



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

RECEIVED
 By Tracy Crews at 8:14 am, May 25, 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 <i>105 444</i>	NAME OF AGENCY <i>Claver Police Dept</i>	DATE OF INSPECTION <i>5-11-2021</i>
LOCATION OF INSTRUMENT (STREET AND CITY) <i>1200 S. Holden ST Winnsboro, MO 61093 (Msc)</i>		TIME OF INSPECTION <i>13:22</i>

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 *11-6-2022*

SIMULATOR TEMPERATURE (34°C ± 0.2°C) *34.00* SIM. SN *MP 2111* SIM. NIST EXP DATE *1-19-2021*

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 • <i>.098</i>	TEST 2 • <i>.097</i>	TEST 3 • <i>.097</i>
----------------------	----------------------	----------------------

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).

Msc Lab check, calibration adjustment, changed 90 battery

INSPECTING OFFICER

SIGNATURE <i>[Signature]</i>	PRINT NAME <i>Matt Bond</i>
TYPE II PERMIT NUMBER/EXPIRATION DATE <i>290211 9-19-2021</i>	TELEPHONE NUMBER <i>660 5757597</i>

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: 185444
Version no: 537B

TEST RECORD - REPRINT

TEST RECORD 00728

Time Date Time ^{5/} 210L

Air Blank:
05/11/21 13:07 .000
Calibration
-23 05/11/21 13:07 .100

Subject Name

CAI

Subject I.D.

Operator Name, I.D.

MATT Beal 290214

Location 9-19-2021

MSC

AS IV Serial no: 185444
Version no: 537B

TEST RECORD 00733

Time Date Time ^{5/} 210L

Air Blank:
05/11/21 13:22 .000
Calibration Check:
26 05/11/21 13:22 .099

Subject Name

TEST

Subject I.D.

#1

Operator Name, I.D.

MATT Beal 290214

Location 9-19-2021

MSC

AS IV Serial no: 185444
Version no: 537B

TEST RECORD 00734

Time Date Time ^{5/} 210L

Air Blank:
05/11/21 13:24 .000
Calibration Check:
26 05/11/21 13:24 .097

Subject Name

TEST

Subject I.D.

#2

Operator Name, I.D.

MATT Beal 290214

Location 9-11-2021

MSC

AS IV Serial no: 185444
Version no: 537B

TEST RECORD 00735

Time Date Time ^{5/} 210L

Air Blank:
05/11/21 13:25 .000
Calibration Check:
26 05/11/21 13:25 .097

Subject Name

TEST

Subject I.D.

#3

Operator Name, I.D.

MATT Beal 290214

Location 9-19-2021

MSC

AS IV Serial no: 185444
Version no: 537B

TEST RECORD 00736

Time Date Time ^{5/} 210L

VOIDS RFI
12 05/11/21 13:28

Subject Name

TEST

Subject I.D.

RFI

Operator Name, I.D.

MATT Beal 290214

Location 9-19-2021

MSC

AS IV Serial no: 185444
Version no: 537B

TEST RECORD 00737

Time Date Time ^{5/} 210L

Air Blank:
05/11/21 13:29 .000
Subject Test: Auto
26 05/11/21 13:29 .000

Subject Name

Blank

Subject I.D.

TEST

Operator Name, I.D.

MATT Beal 290214

Location 9-19-2021

MSC



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%**.

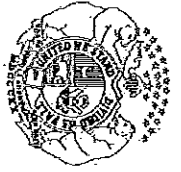
The alcohol and water used in this solution were free of test interfering substances.

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

MATT B BOND

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

INTOX DMT, INTOXLYZER 8000, INTOX EC/R II, ASIV W/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 9/19/2019

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

NUMBER 290214

EXPIRES 9/19/2021

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES