



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

RECEIVED
 By Tracy Crews at 11:07 am, Mar 02, 2021

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 03079	NAME OF AGENCY Hazelwood Police Department	DATE OF INSPECTION 03/01/2021
LOCATION OF INSTRUMENT (STREET AND CITY) 415 Elm Grove Lane / Hazelwood		TIME OF INSPECTION 9:05 am

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, Inc LOT # 19370 EXP. DATE 03/01/2021

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.1 SIM. SN SD2742 SIM. NIST EXP DATE 03/01/2021

- 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 .104 TEST 2 .103 TEST 3 .103

- 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).

BA Maint 02/21
 Simulator Solution Bottle Number 783

INSPECTING OFFICER

SIGNATURE 	PRINT NAME Michael A. Monticelli
TYPE II PERMIT NUMBER/EXPIRATION DATE 200263 / 10/08/2022	TELEPHONE NUMBER (314) 838-5000

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: 030791
Version no: 532B

TEST RECORD 00670

Temp Date Time 210L

VOID: INSP SMP
6 03/01/21 09:27

Subject Name

TEST #5

Subject I.D.

Operator Name, I.D.

Monticelli 200263

Location

Hazelwood BAT VAN

AS IV Serial no: 030791
Version no: 532B

TEST RECORD 00669

Temp Date Time 210L

VOID: RFI
12 03/01/21 09:26

Subject Name

TEST #4

Subject I.D.

Operator Name, I.D.

Monticelli 200263

Location

Hazelwood BAT VAN

AS IV Serial no: 030791
Version no: 532B

TEST RECORD 00668

Temp Date Time 210L

Air Blank:
03/01/21 09:25 .000

Calibration Check:
22 03/01/21 09:25 .103

Subject Name

TEST 3

Subject I.D.

Operator Name, I.D.

Monticelli 200263

Location

Hazelwood BAT VAN

AS IV Serial no: 030791
Version no: 532B

TEST RECORD 00667

Temp Date Time 210L

Air Blank:
03/01/21 09:23 .000

Calibration Check:
20 03/01/21 09:23 .150

Subject Name

TEST #2

Subject I.D.

Operator Name, I.D.

Monticelli 200263

Location

Hazelwood BAT VAN

AS IV Serial no: 030791
Version no: 532B

TEST RECORD 00666

Temp Date Time 210L

Air Blank:
03/01/21 09:21 .000

Calibration Check:
03/01/21 09:21 .104

Subject Name

TEST #1

Subject I.D.

Operator Name, I.D.

Monticelli 200263

Location

Hazelwood BAT VAN

AS IV Serial no: 030791
Version no: 532B
TEST RECORD 00671
Temp Date Time 210L
Air Blank:
03/01/21 09:29 .000
Subject Test: Auto
24 03/01/21 09:29 .000
Subject Name
TEST #6
Subject I.D.
Blank TEST
Operator Name, I.D.
Monticelli 200263
Location
Hazelwood BAT VAN



Missouri Department of Health and Senior Services
 P.O. Box 670, Jefferson City, MO 64501-0670 Phone (816) 753-6400 FAX (816) 753-6010
 816 753 6400 for hearing and speech impaired 800 735 2010 Voice TDD 800 735 2010
 Franklin D. Williams, MD, MHA
 Governor



Missouri Department of Health and Senior Services
 Governor

SIMULATOR CERTIFICATION REPORT

SIMULATOR INFORMATION

Simulator Serial Number: 802742 Manufacturer: Galt
 Model Number: 10-43
 Agency: HAZELWOOD PD
 Agency Address: 415 ELM GROVE LANE, HAZELWOOD, MO 63042

NIST THERMOMETER INFORMATION

Serial Number: 1916MM01307 NIST ID: 6.00
 Uncertainty: 0.02
 Date of Certification: 6/1/2020 Date of Expiration: 6/1/2024

ENVIRONMENTAL CONDITIONS

The environmental conditions during testing are within the tolerances of DSSS BAP method 3.

VERIFICATION RESULTS

Simulator Accuracy	NIST Accuracy	Combined Uncertainty
34.00	35.08	.11

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

ADJUSTMENT RESULTS

No adjustment was needed.

Date of testing: 7/16/2020
 Certification Expiration: 7/16/2024
 Simulator testing technician: B. LUTMEK

Notes on Conditions none

Deviation(s) from method none

DSSS BAP Analyst Approving: B. LUTMEK
 Certification No: 802742_7162020

[Signature]

DSSS BAP Analyst Approving



GUTH LABORATORIES, INC.

580 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-664-6470

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 7, 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 Certified 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

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PERMIT
TYPE II

MICHAEL A MONTICELLI

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 EC/IR II

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 308.111 through 308.119 RSMo.

DATE 10/8/2020

NUMBER 200263

EXPIRES 10/8/2022

MO-530(8771 (8-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-11A-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 from of expired air in Missouri.

Operator MONTICELLI, MICHAEL
Permit No 200263
Date Issued 10/8/2020 Date Expires 10/8/2022