



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 <u>099361</u>	PRINTER SN <u>0973584336</u>	DATE OF INSPECTION <u>4-5-2016</u>
LOCATION OF INSTRUMENT (STREET AND CITY) <u>106 W 3rd St Garden City MO 64747</u>		TIME OF INSPECTION <u>1230</u>

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 # 15050 EXP. DATE 3/9/17

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0°C SIMULATOR SN SD2314 SIMULATOR EXP DATE 11-3-16

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 = <u>.099</u>	TEST 2 = <u>.099</u>	TEST 3 = <u>1.100</u>
----------------------	----------------------	-----------------------

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 <u>0</u>	(0-.04) <u>0</u>	(.05-.09) <u>0</u>	(.10-.14) <u>0</u>	(.15-.19) <u>0</u>	(OVER .19) <u>0</u>
-------------------	------------------	--------------------	--------------------	--------------------	---------------------

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 <u>[Signature]</u>	PRINT NAME <u>Richard D Williams</u>
TYPE II PERMIT NUMBER/EXPIRATION DATE <u>250305 12/22/2017</u>	TELEPHONE NUMBER <u>(816) 773-8201</u>

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 17111-4611 • TELEPHONE: 717-664-6470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 15050 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on March 11, 2015, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1218% (w/vol) ethyl alcohol. The expiration date for this lot number is March 9, 2017 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 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.

AS IV Serial no: 099361
Version no: 532B

TEST RECORD 00316

Temp Date Time ^{9/} 210L

Air Blank:
04/05/16 18:45 .000
Calibration Check:
19 04/05/16 18:45 .099

Subject Name

Richard D. Williams
Subject I.D.
712

Operator Name, I.D.

250305

Location

CCPD

AS IV Serial no: 099361
Version no: 532B

TEST RECORD 00317

Temp Date Time ^{9/} 210L

Air Blank:
04/05/16 18:47 .000
Calibration Check:
20 04/05/16 18:47 .099

Subject Name

Richard D. Williams
Subject I.D.
712

Operator Name, I.D.

250305

Location

CCPD

AS IV Serial no: 099361
Version no: 532B

TEST RECORD 00318

Temp Date Time ^{9/} 210L

Air Blank:
04/05/16 18:49 .000
Calibration Check:
21 04/05/16 18:49 .100

Subject Name

Richard D. Williams
Subject I.D.
712

Operator Name, I.D.

250305

Location

CCPD

AS IV Serial no: 099361
Version no: 532B

TEST RECORD 00319

Temp Date Time ^{9/} 210L

VOID: RFI
12 04/05/16 18:50

Subject Name

Richard D. Williams
Subject I.D.
712

Operator Name, I.D.

250305

Location

CCPD



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



**PERMIT
TYPE II**

RICHARD D WILLIAMS

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

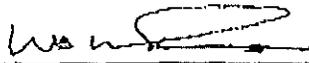
ALCO-SENSOR IV WITH PRINTER

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 12/22/2015

NUMBER 250305

EXPIRES 12/22/2017


DIRECTOR OF STATE PUBLIC HEALTH LABORATORY


DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MD 560-0771 (6-10)

LAD-1 (R0-10)

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 WILLIAMS, RICHARD
Permit No 250305
Date Issued 12/22/2015 Date Expires 12/22/2017