



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

**RECEIVED**

By Ellen Strawsine at 4:49 pm, Jan 12, 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 105448	PRINTER SN 09B.3591.016	DATE OF INSPECTION 01/07/2016
LOCATION OF INSTRUMENT (STREET AND CITY) 101 East Ohio Street, Clinton		TIME OF INSPECTION 12:59 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 # 15120

EXP. DATE 04/29/2017

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34C SIMULATOR SN SD3509 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 ← .103

TEST 2 ← .102

TEST 3 ← .101

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).

**INSPECTING OFFICER**

SIGNATURE 	PRINT NAME Christopher Wright
TYPE II PERMIT NUMBER/EXPIRATION DATE 205102 05/11/2017	TELEPHONE NUMBER (660) 885-2679

**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: 105448  
Version no: 532B

TEST RECORD 00437

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

Air Blank:  
01/07/16 12:59 .000  
Subject Test: Auto  
21 01/07/16 12:59 .103

Subject Name

*Test 1*

Subject I.D.

Operator Name, I.D.

*Wright 205102*

Location

*101 E. Ohio*

AS IV Serial no: 105448  
Version no: 532B

TEST RECORD 00438

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

Air Blank:  
01/07/16 13:01 .000  
Subject Test: Auto  
21 01/07/16 13:01 .102

Subject Name

*Test 2*

Subject I.D.

Operator Name, I.D.

*Wright 205102*

Location

*101 E. Ohio*

AS IV Serial no: 105448  
Version no: 532B

TEST RECORD 00439

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

Air Blank:  
01/07/16 13:03 .000  
Subject Test: Auto  
22 01/07/16 13:03 .101

Subject Name

*Test 3*

Subject I.D.

Operator Name, I.D.

*Wright 205102*

Location

*101 E. Ohio*

AS IV Serial no: 105448  
Version no: 532B

TEST RECORD 00440

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

VOID: RFI  
12 01/07/16 13:04

Subject Name

*Test RFI*

Subject I.D.

Operator Name, I.D.

*Wright 205102*

Location

*101 E. Ohio St.*



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



**PERMIT  
TYPE II**

**CHRISTOPHER J WRIGHT**

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 **250102**

EXPIRES **5/11/2017**

MO 577-020

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

128-10015

**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 of breath form of expired air in Missouri.*

Operator: WRIGHT, CHRISTOPHER  
Permit No: 250102  
Date issued 5/11/2015 Date Expires 5/11/2017

**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 **15120** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **May 4, 2015**, 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 **April 29, 2017** at 11:59 PM.

When used in a calibrated Simulator, operating at  $34^{\circ}\text{C} \pm 0.2^{\circ}\text{C}$ , 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.*