



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 102469 | PRINTER SN 095.353.193 | DATE OF INSPECTION 02/28/2020 |
|-----------------------------|---------------------------|----------------------------------|

| | |
|---|-------------------------------|
| LOCATION OF INSTRUMENT (STREET AND CITY) Lafayette County Sheriff 107 S. 11th Lexington, Mo. 64067 | TIME OF INSPECTION 1:55 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 Labs LOT # 18190 EXP. DATE 06/12/2020

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIMULATOR SN SD2275 SIMULATOR EXP DATE 01/07/2021

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 → .105

TEST 2 → .105

TEST 3 → .103

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).

Meets DOH Standards

INSPECTING OFFICER

SIGNATURE

PRINT NAME
 Dale L. Cox

TYPE II PERMIT NUMBER/EXPIRATION DATE
 280328 11/30/2020

TELEPHONE NUMBER
 (660) 259-3622

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

AS IV Serial no: 102469
Version no: 5328

TEST RECORD 00576

Temp Date Time 210L

Air Blank: 02/28/20 13:54 .000
Calibration Check: 22 02/28/20 13:54 .105

Subject Name

Col. Check

Subject I.D.

Operator Name, I.D.

Cox 280328

Location

LC50

AS IV Serial no: 102469
Version no: 5328

TEST RECORD 00577

Temp Date Time 210L

Air Blank: 02/28/20 13:55 .000
Calibration Check: 22 02/28/20 13:55 .105

Subject Name

Col. Check

Subject I.D.

Operator Name, I.D.

Cox 280328

Location

LC50

AS IV Serial no: 102469
Version no: 5328

TEST RECORD 00578

Temp Date Time 210L

Air Blank: 02/28/20 13:58 .000
Calibration Check: 23 02/28/20 13:58 .100

Subject Name

Col. Check

Subject I.D.

Operator Name, I.D.

Cox 280328

Location

LC50

AS IV Serial no: 102469
Version no: 5328

TEST RECORD 00579

Temp Date Time 210L

Air Blank: 12 02/20/20 14:00

Subject Name

Col. Check

Subject I.D.

Operator Name, I.D.

Cox 280328

Location

LC50

**GUTH LABORATORIES, INC.**

690 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 18190 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on June 14, 2018, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1215% (w/vol) ethyl alcohol. The expiration date for this lot number is June 12, 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 Cerilliant Reference Standard lot number FN04271603 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



PERMIT
TYPE II
DALE L COX

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 DMT

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 11/30/2018

NUMBER 280328

EXPIRES 11/30/2020

MO 590-0771 (6-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (Re-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 **GOX, DALE**
Permit No **280328**
Date Issued **11/30/2018** Date Expires **11/30/2020**