



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

RECEIVED
 By Carol Day at 11:49 am, Mar 08, 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 105444	PRINTER SN 096.3580.865	DATE OF INSPECTION 03/05/2016
LOCATION OF INSTRUMENT (STREET AND CITY) Clever Police Department 304 S. Clarke, Clever, Missouri 65631		TIME OF INSPECTION 11:00 am

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 03/09/2017
- SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIMULATOR SN SD2259 SIMULATOR EXP DATE 02/16/2017

- 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 <i>RF</i> .097	TEST 2 <i>RF</i> .098	TEST 3 <i>RF</i> .098
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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).

INSPECTING OFFICER	
SIGNATURE <i>Chief R. Bruce</i>	PRINT NAME Chief R. Bruce
TYPE II PERMIT NUMBER/EXPIRATION DATE PermintNumber 250082 Expired 05/11/2017	TELEPHONE NUMBER (417) 743-2544

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: 185444
Version no: 532B

AS IV Serial no: 185444
Version no: 532B

AS IV Serial no: 185444
Version no: 532B

TEST RECORD 88364

TEST RECORD 88365

TEST RECORD 88367

Temp Date Time [✓] 218L

Temp Date Time [✓] 218L

Temp Date Time [✓] 218L

Air Blank:
03/05/16 11:00 .000
Subject Test: Auto
21 03/05/16 11:00 .000

VOID: RFI
12 03/05/16 11:00

Air Blank:
03/05/16 11:10 .000
Calibration Check:
23 03/05/16 11:10 .097

Subject Name

Subject Name

Subject Name

Blank

RFI

Test 1

Subject I.D.

Subject I.D.

Subject I.D.

Operator Name, I.D.

Operator Name, I.D.

Operator Name, I.D.

Chief R. Bruce 1801

Chief R. Bruce 1801

Chief R. Bruce

Location

Location

Location

Clever PA

Clever PA

Clever P.D.

304 S. Clarke

304 S. Clarke

304 S. Clarke

AS IV Serial no: 185444
Version no: 532B

AS IV Serial no: 185444
Version no: 532B

TEST RECORD 88368

TEST RECORD 88369

Temp Date Time [✓] 218L

Temp Date Time [✓] 218L

Air Blank:
03/05/16 11:20 .000
Calibration Check:
24 03/05/16 11:20 .098

Air Blank:
03/05/16 11:22 .000
Calibration Check:
24 03/05/16 11:22 .098

Subject Name

Subject Name

Test 2

test 3

Subject I.D.

Subject I.D.

Operator Name, I.D.

Operator Name, I.D.

Chief R. Bruce

Chief R. Bruce

Location

Location

Clever PP

Clever PP

304 S. Clarke

304 S. Clarke



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



PERMIT
 TYPE II

RANDALL E BRUCE

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 5/11/2015

NUMBER 250082

EXPIRES 5/11/2017

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 250082-01-01-02

LAB 400 101

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 BRUCE, RANDALL
 Permit No 250082
 Date Issued 5/11/2015 Date Expires 5/11/2017



GUTH LABORATORIES, INC.

590 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-664-5470

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 SN: 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.

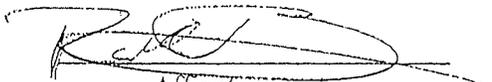
State of Missouri)
)
County of Christian)

AFFIDAVIT

Before me, the undersigned authority, personally appeared Randall E. Bruce, who, being by me duly sworn, deposed as follows:

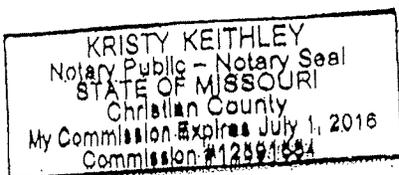
My name is Randall E. Bruce, I am of sound mind, capable of making this affidavit, and personally acquainted with the facts herein stated:

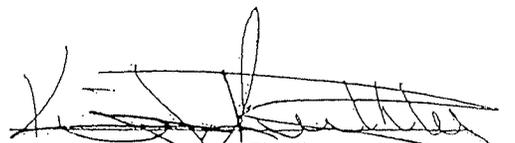
I am the custodian of records for the Clever Police Department Alco-Sensor IV, located at the Clever Police Department. Attached hereto are 5 pages from my Alco-Sensor IV records. The 4 pages of records are kept by me, in the regular course of business, and it was the regular course of business of the Clever Police Department for an employee or representative of the Clever Police Department, with knowledge of the act, event, condition opinion, or diagnosis recorded to make the record or to transmit information thereof to be included in such record; and the record was made at or near the time of the act, event, condition, opinion, or diagnosis. The records attached hereto are the original or exact duplicates of the original.


Affiant

State of Missouri
County of Christian

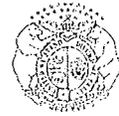
Subscribed and sworn to before me this 12 day of May in the year 20 15




Notary Public



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 1-800-735-2966 VOICE 1-800-735-2466
 Peter Lyskowski
 Director



Jeremiah W. (Jay) Nixon
 Governor

SIMULATOR CERTIFICATION REPORT

SIMULATOR INFORMATION

Simulator Serial Number: SD2259 Manufacturer: Guth
 Model Number: 10-4D
 Agency: CLEVER PD
 Agency Address: 304 S CLARKE ST, CLEVER, MO 65631

NIST THERMOMETER INFORMATION

Serial Number: 093752 Bias: 0.00
 Uncertainty: 0.02
 Date of Certification: 9/8/2015 Date of Expiration: 9/8/2016

ENVIRONMENTAL CONDITIONS

The environmental conditions during testing are within the tolerances of DHSS BAP method 3.

VERIFICATION RESULTS

<u>Simulator Average</u>	<u>NIST Average</u>	<u>Combined Uncertainty</u>
34.00	33.99	0.03

The combined uncertainty is calculated with a k=2 value.

ADJUSTMENT RESULTS

No adjustment was needed.

Date of testing: 2/16/2016
 Certification Expiration: 2/16/2017
 Simulator testing technician: D. LUCAS

Notes on Condition: none

Deviation(s) from method: none

DHSS BAP Scientist Approving: ELLEN STRAWSINE
 Certification No: SD2259_2162016

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DHSS BAP Scientist Approving