



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 102461	PRINTER SN 096.3580.922	DATE OF INSPECTION 07/24/2020
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LOCATION OF INSTRUMENT (STREET AND CITY) 106 Progress Drive, Sullivan, MO 63080	TIME OF INSPECTION 0730 hours
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**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 # 19370 EXP. DATE 12/09/2021

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIMULATOR SN SD3322 SIMULATOR EXP DATE 12/13/2020

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 <input checked="" type="checkbox"/> .100	TEST 2 <input checked="" type="checkbox"/> .100	TEST 3 <input checked="" type="checkbox"/> .099
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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)	1	(.10-.14)	2	(.15-.19)	0	(OVER .19)	1
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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).  
Instrument operating within D.O.H. specifications.

**INSPECTING OFFICER**

SIGNATURE 	PRINT NAME Jason R. Stockton
TYPE II PERMIT NUMBER/EXPIRATION DATE 290097 - 04/22/2021	TELEPHONE NUMBER 573 468-8001

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

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AS IV Serial no: 182461  
Version no: 532B

TEST RECORD 00827

Temp Date Time <sup>s/</sup> 210L

Air Blank:  
07/24/20 07:31 .000  
Calibration Check:  
25 07/24/20 07:31 .100

Subject Name

Subject I.D.

Operator Name, I.D.

Location

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AS IV Serial no: 182461  
Version no: 532B

TEST RECORD 00828

Temp Date Time <sup>s/</sup> 210L

Air Blank:  
07/24/20 07:33 .000  
Calibration Check:  
26 07/24/20 07:33 .100

Subject Name

Subject I.D.

Operator Name, I.D.

Location

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AS IV Serial no: 182461  
Version no: 532B

TEST RECORD 00829

Temp Date Time <sup>s/</sup> 210L

Air Blank:  
07/24/20 07:35 .000  
Calibration Check:  
27 07/24/20 07:35 .099

Subject Name

Subject I.D.

Operator Name, I.D.

Location

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AS IV Serial no: 182461  
Version no: 532B

TEST RECORD 00830

Temp Date Time <sup>s/</sup> 210L

VOID: RFI  
12 07/24/20 07:36

Subject Name

Subject I.D.

Operator Name, I.D.

Location



## 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 19370 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on December 10, 2019, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1199% (w/vol) ethyl alcohol. The expiration date for this lot number is December 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     )  
  )  
COUNTY OF FRANKLIN )     SS

**AFFIDAVIT FOR RECORDS**

*Before me, the undersigned authority personally appeared, Officer Jason R. Stockton 111, and upon being duly sworn by me deposed as follows:*

My name is Officer Jason R. Stockton 111. I am of sound mind, capable of making this affidavit, and personally acquainted with the facts herein stated:

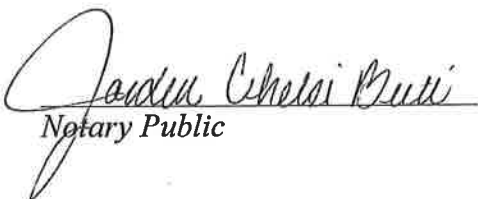
I am the custodian of records for the Sullivan Police department, Alco Sensor IV serial# 102461. Attached hereto are 4 pages of records for the Alco Sensor IV serial# 102461. From the Sullivan Police Department for the month of July 24<sup>th</sup>, 2020. These pages for the instrument are kept by the Sullivan Police department in the regular course of business, and it is with the regular course of business that an employee or representative to make the record or to transmit information thereof to be included in such records. The records attached hereto are the original or exact duplicates of the original. The records attached hereto represent a complete and exact duplication of any and all original records kept by the Franklin County Sheriff's Office in the regular course of business.

Officer Jason R. Stockton 111  
Affiant's Name – typed or printed

  
Affiant's Signature

*In witness whereof, I have hereunto subscribed my name and affixed my official seal this*  
24 day of July, 2020.

*My commission expires:* 10-15-2022

  
Notary Public





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

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**PERMIT**  
**TYPE II**  
**JASON R. STOCKTON**

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 306.111 through 306.119 RSMo.

DATE 4/22/2019

NUMBER 290097

EXPIRES 4/22/2021

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES



**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 STOCKTON, JASON  
Permit No 290097  
Date Issued 4/22/2019 Date Expires 4/22/2021

