



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 105449 PRINTER SN 097.3585.012 DATE OF INSPECTION 03-04-2016

LOCATION OF INSTRUMENT (STREET AND CITY) 200 HIGHLANDS BLVD DR MANCHESTER MO 63011 TIME OF INSPECTION 1120

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) 26°C

PRINTER WORKING PROPERLY

TIME AND DATE DISPLAYING PROPERLY

BREATH ALCOHOL ACCURACY STANDARDS

SIMULATOR SOLUTION

COMPRESSED ETHANOL-GAS MIXTURE

STANDARD SUPPLIER GPX

LOT # 16086 EXP DATE 03-02-2018

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.6°C SIMULATOR SN 502293 SIMULATOR EXP DATE 10-13-2014

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 0.101 TEST 2 0.102 TEST 3 0.102

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)

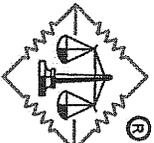
List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary).

INSPECTING OFFICER

SIGNATURE Sgt. [Signature] PRINT NAME Sgt. [Signature]

TYPE II PERMIT NUMBER/EXPIRATION DATE 250022 / 10-14-2017 TELEPHONE NUMBER (636) 227-1410

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.

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 **16080** of
Alcohol Reference Solution for Simulator were analyzed by
gas chromatography on **March 9, 2016**, using a Perkin Elmer Gas
Chromatograph Autosystem XL S/N: 610N9030209, and found to contain
0.1210% (w/vol) ethyl alcohol. The expiration date for this lot
number is **March 7, 2018** at 11:59 P.M.

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 Cerriliant 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
 DEPARTMENT OF HEALTH AND SENIOR SERVICES
 BREATH ALCOHOL PROGRAM



PERMIT
TYPE II

DAN E WEST

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 10/14/2015


 DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

NUMBER 250222



DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

EXPIRES 10/14/2017

MO 580-0771 (6-10)

LAB-4 (R6-10)



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 WEST, DAN
 Permit No 250222
 Date Issued 10/14/2015 Date Expires 10/14/2017

AS IV Serial no: 105449
Version no: 532B

TEST RECORD 00341 ^{g/}

Temp Date Time 210L
Air Blank:
09/04/16 11:26 .000
Calibration Check:
20 09/04/16 11:26 .101

Subject Name

Subject I.D.

Operator Name, I.D.

Location

S. J. W.

AS IV Serial no: 105449
Version no: 532B

TEST RECORD 00343 ^{g/}

Temp Date Time 210L
Air Blank:
09/04/16 11:30 .000
Calibration Check:
21 09/04/16 11:30 .102

Subject Name

Subject I.D.

Operator Name, I.D.

Location

S. J. W.

AS IV Serial no: 105449
Version no: 532B

TEST RECORD 00342 ^{g/}

Temp Date Time 210L
Air Blank:
09/04/16 11:29 .000
Calibration Check:
21 09/04/16 11:29 .102

Subject Name

Subject I.D.

Operator Name, I.D.

Location

S. J. W.

AS IV Serial no: 105449
Version no: 532B

TEST RECORD 00344 ^{g/}

Temp Date Time 210L
VOID: RFI
12 09/04/16 11:32

Subject Name

Subject I.D.

Operator Name, I.D.

Location

S. J. W.