



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

REPORT #7

RECEIVED
 By Carol Day at 9:14 am, Feb 03, 2016

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 108263	PRINTER SN 099.3586.834	DATE OF INSPECTION 02/02/2016
LOCATION OF INSTRUMENT (STREET AND CITY) 4305 Woodson Rd., Woodson Terrace		TIME OF INSPECTION 5:03 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 # 15220 EXP. DATE 09/28/2017

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIMULATOR SN DR3942 SIMULATOR EXP DATE 04/24/2016

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 ➔ .101%

TEST 2 ➔ .101%

TEST 3 ➔ .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)	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 SGT <i>[Signature]</i> #80	PRINT NAME Sergeant James Simonpietri #80
TYPE II PERMIT NUMBER/EXPIRATION DATE 240283 Expires 6/13/2016	TELEPHONE NUMBER (314) 427-5858

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 **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.

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.



Simulator Calibration Report

This calibration report is to certify the alcohol reference simulator listed below has been examined and tested using standards traceable to the National Institute of Standards and Technology (NIST) in accordance with the standards set by the Missouri Department of Health and Senior Services Rules and Regulations: 19 CSR 25-30.051 (4).

	Woodson Terrace Police Dept.	Avg. Temp. 33.96 Min. Temp. 33.94 Max. Temp. 33.97
Therm serial # 093752 Serial # DR3942		CHECKED BY: RW
		Expiration Date: 04/24/2016 Date Checked: 04/24/2015

Technician Printed Name: ROBERT WELSH

Technician Signature: 

Date: 04/24/2015

Contact: Missouri Safety Center
Breath-Alcohol Instrument Training Program
660-543-4834



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

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PERMIT
 TYPE II

JAMES SIMONPIETRI

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repair 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 6/13/2014

NUMBER 240283

EXPIRES 6/13/2016

MD 599-0771 (6-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-016

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: SIMONPIETRI, JAMES
 Permit No. 240283
 Date Issued 6/13/2014 Date Expires 6/13/2016

AS IV Serial no: 108263
Version no: 532B

TEST RECORD 00216

Temp Date Time ^{s/} 210L

Air Blank:
02/02/16 17:03 .000
Calibration Check:
19 02/02/16 17:03 .101

Subject Name

TEST #1

Subject I.D.

Operator Name, I.D.

SGT JA #80

Location

4305 WOODSON RD

AS IV Serial no: 108263
Version no: 532B

TEST RECORD 00218

Temp Date Time ^{s/} 210L

Air Blank:
02/02/16 17:05 .000
Calibration Check:
20 02/02/16 17:05 .101

Subject Name

TEST #2

Subject I.D.

S

Operator Name, I.D.

SGT JA #80

Location

4305 WOODSON RD

AS IV Serial no: 108263
Version no: 532B

TEST RECORD 00219

Temp Date Time ^{s/} 210L

Air Blank:
02/02/16 17:07 .000
Calibration Check:
21 02/02/16 17:07 .102

Subject Name

TEST #3

Subject I.D.

Operator Name, I.D.

SGT JA #80

Location

4305 WOODSON RD

AS IV Serial no: 108263
Version no: 532B

TEST RECORD 00220

Temp Date Time ^{s/} 210L

VOID: RFI
12 02/02/16 17:08

Subject Name

RFI

Subject I.D.

Operator Name, I.D.

SGT JA #80

Location

4305 WOODSON RD