



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

RECEIVED
 By Carol Day at 8:37 am, Mar 26, 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 108392	PRINTER SN 099.3586.814	DATE OF INSPECTION 03/25/2015
LOCATION OF INSTRUMENT (STREET AND CITY) 5490 5th Street, Cottleville, Missouri 63304		TIME OF INSPECTION 8:03 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 Laboratories, INC LOT # 14200 EXP. DATE 08/05/2016
- SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34C SIMULATOR SN SD2588 SIMULATOR EXP DATE 01/29/2015
- 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 \blacklozenge .093	TEST 2 \blacklozenge .093	TEST 3 \blacklozenge .093
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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	1	(0-.04)	0	(.05-.09)	1	(.10-.14)	0	(.15-.19)	2	(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).

Changed battery.

INSPECTING OFFICER

SIGNATURE <i>Jamie E. Snodgrass</i>	PRINT NAME Jamie E. Snodgrass, 440
TYPE II PERMIT NUMBER/EXPIRATION DATE 250067/03/25/2017	TELEPHONE NUMBER (636) 498-6464

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.**

690 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 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: 100392
Version no: 532B

TEST RECORD 00107

Temp Date Time ^{s/} 210L

Air Blank:
03/25/15 20:07 .000
Calibration Check:
23 03/25/15 20:07 .093

Subject Name

Test 3

Subject I.D.

Operator Name, I.D.

Snodgrass, J. 440

Location

Cottleville P.D.

AS IV Serial no: 100392
Version no: 532B

TEST RECORD 00106

Temp Date Time ^{s/} 210L

Air Blank:
03/25/15 20:05 .000
Calibration Check:
23 03/25/15 20:05 .093

Subject Name

Test 2

Subject I.D.

Operator Name, I.D.

Snodgrass, J. 440

Location

Cottleville P.D.

AS IV Serial no: 100392
Version no: 532B

TEST RECORD 00105

Temp Date Time ^{s/} 210L

Air Blank:
03/25/15 20:03 .000
Calibration Check:
22 03/25/15 20:03 .092

Subject Name

Test 1

Subject I.D.

Operator Name, I.D.

Snodgrass, J. 440

Location

Cottleville P.D.

AS IV Serial no: 100392
Version no: 532B

TEST RECORD 00108

Temp Date Time ^{s/} 210L

NOTE: REI
12 03/25/15 20:09

Subject Name

REI Test

Subject I.D.

Operator Name, I.D.

Snodgrass, J. 440

Location

Cottleville P.D.



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



**PERMIT
TYPE II**

JAMIE E SNODGRASS

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 3/25/2015

NUMBER 250067

EXPIRES 3/25/2017

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

KO 689-0771 (8-13)

LAB-4 (08-10)

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 SNODGRASS, JAMIE
Permit No 250067
Date Issued 3/25/2015 Date Expires 3/25/2017