



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

RECEIVED
By: [unclear] Date: 8/17/20, Aug 18, 2020

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 030794 PRINTER SN 84.9324.031 DATE OF INSPECTION 8/4/2020

LOCATION OF INSTRUMENT (STREET AND CITY) 1781 Zumbeth Rd., St Charles, MO 63303 TIME OF INSPECTION 2316hrs

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) ok
- TEMPERATURE OF ALCO SENSOR (10°C - 40°C) ok
- PRINTER WORKING PROPERLY ok
- TIME AND DATE DISPLAYING PROPERLY ok

BREATH ALCOHOL ACCURACY STANDARDS

- SIMULATOR SOLUTION COMPRESSED ETHANOL-GAS MIXTURE

STANDARD SUPPLIER Guth Laboratories, Inc. LOT # 19160 EXP. DATE 7/9/2021

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0°C SIMULATOR SN MP4944 SIMULATOR EXP DATE 5/5/2021

- 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 • .100

- RFI DETECTOR OPERATING ok

INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT: (DO NOT INCLUDE SELF-ADMINISTERED TESTS)

REFUSALS 2 (0-.04) 0 (.05-.09) 0 (.10-.14) 0 (.15-.19) 0 (OVER .19) 1

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 Daniel Gibbons 324 PRINT NAME Daniel Gibbons

TYPE II PERMIT NUMBER/EXPIRATION DATE 290002 1/4/2021 TELEPHONE NUMBER (636) 949-3300

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.

880 NORTH 67th STREET • HARRISBURG, PA 17111-4811 • TELEPHONE: 717-564-6470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 19160 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on July 10, 2019, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1202% (w/vol) ethyl alcohol. The expiration date for this lot number is July 9, 2021 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 Cerilliant Reference Standard lot number FN04271602 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**

DANIEL P GIBBONS

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 1/4/2019

NUMBER 290002

EXPIRES 1/4/2021

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 GIBBONS, DANIEL
Permit No 290002
Date Issued 1/4/2019 Date Expires 1/4/2021



AS IV Serial no: 030794
Version no: 004C

TEST RECORD 01925

Temp Date Time ^{a/} 210L

Air Blank:
08/04/20 23:16 .000
Calibration Check:
19 08/04/20 23:16 .101

Subject Name

Subject I.D.

Operator Name, I.D.

D. Gibbons 324

Location

1781 Zumbetti Rd.

St Charles, Mo 63303

AS IV Serial no: 030794
Version no: 004C

TEST RECORD 01926

Temp Date Time ^{a/} 210L

Air Blank:
08/04/20 23:18 .000
Calibration Check:
20 08/04/20 23:18 .101

Subject Name

Subject I.D.

Operator Name, I.D.

D. Gibbons 324

Location

1781 Zumbetti Rd.

St Charles, Mo 63303

AS IV Serial no: 030794
Version no: 004C

TEST RECORD 01927

Temp Date Time ^{a/} 210L

Air Blank:
08/04/20 23:20 .000
Calibration Check:
21 08/04/20 23:20 .100

Subject Name

Subject I.D.

Operator Name, I.D.

D. Gibbons 324

Location

1781 Zumbetti Rd.

St Charles, Mo 63303

AS IV Serial no: 030794
Version no: 004C

TEST RECORD 01928 ^{a/}

Temp Date Time 210L

Void: RFI
12 08/04/20 23:21

Subject Name

Subject I.D.

Operator Name, I.D.

D. Gibbons 324

Location

1781 Zumbetti Rd.

St Charles, Mo 63303