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By Carol Day at 11:34 am, Aug 29, 2016

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

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 099360	PRINTER SN 0972584335	DATE OF INSPECTION 08/23/2016
LOCATION OF INSTRUMENT (STREET AND CITY) 540 Civic Blvd. Republic		TIME OF INSPECTION 9:24 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 LOT # 16040 EXP. DATE 01/20/2018 SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIMULATOR SN sd3326 SIMULATOR EXP DATE 01/06/2017 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 .102

TEST 2 .101

TEST 3 .102

 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

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).

The instrument meets all Department of Health Guidelines.

INSPECTING OFFICER

SIGNATURE

PRINT NAME

Frank Schreiber

TYPE II PERMIT NUMBER/EXPIRATION DATE

250095/ 05/11/2017

TELEPHONE NUMBER

(417) 732-3953

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



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

2

**PERMIT
 TYPE II**

FRANK B SCHREIBER

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, INTOX EC/IR II

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 5/11/2015

NUMBER 250095

EXPIRES 5/11/2017

MO 580-0771 (6-12)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAE-4 (06/10)



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 SCHREIBER, FRANK
 Permit No 250095
 Date Issued 5/11/2015 Date Expires 5/11/2017

AS IV Serial no: 099360
Version no: 532B

TEST RECORD 00458 s/
Temp Date Time 210L

Air Blank: 08/23/16 21:24 .000
Subject Test: Auto
20 08/23/16 21:24 .000

Subject Name

Subject I.D.

Frank Schreiber
Operator Name, I.D.
250095 05/11/2017
Location

AS IV Serial no: 099360
Version no: 532B

TEST RECORD 00459 s/
Temp Date Time 210L

Air Blank: 08/23/16 21:25 .000
Calibration Check:
20 08/23/16 21:25 .102

Subject Name

Subject I.D.

Frank Schreiber
Operator Name, I.D.
250095 05/11/2017
Location

AS IV Serial no: 099360
Version no: 532B

TEST RECORD 00462 s/
Temp Date Time 210L

VOID: RFI
12 08/23/16 21:29

Subject Name

Subject I.D.

Frank Schreiber
Operator Name, I.D.
250095 05/11/2017
Location

AS IV Serial no: 099360
Version no: 532B

TEST RECORD 00460 s/
Temp Date Time 210L

Air Blank: 08/23/16 21:27 .000
Calibration Check:
21 08/23/16 21:27 .102

Subject Name

Subject I.D.

Frank Schreiber
Operator Name, I.D.
250095 05/11/2017
Location

AS IV Serial no: 099360
Version no: 532B

TEST RECORD 00461

Temp Date Time 210L s/

Air Blank: 08/23/16 21:28 .000
Calibration Check:
22 08/23/16 21:28 .101

Subject Name

Subject I.D.

Frank Schreiber
Operator Name, I.D.
250095 05/11/2017
Location



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 **16040** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **January 22, 2016**, 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 **January 20, 2018** 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.