



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

RECEIVED
By Carol Day at 4:23 pm, Aug 23, 2016

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 091409	PRINTER SN 096.3580.871	DATE OF INSPECTION 08/11/2016
LOCATION OF INSTRUMENT (STREET AND CITY) Steelville Police Department 895 Frisco St. Steelville MO 65565		TIME OF INSPECTION 1:05 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 LOT # 14220 EXP. DATE 09/24/2016
- SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIMULATOR SN SD2767 SIMULATOR EXP DATE 08/05/2017

- 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 ➔ .095	TEST 2 ➔ .096	TEST 3 ➔ .096
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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).

Instrument operating within the limits set forth by the Missouri Department of Health.

INSPECTING OFFICER	
SIGNATURE ➔ <i>Adam Reed</i>	PRINT NAME Sgt. Adam D. Reed
TYPE II PERMIT NUMBER/EXPIRATION DATE 250008 01/02/2017	TELEPHONE NUMBER (573) 775-2200

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 **14220** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **September 25, 2014**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.1209%** (w/vol) ethyl alcohol. The expiration date for this lot number is **September 24, 2016** at 11:59 PM.

When used in a calibrated Simulator, operating at $34^{\circ}\text{C} \pm .2^{\circ}\text{C}$, this solution will give a breath alcohol analysis instrument reading of **0.100 g/210L \pm 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.



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



**PERMIT
 TYPE II**

ADAM D REED

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 1/2/2015

NUMBER 250008

EXPIRES 1/2/2017

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

,acting director

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

LAB-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 REED, ADAM
 Permit No 250008
 Date Issued 1/2/2015 Date Expires 1/2/2017

AS IV Serial no: 097409
Version no: 004C

TEST RECORD 00427 s/
Temp Date Time 210L

Air Blank:
08/11/16 13:09 .000
Calibration Check:
23 08/11/16 13:09 .096

Subject Name

Subject I.D.

Operator Name, I.D.

Adam Reed #401

Location

Steelville PD

895 Frisco St. Steelville MO

65565

AS IV Serial no: 097409
Version no: 004C

TEST RECORD 00426 s/
Temp Date Time 210L

Air Blank:
08/11/16 13:07 .000
Calibration Check:
22 08/11/16 13:07 .096

Subject Name

Subject I.D.

Operator Name, I.D.

Adam Reed #401

Location

895 Frisco St. Steelville MO

65565 - Steelville PD

AS IV Serial no: 097409
Version no: 004C

TEST RECORD 00425 s/
Temp Date Time 210L

Air Blank:
08/11/16 13:05 .000
Calibration Check:
22 08/11/16 13:05 .095

Subject Name

Subject I.D.

Operator Name, I.D.

Adam Reed #401

Location

895 Frisco St. Steelville MO

65565 - Steelville PD

AS IV Serial no: 097409
Version no: 004C

TEST RECORD 00428 s/
Temp Date Time 210L

Void: RFI
12 08/11/16 13:10

Subject Name
Subject I.D.

Operator Name, I.D.
Adam Reed #401

Location
895 Frisco St. Steelville MO

65565 - Steelville PD