 210L

UID: KFI

12 06/08/15 07:40

Subject Name

Subject I.B.

Operator Name, I.D.

Location

AS IV Serial no: 108264  
Version no: 532B

TEST RECORD 00080

9/

Temp Date Time 210L

Air Blank:

06/08/15 07:35 .000

Subject Test: Auto  
22 06/08/15 07:35 .099

Subject Name

Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 108264  
Version no: 532B

TEST RECORD 00079

9/

Temp Date Time 210L

Air Blank:

06/08/15 07:34 .000

Subject Test: Auto  
21 06/08/15 07:34 .100

Subject Name

Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 108264  
Version no: 532B

TEST RECORD 00078

9/

Temp Date Time 210L

Air Blank:

06/08/15 07:32 .000

Subject Test: Auto  
21 06/08/15 07:32 .100

Subject Name

Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 108264  
Version no: 532B

TEST RECORD 00073

9/

Temp Date Time 210L

Air Blank:

06/08/15 07:15 .000

Calibration Check:

18 06/08/15 07:15 .000

Subject Name

Subject I.D.

Operator Name, I.D.

Location



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

2

PERMIT  
TYPE II

LAUREN R ONKA

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 11/24/2014

NUMBER 240421

EXPIRES 11/24/2016

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

acting director

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 235-0771 (6-10)

LAB-4 (1/13-10)

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

**INSTRUMENT OPERATOR CARD**

*The named certificatee is authorized to operate an evidential breath alcohol instrument for the determination of the alcoholic content in breath from a person in Missouri.*

Operator ONKA, LAUREN  
Permit No 240421  
Date Issued 11/24/2014 Date Expires 11/24/2016