



ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

RECEIVED

By Tracy Crews at 8:27 am, Nov 05, 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 03079	NAME OF AGENCY Hazelwood Police Department	DATE OF INSPECTION 11/04/2020
LOCATION OF INSTRUMENT (STREET AND CITY) 415 Elm Grove Lane / Hazelwood		TIME OF INSPECTION 1:15 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, Inc LOT # 19370 EXP. DATE 12/09/2021

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.1 SIM. SN SD2742 SIM. NIST EXP DATE 07/15/2021

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 .102

TEST 2 .102

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).

Changed Time on instrument, due to Daylight Savings Time change.

Maint. October 2020

Simulator Solution Bottle Number 1117.

Test #'s 5 and 6 were both INSF SAMP, which are attached with this report.

INSPECTING OFFICER

SIGNATURE

PRINT NAME
Michael A. Monticelli

TYPE II PERMIT NUMBER/EXPIRATION DATE
200263 / 10/08/2022

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: 5328

TEST RECORD 00638

Temp Date Time 210L

VOID: INST SAMP

6 11/04/20 13:58

Subject Name

TEST #6

Subject I.D.

Mannell 200263

Operator Name, I.D.

INST SAMP

Location
HAZELWOOD BAT VAN

AS IV Serial no: 030791
Version no: 5328

TEST RECORD 00638

Temp Date Time 210L

Air Blank:

11/04/20 13:50 .000

Calibration Check:

22 11/04/20 13:50 .102

Subject Name

TEST #1

Subject I.D.

Mannell 200263

Operator Name, I.D.

HAZELWOOD BAT VAN

Location

AS IV Serial no: 030791
Version no: 5328

TEST RECORD 00634

Temp Date Time 210L

Air Blank:

11/04/20 13:52 .000

Calibration Check:

23 11/04/20 13:52 .102

Subject Name

TEST #2

Subject I.D.

Mannell 200263

Operator Name, I.D.

HAZELWOOD BAT VAN

Location

AS IV Serial no: 030791
Version no: 5328

TEST RECORD 00635

Temp Date Time 210L

Air Blank:

11/04/20 13:53 .000

Calibration Check:

24 11/04/20 13:53 .102

Subject Name

TEST #3

Subject I.D.

Mannell 200263

Operator Name, I.D.

HAZELWOOD BAT VAN

Location

AS IV Serial no: 030791
Version no: 5328

TEST RECORD 00636

Temp Date Time 210L

VOID: RFI

12 11/04/20 13:55

Subject Name

TEST #4

Subject I.D.

Mannell 200263

Operator Name, I.D.

RFI TEST

Location

HAZELWOOD BAT VAN

AS IV Serial no: 030791
Version no: 5328

TEST RECORD 00637

Temp Date Time 210L

VOID: INST SAMP

6 11/04/20 13:56

Subject Name

TEST #5

Subject I.D.

Mannell 200263

Operator Name, I.D.

INST SAMP

Location

HAZELWOOD BAT VAN

AS IV Serial no: 030791
Version no: 5328

TEST RECORD 00639

Temp Date Time 210L

Air Blank:

11/04/20 14:00 .000

Subject Test: Auto

25 11/04/20 14:00 .000

Subject Name

TEST #7

Subject I.D.

Mannell 200263

Operator Name, I.D.

HAZELWOOD BAT VAN

Location

BLANK TEST



GUTH LABORATORIES, INC.

400 NORTH ORCH STREET • HARRISBURG, PA 17111-4611 • TELEPHONE 717-654-6370

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 18370 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on December 6, 2018, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1218% (w/vol) ethyl alcohol. The expiration date for this lot number is December 5, 2020 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 XN04271602 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.



Missouri Department of Health and Senior Services
 P.O. Box 570, Jefferson City, MO 65102-0570 Phone: 878-754-8400 FAX: 878-781-8010
 RELAY MISSOURI for Hearing and Speech Impaired 1-800-735-2888 VOICE 1-800-735-2488
 Randall W. Williams, MD, FAOCG
 Director



Michael L. Parson
 Governor

SIMULATOR CERTIFICATION REPORT

SIMULATOR INFORMATION

Simulator Serial Number: SD2742 Manufacturer: Gulk
 Model Number: 10-4D
 Agency: HAZELWOOD PD
 Agency Address: 415 ELM GROVE LANE, HAZELWOOD, MO 63042

NIST THERMOMETER INFORMATION

Serial Number: 19BMM01307 Bias: 0.00
 Uncertainty: 0.02
 Date of Certification: 6/1/2020 Date of Expiration: 6/1/2021

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	33.95	.11

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

ADJUSTMENT RESULTS

No adjustment was needed.

Date of testing: 7/15/2020
 Certification Expiration: 7/15/2021
 Simulator testing technician: B. LUTMER

Notes on Condition: none

Deviation(s) from method: none

DHSS BAP Scientist Approving: B. LUTMER
 Certification No: SD2742_7152020

X

DHSS BAP Scientist Approving



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

2

**PERMIT
TYPE II**

MICHAEL A MONTICELLI

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 10/8/2020

NUMBER 200263

EXPIRES 10/8/2022

MO 580-0771 (8-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (R8-10)



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 MONTICELLI, MICHAEL
Permit No 200263
Date Issued 10/8/2020 **Date Expires** 10/8/2022

