

RECEIVED

By Tracy Crews at 1:39 pm, Aug 30, 2021

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
STATE PUBLIC HEALTH LABORATORY**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 097422	NAME OF AGENCY Newton County Sheriff's Office	DATE OF INSPECTION 08/29/2021
LOCATION OF INSTRUMENT (STREET AND CITY) 208 W. Coler Street Neosho, Mo 64850		TIME OF INSPECTION 8:49 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 LOT # 20420 EXP. DATE 09/22/2022 SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIM. SN DR6930 SIM. NIST EXP DATE 11/02/2021 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 .098

TEST 2 .097

TEST 3 .098

 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)

(.05-.09)

(.10-.14)

(.15-.19)

(OVER .19)

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

Joshua Fort

TYPE II PERMIT NUMBER/EXPIRATION DATE

200125 03/09/2022

TELEPHONE NUMBER

(417) 451-8300

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: 897422
Version no: 532B

TEST RECORD 00459

Temp Date Time 2191

Air Blank:
30/7/21 98149 .898
Calibration Check:
29 23/20/21 38149 .898

Subject Name

Test

Subject I.D.

#1

Operator Name, I.D.

Joshua Fort 200125

Location EXP. 3/9/22

208 W. Coler St

Neosho, Mo 64850

AS IV Serial no: 897422
Version no: 532B

TEST RECORD 00460

Temp Date Time 2196

Air Blank:
30/7/21 30159 .898
Calibration Check:
29 23/20/21 40151 .897

Subject Name

Test

Subject I.D.

#2

Operator Name, I.D.

Joshua Fort 200125

Location EXP. 3/9/22

208 W. Coler St

Neosho, Mo 64850

AS IV Serial no: 897422
Version no: 532B

TEST RECORD 00461

Temp Date Time 2197

Air Blank:
30/7/21 30159 .898
Calibration Check:
29 23/20/21 40151 .897

Subject Name

Test

Subject I.D.

#3

Operator Name, I.D.

Joshua Fort 200125

Location EXP. 3/9/22

208 W. Coler St

Neosho, Mo 64850

AS IV Serial no: 897422
Version no: 532B
TEST RECORD 00459
Temp Date Time 2191
Air Blank:
30/7/21 98149 .898
Calibration Check:
29 23/20/21 38149 .898
Subject Name
Test
Subject I.D.
#1
Operator Name, I.D.
Joshua Fort 200125
Location EXP. 3/9/22
208 W. Coler St
Neosho, Mo 64850

Test

RFI

Joshua Fort 200125

EXP. 3/9/22

208 W. Coler St

Neosho, Mo 64850

AS IV Serial no: 897422
Version no: 532B
TEST RECORD 00460
Temp Date Time 2196
Air Blank:
30/7/21 30159 .898
Calibration Check:
29 23/20/21 40151 .897
Subject Name
Test
Subject I.D.
#2
Operator Name, I.D.
Joshua Fort 200125
Location EXP. 3/9/22
208 W. Coler St
Neosho, Mo 64850

Test

Blank

Joshua Fort 200125

EXP. 3/9/22

208 W. Coler St

Neosho, Mo 64850



GUTH LABORATORIES, INC.

580 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 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%.

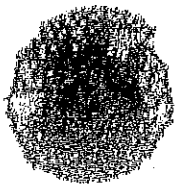
The alcohol and water used in this solution were free of test interfering substances.

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
 JOSHUA FORT

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repair, 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 557.020 through 557.041, RSMo and 558.111 through 558.116 RSMo.

DATE 3/9/2020

NUMBER 200123

EXPIRES 3/9/2023

ISSUED BY (77-0-10)

[Signature]
 DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

[Signature]
 DIRECTOR OF DEPARTMENT OF HEALTH SERVICES
 LAB-400403

STATE OF MISSOURI
 DEPARTMENT OF HEALTH AND SENIOR SERVICES
 BREATH ALCOHOL PROGRAM

INSTRUMENT OPERATOR CARD

The permit holder is authorized to operate an Alcotest breath alcohol analyzer for the determination of the alcoholic content of breath from expired air in Missouri.

Operator: **JOSHUA FORT**
 Permit No: **200123**
 Card Issued: **3/9/2020** Date Expires: **3/9/2023**

[Redacted Area]