



**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<br>030791   | NAME OF AGENCY<br>Hazelwood Police Department | DATE OF INSPECTION<br>01/13/2023 |
| LOCATION OF INSTRUMENT (STREET AND CITY)<br>415 Elm Grove Ln. Hazelwood, MO 63042 |   | TIME OF INSPECTION<br>10:40 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 Laboratories, INC LOT # 22080 EXP. DATE 03/07/2024

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIM. SN MP6029 SIM. NIST EXP DATE 07/11/2023

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 .098

TEST 2 .098

TEST 3 .099

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).

BA Maintenance 1/13/2023  
Simulator Solution Bottle Number 678

**INSPECTING OFFICER**

SIGNATURE

PRINT NAME  
Jason Corson

TYPE II PERMIT NUMBER/EXPIRATION DATE  
210057 / 4/6/2023

TELEPHONE NUMBER  
(314) 838-5000

**Return completed report to the:** Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office by mail, fax, or email.

AS IV Serial no: 030791  
Version no: 532B

TEST RECORD 00828

Temp Date Time 210L %/

Air Blank: 01/13/23 10:54 .000  
Calibration Check: 22 01/13/23 10:54 .098

Subject Name  
Test #1

Subject I.D.  
Corson 210057

Operator Name, I.D.  
Hazelwood BAT

Location  
Van

AS IV Serial no: 030791  
Version no: 532B

TEST RECORD 00829

Temp Date Time 210L %/

Air Blank: 01/13/23 10:56 .000  
Calibration Check: 23 01/13/23 10:56 .098

Subject Name  
Test #2

Subject I.D.  
Corson 210057

Operator Name, I.D.  
Hazelwood BAT

Location  
Van

AS IV Serial no: 030791  
Version no: 532B

TEST RECORD 00830

Temp Date Time 210L %/

Air Blank: 01/13/23 10:58 .000  
Calibration Check: 23 01/13/23 10:58 .099

Subject Name  
Test #3

Subject I.D.  
Corson 210057

Operator Name, I.D.  
Hazelwood BAT

Location  
Van

AS IV Serial no: 030791  
Version no: 532B

TEST RECORD 00831

Temp Date Time 210L %/

VOID: RFI  
12 01/13/23 10:58

Subject Name  
Test #4

Subject I.D.  
Corson 210057

Operator Name, I.D.  
RFI Test

Location  
Hazelwood BAT

Van

AS IV Serial no: 030791  
Version no: 532B

TEST RECORD 00832

Temp Date Time 210L %/

Air Blank: 01/13/23 11:00 .000  
Subject Test: Auto  
24 01/13/23 11:00 .000

Subject Name  
Test #5

Subject I.D.  
Corson 210057

Operator Name, I.D.  
Blank Test

Location  
Hazelwood BAT

Van





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



Paula Nickelson  
 Acting Director

Michael L. Parson  
 Governor

## SIMULATOR CERTIFICATION REPORT

### SIMULATOR INFORMATION

Simulator Serial Number: MP6029      Manufacturer: Guth  
 Model Number:                            12V500  
 Agency:                                    HAZELWOOD PD  
 Agency Address: 415 ELM GROVE LANE, HAZELWOOD, MO 63042

### NIST THERMOMETER INFORMATION

Serial Number:                            17KMM00690      Bias:                    0.01  
 Uncertainty:                                0.02  
 Date of Certification:                    11/10/2021      Date of Expiration:    11/10/2022

### 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                    | 34.01               | .03                         |

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

### ADJUSTMENT RESULTS

No adjustment was needed.

Date of testing:                            7/11/2022  
 Certification Expiration:                7/11/2023  
 Simulator testing technician: M. BOND

Notes on Condition: none

Deviation(s) from method: none

DHSS BAP Scientist Approving:        BRIANNA MEDRANO  
 Certification No:                            MP6029\_7112022

X *Brianna Medrano*

DHSS BAP Scientist Approving



## GUTH LABORATORIES, INC.

690 NORTH 67th STREET • HARRISBURG, PA 17111-4811 • TELEPHONE: 717-664-5470

### CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 22080 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on March 9, 2022, 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 March 7, 2024 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 Certified Reference Standard lot number RN03052002 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

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**PERMIT**  
**TYPE II**  
**JASON CORSON**

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 4/6/2021

NUMBER 210057

EXPIRES 4/6/2023

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

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** CORSON, JASON  
**Permit No** 210057  
**Date Issued** 4/6/2021    **Date Expires** 4/6/2023