



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 111332	PRINTER SN 099.3586.619	DATE OF INSPECTION 05/12/2020
LOCATION OF INSTRUMENT (STREET AND CITY) 517 Oneida St. Seneca, Missouri		TIME OF INSPECTION 21:06pm

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 # 18200 EXP. DATE 07/03/2020

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 33.99 SIMULATOR SN MP2851 SIMULATOR EXP DATE 03/03/2021

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 .096

TEST 2 .096

TEST 3 .096

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

Joshua Fort

TYPE II PERMIT NUMBER/EXPIRATION DATE

200125 03/09/2022

TELEPHONE NUMBER

(417) 776-8158

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: 111332
Version no: 532B

TEST RECORD 00776

Temp Date Time 210L

Air Blank:
05/12/20 21:06 .000
Calibration Check:
20 05/12/20 21:06 .096

Subject Name

Test

Subject I.D.

#1

Operator Name, I.D.

Joshua Fort 200125

Location Exp. 3/9/22

517 Oneida St

Seneca, Mo 64865

AS IV Serial no: 111332
Version no: 532B

TEST RECORD 00777

Temp Date Time 210L

Air Blank:
05/12/20 21:07 .000
Calibration Check:
21 05/12/20 21:07 .096

Subject Name

Test

Subject I.D.

#2

Operator Name, I.D.

Joshua Fort 200125

Location Exp. 3/9/22

517 Oneida St

Seneca, Mo 64865

AS IV Serial no: 111332
Version no: 532B

TEST RECORD 00778

Temp Date Time 210L

Air Blank:
05/12/20 21:09 .000
Calibration Check:
21 05/12/20 21:09 .096

Subject Name

Test ~~#~~

Subject I.D.

#3

Operator Name, I.D.

Joshua Fort 200125

Location Exp. 3/9/22

517 Oneida St

Seneca, Mo 64865

AS IV Serial no: 111332
Version no: 532B

TEST RECORD 00779

Temp Date Time 210L

VOID: RFI
12 05/12/20 21:10

Subject Name

Test

Subject I.D.

RFI

Operator Name, I.D.

Joshua Fort 200125

Location Exp. 3/9/22

517 Oneida St

Seneca, Mo 64865

AS IV Serial no: 111332
Version no: 532B

TEST RECORD 00780

Temp Date Time 210L

Air Blank:
05/12/20 21:11 .000
Subject Test: Auto
22 05/12/20 21:11 .000

Subject Name

Test ~~Blank~~

Subject I.D.

Blank

Operator Name, I.D.

Joshua Fort 200125

Location Exp. 3/9/22

517 Oneida St

Seneca, Mo 64865



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 18200 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on July 6, 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 July 3, 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 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
 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 306.111 through 306.119 RSMo.

DATE 3/9/2020

NUMBER 200125

EXPIRES 3/9/2022

MO 580-0771 (6-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (R6-10)

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