



**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 097417	NAME OF AGENCY Warrenton Police Department	DATE OF INSPECTION 03/02/2021
LOCATION OF INSTRUMENT (STREET AND CITY) 200 West Booneslick Road, Warrenton, MO 63383		TIME OF INSPECTION 12:01 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.

<input checked="" type="checkbox"/> DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)
<input checked="" type="checkbox"/> TEMPERATURE OF ALCO SENSOR (10°C - 40°C)
<input checked="" type="checkbox"/> PRINTER WORKING PROPERLY
<input checked="" type="checkbox"/> 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>20420</u> EXP. DATE <u>09/22/2022</u>	
<input checked="" type="checkbox"/> SIMULATOR TEMPERATURE (34°C ± 0.2°C) <u>34.00</u> SIM. SN <u>MP3585</u> SIM. NIST EXP DATE <u>02/17/2022</u>	
<input checked="" type="checkbox"/> 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) <input checked="" type="checkbox"/> 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE <input type="checkbox"/> 0.080% STANDARD - MUST READ BETWEEN 0.076% and 0.084% INCLUSIVE <input type="checkbox"/> 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE	

TEST 1 • .104	TEST 2 • .104	TEST 3 • .103
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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	1	(0-.04)	(.05-.09)	(.10-.14)	(.15-.19)	(OVER .19)	1
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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 Sergeant Michael Kavanaugh 207
TYPE II PERMIT NUMBER/EXPIRATION DATE 210018 exp: 02/03/2023	TELEPHONE NUMBER (636) 456-3535

**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: 097417  
Version no: 532B

TEST RECORD 00362

Temp Date Time 210L

Air Blank: 03/02/21 00:02 .000  
Calibration Check: 23 03/02/21 00:02 .104

Subject Name

Test # 1

Subject I.D.

Maint Check

Operator Name, I.D. 207

Sgt. Kavanaugh

Location

Warrenton Police

AS IV Serial no: 097417  
Version no: 532B

TEST RECORD 00363

Temp Date Time 210L

Air Blank: 03/02/21 00:05 .000  
Calibration Check: 24 03/02/21 00:05 .104

Subject Name

Test # 2

Subject I.D.

Maint Report

Operator Name, I.D. 207

Sgt. Kavanaugh

Location

Warrenton Police

AS IV Serial no: 097417  
Version no: 532B

TEST RECORD 00364

Temp Date Time 210L

Air Blank: 03/02/21 00:07 .000  
Calibration Check: 24 03/02/21 00:07 .183

Subject Name

Test # 3

Subject I.D.

Maint Check

Operator Name, I.D. 207

Sgt. Kavanaugh

Location

Warrenton Police

AS IV Serial no: 097417  
Version no: 532B

TEST RECORD 00365

Temp Date Time 210L

VOID: PFI  
12 03/02/21 00:09

Subject Name

Test #4 (PFI)

Subject I.D.

Maint Check

Operator Name, I.D. 207

Sgt. Kavanaugh

Location

Warrenton Police

AS IV Serial no: 097417  
Version no: 532B

TEST RECORD 00366

Temp Date Time 210L

Air Blank: 03/02/21 00:11 .000  
Subject Test: Auto  
25 03/02/21 00:11 .000

Subject Name

Test #5 Self Test

Subject I.D.

Maint Check

Operator Name, I.D. 207

Sgt. Kavanaugh

Location

Warrenton Police

Department



# SIMULATOR CERTIFICATION REPORT

## SIMULATOR INFORMATION

Simulator Serial Number: MP3585      Manufacturer: Guth  
 Model Number: 12V500  
 Agency: WARRENTON PD  
 Agency Address: 200 W BOONESLICK ROAD., WARRENTON, MO 63383

## NIST THERMOMETER INFORMATION

Serial Number: 17KMM00690      Bias: 0.00  
 Uncertainty: 0.02  
 Date of Certification: 11/6/2020      Date of Expiration: 11/6/2021

## ENVIRONMENTAL CONDITIONS

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

## VERIFICATION RESULTS

<u>Simulator Average</u>	<u>NIST Average</u>	<u>Combined Uncertainty</u>
34.00	34.02	.04

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

## ADJUSTMENT RESULTS

No adjustment was needed.

Date of testing: 2/17/2021  
 Certification Expiration: 2/17/2022  
 Simulator testing technician: M. BOND

Notes on Condition: none

Deviation(s) from method: none

DHSS BAP Scientist Approving: B. LUTMER  
 Certification No: MP3585\_2172021

X

DHSS BAP Scientist Approving



## GUTH LABORATORIES, INC.

590 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-584-5470

### CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 20420 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **September 23, 2020**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.1208%** (w/vol) ethyl alcohol. The expiration date for this lot number is **September 22, 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 FN03052002 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 KAVANAUGH**

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 2/3/2021

NUMBER 210018

EXPIRES 2/3/2023

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

LAB-4 (16-10)



**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 KAVANAUGH, MICHAEL  
Permit No 210018  
Date Issued 2/3/2021 Date Expires 2/3/2023

