



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
STATE PUBLIC HEALTH LABORATORY
ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

RECEIVED
By Tracy Crews at 8:55 am, Mar 27, 2020

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 111660 | PRINTER SN 09B.3589.435 | DATE OF INSPECTION 03/25/2020 |
| LOCATION OF INSTRUMENT (STREET AND CITY) 120 W. Main St. - Fredericktown | | TIME OF INSPECTION 2:45 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 Laboratories LOT # 19160 EXP. DATE 07/09/2021

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIMULATOR SN MP2936 SIMULATOR EXP DATE 02/12/2021

- 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 .100 TEST 2 .099 TEST 3 .099

- 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).

Adjusted time forward by 5 minutes. Otherwise operating properly.

INSPECTING OFFICER

| | |
|--------------------------------------------------------------|------------------------------------|
| SIGNATURE | PRINT NAME Sgt. Michael Sletten |
| TYPE II PERMIT NUMBER/EXPIRATION DATE 280281 - 09/19/2020 | TELEPHONE NUMBER (573) 783-3660 |

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

2

PERMIT
TYPE II
MICHAEL D SLETTEN

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 9/19/2018


 DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

NUMBER 280281

EXPIRES 9/19/2020


 DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

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 SLETTEN, MICHAEL
 Permit No 280281
 Date Issued 9/19/2018 Date Expires 9/19/2020





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 **19160** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **July 10, 2019**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.1202%** (w/vol) ethyl alcohol. The expiration date for this lot number is **July 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.

AS IV Serial no: 111660
Version no: 532B

TEST RECORD 00503

Temp Date Time ^{a/} 210L

Air Blank:
03/25/20 14:45 .000
Subject Test: Auto
19 03/25/20 14:45 .000

Subject Name

BLANK TEST

Subject I.D.

MONTHLY MAINT.

Operator Name, I.D.

M-SLETTEN-280281

Location

FREDERICKTOWN PD

AS IV Serial no: 111660
Version no: 532B

TEST RECORD 00504

Temp Date Time ^{a/} 210L

VOID: RFI
12 03/25/20 14:46

Subject Name

RFI CHECK

Subject I.D.

MONTHLY MAINT.

Operator Name, I.D.

M-SLETTEN-280281

Location

FREDERICKTOWN PD

AS IV Serial no: 111660
Version no: 532B

TEST RECORD 00505

Temp Date Time ^{a/} 210L

Air Blank:
03/25/20 14:55 .000
Calibration Check:
21 03/25/20 14:55 .100

Subject Name

SAMPLE TEST #1

Subject I.D.

MONTHLY MAINT

Operator Name, I.D.

M-SLETTEN-280281

Location

FREDERICKTOWN PD

AS IV Serial no: 111660
Version no: 532B

TEST RECORD 00506

Temp Date Time ^{a/} 210L

Air Blank:
03/25/20 14:56 .000
Calibration Check:
22 03/25/20 14:56 .099

Subject Name

SAMPLE TEST #2

Subject I.D.

MONTHLY MAINT.

Operator Name, I.D.

M-SLETTEN-280281

Location

FREDERICKTOWN PD

AS IV Serial no: 111660
Version no: 532B

TEST RECORD 00507

Temp Date Time ^{a/} 210L

Air Blank:
03/25/20 14:58 .000
Calibration Check:
23 03/25/20 14:58 .099

Subject Name

SAMPLE TEST #3

Subject I.D.

MONTHLY MAINT.

Operator Name, I.D.

M-SLETTEN-280281

Location

FREDERICKTOWN PD

AS IV Serial no: 111660
Version no: 532D

Last Calibration:
11/25/19 15:36 .100

Test Results:

00503 Subject Test: Auto
19 03/25/20 14:45 .000
01.7 Lit. 03.7 Sec.
00504 VOID: RFI
12 03/25/20 14:46
00.0 Lit. 00.0 Sec.
00505 Calibration Check:
21 03/25/20 14:55 .100
00.0 Lit. 00.0 Sec.
00506 Calibration Check:
22 03/25/20 14:56 .099
00.0 Lit. 00.0 Sec.
00507 Calibration Check:
23 03/25/20 14:58 .099
00.0 Lit. 00.0 Sec.
