



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
STATE PUBLIC HEALTH LABORATORY
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 097422	NAME OF AGENCY Newton County Sheriff's Office	DATE OF INSPECTION 12/28/2020
LOCATION OF INSTRUMENT (STREET AND CITY) 208 W. Coler Street Neosho, MO 64850		TIME OF INSPECTION 9:47 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 LOT # 20190 EXP. DATE 04/06/2022

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIM. SN DR6930 SIM. NIST EXP DATE 11/02/2021

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

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

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

PRINT NAME
Joshua Fort

TYPE II PERMIT NUMBER/EXPIRATION DATE
200125 03/09/2022

TELEPHONE NUMBER
(417) 451-8300

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

AS 10 Serial no: 89747
Version no: 502B

TEST RECORD 80396

Temp Date Time 2100

Air Blank:
12/28/20 09:47 .00
Calibration Check:
21 12/28/20 09:47 .100

Subject Name

Test

Subject I.D.

1

Operator Name, I.D.

Joshua Fort 200125

Location Exp. 3/9/22

208 W. Coler St

Neosho, MO 64850

AS 10 Serial no: 89747
Version no: 502B

TEST RECORD 80397

Temp Date Time 2100

Air Blank:
12/28/20 09:49 .00
Calibration Check:
22 12/28/20 09:49 .100

Subject Name

Test

Subject I.D.

2

Operator Name, I.D.

Joshua Fort 200125

Location Exp. 3/9/22

208 W. Coler St

Neosho, MO 64850

AS 10 Serial no: 89747
Version no: 502B

TEST RECORD 80398

Temp Date Time 2100

Air Blank:
12/28/20 09:51 .00
Calibration Check:
27 12/28/20 09:51 .100

Subject Name

Test

Subject I.D.

3

Operator Name, I.D.

Joshua Fort 200125

Location Exp. 3/9/22

208 W. Coler St

Neosho, MO 64850

AS 10 Serial no: 89747
Version no: 502B

TEST RECORD 80400

Temp Date Time 2100

Air Blank:
17 12/28/20 09:50

Subject Name

Test

Subject I.D.

RFI

Operator Name, I.D.

Joshua Fort 200125

Location Exp. 3/9/22

208 W. Coler St

Neosho, MO 64850

AS 10 Serial no: 89747
Version no: 502B

TEST RECORD 80400

Temp Date Time 2100

Air Blank:
18 12/28/20 09:54 .00
Calibration Check:
28 12/28/20 09:54 .100

Subject Name

Test

Subject I.D.

Blank

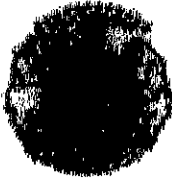
Operator Name, I.D.

Joshua Fort 200125

Location Exp. 3/9/22

208 W. Coler St

Neosho, MO 64850



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



PERMIT
TYPE II
JOSHUA FORT

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

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 808.111 through 808.119 RSMo.

DATE 3/9/2020

NUMBER 200125

EXPIRES 3/9/2022

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4-670-100

MOHSS-0771 (6-10)

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

INSTRUMENT OPERATOR CARD

(This permit authorizes the operator to operate an individual breath alcohol instrument for the determination of the alcoholic content in breath form of expired air.)

Operator: **FORT, JOSHUA**
 Permit No: **200125**
 Date Issued: **3/9/2020** Date Expires: **3/9/2022**



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 **20190** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **April 8, 2020**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.1206%** (w/vol) ethyl alcohol. The expiration date for this lot number is **April 6, 2022** 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 FN02271802 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.