



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

RECEIVED  
 BY: [Name] ON: [Date]

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<br>111779   | PRINTER SN<br>09B.3589.547 | DATE OF INSPECTION<br>12/26/2020 |
| LOCATION OF INSTRUMENT (STREET AND CITY)<br>Stone County Jail Galena MO |                            | TIME OF INSPECTION<br>2234       |

**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 LOT # 20190 EXP. DATE 04/06/2022
- SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIMULATOR SN SD2282 SIMULATOR EXP DATE 12/01/2021

- 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-.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).

Simulator Re-Cert  
 Monthly Maint.

**INSPECTING OFFICER**

|  |                                    |
|--|------------------------------------|
| SIGNATURE<br>  | PRINT NAME<br>Sgt. Mark Rinker     |
| TYPE II PERMIT NUMBER/EXPIRATION DATE<br>2001561/4/10/2022 | TELEPHONE NUMBER<br>(417) 357-6116 |

**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

SELF

AS IV Serial no: 111779  
Version no: 532B

TEST RECORD 99351

Temp Date Time 216L

Air Blank: 12/26/20 22:31 .999  
Calibration Check: 23 12/26/20 22:31 .999

Subject Name

MONTHLY MAINT  
Subject I.D.

SELF TEST

Operator Name, I.D.

MARK ROWLER 200156

Location

STONE CO JAIL

TEST 1

AS IV Serial no: 111779  
Version no: 532B

TEST RECORD 99352

Temp Date Time 216L

Air Blank: 12/26/20 22:34 .999  
Calibration Check: 23 12/26/20 22:34 .999

Subject Name

MONTHLY MAINT  
Subject I.D.

TEST 1

Operator Name, I.D.

MARK ROWLER 200156

Location

STONE CO JAIL

TEST 2

AS IV Serial no: 111779  
Version no: 532B

TEST RECORD 99353

Temp Date Time 216L

Air Blank: 12/26/20 22:37 .999  
Calibration Check: 24 12/26/20 22:37 .999

Subject Name

MONTHLY MAINT  
Subject I.D.

TEST 2

Operator Name, I.D.

MARK ROWLER 200156

Location

STONE CO JAIL

TEST 3

AS IV Serial no: 111779  
Version no: 532B

TEST RECORD 99354

Temp Date Time 216L

Air Blank: 12/26/20 22:39 .999  
Calibration Check: 23 12/26/20 22:39 .999

Subject Name

MONTHLY MAINT  
Subject I.D.

TEST 3

Operator Name, I.D.

MARK ROWLER 200156

Location

STONE CO JAIL

RFI

AS IV Serial no: 111779  
Version no: 532B

TEST RECORD 99355

Temp Date Time 216L

Air Blank: 12/26/20 22:42

Subject Name

MONTHLY MAINT  
Subject I.D.

RFI TEST

Operator Name, I.D.

MARK ROWLER 200156

Location

STONE CO JAIL

MONTHLY MAINT  
12/26/20  
STONE CO SHERIFF'S OFFICE  
SGT. MARK ROWLER  
PERMIT # 200156



## 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 **20190** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **April 8, 2020**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.1206%** (w/vol) ethyl alcohol. The expiration date for this lot number is **April 6, 2022** at 11:59 PM.

When used in a calibrated Simulator, operating at  $34^{\circ}\text{C} \pm .2^{\circ}\text{C}$ , this solution will give a breath alcohol analysis instrument reading of **0.100 g/210L  $\pm$  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 FN02271802 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**  
**MARK RINKER**

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 4/10/2020

NUMBER 200156

EXPIRES 4/10/2022

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

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 RINKER, MARK  
 Permit No 200156  
 Date Issued 4/10/2020 Date Expires 4/10/2022