



ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT RECEIVED 8/6/16-CAROL DAY

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 111639 PRINTER SN 09B.3589.438 DATE OF INSPECTION 8-02-2016

LOCATION OF INSTRUMENT (STREET AND CITY) 402 E. MAIN MARTHAVILLE, MO. 63357 TIME OF INSPECTION 1133 hrs.

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 08-02-16 / 1133 hrs.

BREATH ALCOHOL ACCURACY STANDARDS

SIMULATOR SOLUTION COMPRESSED ETHANOL-GAS MIXTURE

STANDARD SUPPLIER GUTH LABS LOT # 15120 EXP. DATE 4-29-2017

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIMULATOR SN SD2295 SIMULATOR EXP DATE 06-15-17

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 • 106 TEST 2 • 104 TEST 3 • 104

RFI DETECTOR OPERATING Radio Interference

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).

Instrument Tested And Certified Within DHSS STANDARDS.

INSPECTING OFFICER

SIGNATURE E. Ray House PRINT NAME EMMANUEL R. HOUSE

TYPE II PERMIT NUMBER, EXPIRATION DATE 260241 / 06-17-2018 TELEPHONE NUMBER 636.433.2328

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 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 $34^{\circ}\text{C} \pm .2^{\circ}\text{C}$, 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.

Bottle #
484

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.

①

AS IV Serial no: 111639
Version no: 532B

TEST RECORD 00070

Temp Date Time ^{9/} 210L

Air Blank:
08/02/16 11:33 .000
Calibration Check:
23 08/02/16 11:33 .000

Subject Name
SOBER Sample

Subject I.D.
123456789

Operator Name, I.D.
E. RAY House 302

Location
MARTHASVILLE
P.D.

②

AS IV Serial no: 111639
Version no: 532B

TEST RECORD 00074

Temp Date Time ^{9/} 210L

Air Blank:
08/02/16 11:49 .000
Subject Test: Auto
26 08/02/16 11:49 .106

Subject Name
SOBER Sample

Subject I.D.
TEST

Operator Name, I.D.
E. RAY House 302

Location
MARTHASVILLE
P.D.

③

AS IV Serial no: 111639
Version no: 532B

TEST RECORD 00075

Temp Date Time ^{9/} 210L

Air Blank:
08/02/16 11:51 .000
Subject Test: Man
27 08/02/16 11:51 .104

Subject Name
SOBER Sample

Subject I.D.
TEST

Operator Name, I.D.
E. RAY House 302

Location
MARTHASVILLE
P.D.

⑤

AS IV Serial no: 111639
Version no: 532B

TEST RECORD 00077

Temp Date Time ^{9/} 210L

VOID: RFI
12 08/02/16 11:57

Subject Name
SOBER Sample

Subject I.D.
RADIO Interference

Operator Name, I.D.
E. RAY House 302

Location
MARTHASVILLE
P.D.

④

AS IV Serial no: 111639
Version no: 532B

TEST RECORD 00076

Temp Date Time ^{9/} 210L

Air Blank:
08/02/16 11:53 .000
Subject Test: Man
27 08/02/16 11:53 .104

Subject Name
SOBER Sample

Subject I.D.
TEST

Operator Name, I.D.
E. RAY House 302

Location
MARTHASVILLE
P.D.



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



PERMIT
TYPE II
EMMANUEL R HOUSE

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 W/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 6/17/2016

NUMBER 260241

EXPIRES 6/17/2018

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MS-557 (1-01)

LAB-4-036-10

	STATE OF MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES BREATH ALCOHOL PROGRAM
	INSTRUMENT OPERATOR CARD
<i>The permit card holder is authorized to operate an essential breath alcohol instrument for the determination of the alcoholic content in breath form of expired air in Missouri.</i>	
Operator	HOUSE EMMANUEL
Permit No	260241
Date Issued	6/17/2016
Date Expires	6/17/2018