



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

RECEIVED

By Tracy Crews at 7:43 am, Aug 26, 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	NAME OF AGENCY Fredericktown PD	DATE OF INSPECTION 08/25/2020
LOCATION OF INSTRUMENT (STREET AND CITY) 120 W. Main St. - Fredericktown		TIME OF INSPECTION 3:27 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

<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>	SIM. SN <u>MP 2936</u> SIM. NIST EXP DATE <u>02/12/2021</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 .100	TEST 2 .100	TEST 3 .100
--------------------	--------------------	--------------------

- 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).

INSTRUMENT IS 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 by mail, fax, or email.

AS IV Serial no: 111660
Version no: 532B

TEST RECORD 00531

Temp Date Time ^{s/} 210L

Air Blank:
08/25/20 15:27 .000
Subject Test: Auto
23 08/25/20 15:27 .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 00532

Temp Date Time ^{s/} 210L

Air Blank:
08/25/20 15:29 .000
Calibration Check:
23 08/25/20 15:29 .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 00533

Temp Date Time ^{s/} 210L

Air Blank:
08/25/20 15:31 .000
Calibration Check:
24 08/25/20 15:31 .100

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 00534

Temp Date Time ^{s/} 210L

Air Blank:
08/25/20 15:32 .000
Calibration Check:
25 08/25/20 15:32 .100

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: 532B

TEST RECORD 00535

Temp Date Time ^{s/} 210L

VOID: RFI
12 08/25/20 15:34

Subject Name

BFI CHECK

Subject I.D.

MONTHLY MAINT.

Operator Name, I.D.

M. SLETTEN-280281

Location

FREDERICKTOWN PD

AS IV Serial no: 111660
Version no: 532B

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

Test Results:
00531 Subject Test: Auto
23 08/25/20 15:27 .000
01.5 Lit. 04.6 Sec.
00532 Calibration Check:
23 08/25/20 15:29 .100
00.0 Lit. 00.0 Sec.
00533 Calibration Check:
24 08/25/20 15:31 .100
00.0 Lit. 00.0 Sec.
00534 Calibration Check:
25 08/25/20 15:32 .100
00.0 Lit. 00.0 Sec.
00535 VOID: RFI
12 08/25/20 15:34
00.0 Lit. 00.0 Sec.



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
 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

NUMBER 280281

EXPIRES 9/19/2020

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 589.0771 (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

