



**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 105443	PRINTER SN 099.3586.172	DATE OF INSPECTION 01/21/2016
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LOCATION OF INSTRUMENT (STREET AND CITY) 100 Municipal Cir. Raymore	TIME OF INSPECTION 10:30 am
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**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) 21°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 # 15220      EXP. DATE 09/28/2017

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0      SIMULATOR SN SD2256      SIMULATOR EXP DATE 07/21/2016

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 • .098	TEST 2 • .098	TEST 3 • .099
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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)	1	(.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).

**INSPECTING OFFICER**

SIGNATURE <i>Joshua Giacone #911</i>	PRINT NAME Joshua Giacone
TYPE II PERMIT NUMBER/EXPIRATION DATE 240201 04/30/2016	TELEPHONE NUMBER (816) 331-0530

**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

AS IV Serial no: 105443  
Version no: 532B

TEST RECORD 00479

Temp Date Time 210L<sup>s/</sup>

Air Blank:  
01/21/16 10:28 .000  
Calibration Check:  
21 01/21/16 10:28 .098

Subject Name

Maintenance

Subject I.D.

Giacone

Operator Name, I.D.

Raymore P.O.

Location

AS IV Serial no: 105443  
Version no: 532B

TEST RECORD 00481

Temp Date Time 210L<sup>s/</sup>

Air Blank:  
01/21/16 10:32 .000  
Calibration Check:  
.22 01/21/16 10:32 .099

Subject Name

Maintenance

Subject I.D.

Giacone

Operator Name, I.D.

Raymore P.O.

Location

AS IV Serial no: 105443  
Version no: 532B

TEST RECORD 00480

Temp Date Time 210L<sup>s/</sup>

Air Blank:  
01/21/16 10:30 .000  
Calibration Check:  
22 01/21/16 10:30 .098

Subject Name

Maintenance

Subject I.D.

Giacone

Operator Name, I.D.

Raymore P.O.

Location

AS IV Serial no: 105443  
Version no: 532B

TEST RECORD 00482

Temp Date Time 210L<sup>s/</sup>

VOID: RFI  
12 01/21/16 10:34

Subject Name

Maintenance

Subject I.D.

Giacone

Operator Name, I.D.

Raymore P.O.

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 **15220** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **September 30, 2015**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.1214%** (w/vol) ethyl alcohol. The expiration date for this lot number is **September 28, 2017** 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.



Missouri Department of Health and Senior Services  
P.O. Box 570, Jefferson City, MO 65102-0570 Phone: 573-751-6400 FAX: 573-751-6010  
RELAY MISSOURI for Hearing and Speech Impaired 1-800-735-2986 VOICE 1-800-735-2466  
Gail Vasterling  
Director



Jeremiah W. (Jay) Nixon  
Governor

Missouri Department of Health and Senior Services Breath Alcohol Program

***SIMULATOR CALIBRATION REPORT***

This is to certify that the simulator listed below has been examined and tested using standards traceable to the National Institute of Standards and Technology (NIST) in accordance to the standards set by the Rules of Missouri Department of Health and Senior Services, 19 CSR 25-30.

**SIMULATOR INFORMATION**

Agency: Raymore Police Department  
Serial Number: SD2256  
Manufacturer: Guth  
Model Number: 10-4D

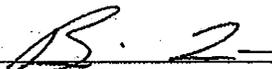
**CALIBRATION RESULTS**

<u>Reference Temperature</u>	<u>Simulator Temperature</u>
33.99	34.0

This calibration was performed with  
NIST-Traceable Thermometer SN: 093752

This simulator was tested by: DRL

This testing was performed: 07/21/2015

Signature of certifying DHSS Scientist: 

Name of certifying DHSS Scientist: Brian M. Lutmer



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



**PERMIT  
TYPE II**

**JOSHUA B GIACONE**

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 806.111 through 806.119 RSMo.

DATE 4/30/2014

NUMBER 240201

EXPIRES 4/30/2016

MO-689-9771 (6-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (66-10)



**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 **GIACONE, JOSHUA**  
Permit No **240201**  
Date Issued **4/30/2014**    Date Expires **4/30/2016**