



**ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT**

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 City of Warrenton PD	DATE OF INSPECTION 06/02/2021
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LOCATION OF INSTRUMENT (STREET AND CITY) 200 West Booneslick Road, Warrenton, MO 63383	TIME OF INSPECTION 6:02 am
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**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 # 20420 EXP. DATE 09/22/2022
- SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.00 SIM. SN MP3585 SIM. NIST EXP DATE 02/17/2022

- 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
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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	2	(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).

Had to adjust date and time on instrument. Corrected and working properly.

**INSPECTING OFFICER**

SIGNATURE 207	PRINT NAME Sergeant 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 00391  
Temp Date Time 210L

Air Blank: 06/02/21 06:06 .000  
Calibration Check: 23 06/02/21 06:06 .104

Subject Name  
Test # 1  
Subject I.D.

Mant. Check  
Operator Name, I.D.  
Sgt. Kavanagh  
Location  
Warrenton Police

Department

AS IV Serial no: 097417  
Version no: 532B

TEST RECORD 00392  
Temp Date Time 210L

Air Blank: 06/02/21 06:08 .000  
Calibration Check: 24 06/02/21 06:08 .103

Subject Name  
Test # 2  
Subject I.D.

Mant. Check  
Operator Name, I.D.  
Sgt. Kavanagh  
Location  
Warrenton Police

Department

AS IV Serial no: 097417  
Version no: 532B

TEST RECORD 00393  
Temp Date Time 210L

Air Blank: 06/02/21 06:11 .000  
Calibration Check: 24 06/02/21 06:11 .103

Subject Name  
Test # 3  
Subject I.D.

Mant. Check  
Operator Name, I.D.  
Sgt. Kavanagh  
Location  
Warrenton Police

Department

AS IV Serial no: 097417  
Version no: 532B

TEST RECORD 00394  
Temp Date Time 210L

VOID: RFI  
12 06/02/21 06:13

Subject Name  
Test # 4 (RFI)  
Subject I.D.

Mant. Check  
Operator Name, I.D.  
Sgt. Kavanagh  
Location  
Warrenton Police

Department

AS IV Serial no: 097417  
Version no: 532B  
TEST RECORD 00395  
Temp Date Time 210L

Air Blank: 06/02/21 06:15 .000  
Subject Test: Auto 25 06/02/21 06:15 .000

Subject Name  
Test # 5 Self-Test  
Subject I.D.  
Mant. Check  
Operator Name, I.D.  
Sgt. Kavanagh  
Location  
Warrenton Police

Department



**Missouri Department of Health and Senior Services**  
 P.O. Box 570, Jefferson City, MO 65102-0570 Phone: 573-751-6400 FAX: 573-751-6010  
 RELAY MISSOURI for Hearing and Speech Impaired 1-800-735-2966 VOICE 1-800-735-2466  
**Randall W. Williams, MD, FACOG**  
 Director



**Michael L. Parson**  
 Governor

# 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 17111-4611 • 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°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 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

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**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

**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