



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 107460	PRINTER SN 099.3586.711	DATE OF INSPECTION 06/16/2020
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LOCATION OF INSTRUMENT (STREET AND CITY) 461 W. Arrow Marshall, Missouri 65340 (Marshall Missouri Police Department)	TIME OF INSPECTION 9:52 PM
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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

<input checked="" type="checkbox"/> SIMULATOR SOLUTION	<input type="checkbox"/> COMPRESSED ETHANOL-GAS MIXTURE
<input checked="" type="checkbox"/> STANDARD SUPPLIER <u>Guth Laboratories</u>	LOT # <u>19370</u> EXP. DATE <u>12/09/2021</u>
<input checked="" type="checkbox"/> SIMULATOR TEMPERATURE (34°C ± 0.2°C) <u>34.0</u>	SIMULATOR SN <u>MP4953</u> SIMULATOR EXP DATE <u>10/07/2020</u>

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 .100	TEST 3 .100
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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)	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).

INSPECTING OFFICER

SIGNATURE 	PRINT NAME Joseph E. Valiquette
TYPE II PERMIT NUMBER/EXPIRATION DATE 290294 12/18/2021	TELEPHONE NUMBER (660) 886-7411

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



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



**PERMIT
 TYPE II**

JOSEPH E VALIQUETTE

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 12/18/2019

NUMBER 290294

EXPIRES 12/18/2021

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 VALIQUETTE, JOSEPH
Permit No 290294
Date Issued 12/18/2019 **Date Expires** 12/18/2021





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.



Missouri Department of Health and Senior Services
 P.O. Box 670, Jefferson City, MO 65102-0570 Phone: 573-751-6400 FAX: 573-751-6010
 RELAY MISSOURI for Hearing and Speech Impaired 1-800-785-2866 VOICE 1-800-735-2466
 Rendell W. Williams, MD, FACOG
 Director



Michael L. Parsons
 Governor

SIMULATOR CERTIFICATION REPORT

SIMULATOR INFORMATION

Simulator Serial Number: MP4953 Manufacturer: Guth
 Model Number: 12V500
 Agency: MARSHALL PD
 Agency Address: 461 W ARROW, MARSHALL, MO 65340

NIST THERMOMETER INFORMATION

Serial Number: 17KMM00689 Bias: 0.00
 Uncertainty: 0.02
 Date of Certification: 12/11/2018 Date of Expiration: 12/11/2019

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>
53.98	34.01	.06

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

ADJUSTMENT RESULTS

No adjustment was needed.

Date of testing: 10/7/2019
 Certification Expiration: 10/7/2020
 Simulator testing technician: D DEBOARD

Notes on Condition: none

Deviation(s) from method: none

DHSS BAP Scientist Approving: B. LUTMER
 Certification No: MP4955_1072019

X *Brian Lutmer*

DHSS BAP Scientist Approving

AS IV Serial not 107468
Version not 502B

TEST RECORD 00726

Temp Date Time 210L

Air Blank:
06/16/20 21:31 .088
Calibration Check:
26 06/16/20 21:01 .100

Subject Name
J. Veliquette 290294
Subject I.D.

Operator Name, I.D.
Marshall PD

Location
461 W. Arrow

Marshall, MO 65340

AS IV Serial not 107468
Version not 502B

TEST RECORD 00725

Temp Date Time 210L

Air Blank:
06/16/20 21:29 .080
Calibration Check:
25 06/16/20 21:29 .101

Subject Name
J. Veliquette 290294
Subject I.D.

Operator Name, I.D.
Marshall PD

Location
461 W. Arrow

Marshall, MO 65340

AS IV Serial) No: 107460
Version No: 502B

TEST RECORD 00727
S/
Temp Date Time 21:00

Air Blank
06/16/70 21:00 .000
Calibration Check
26 06/16/70 21:00 .100

Subject Name
J. Valiquette 290294
Subject I.D.

Operator Name, I.D.
Marshall PD

Location
461 W. Arrow
Marshall, MO 65340

AS IV Serial) No: 107460
Version No: 502B

TEST RECORD 00728
S/
Temp Date Time 21:00

VOID: RFI
12 06/16/70 21:04

Subject Name
J. Valiquette 290294
Subject I.D.

Operator Name, I.D.
Marshall PD

Location
461 W. Arrow
Marshall, MO 65340