



**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 111630	NAME OF AGENCY Miller County Sheriff's Office	DATE OF INSPECTION 08/13/2021
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LOCATION OF INSTRUMENT (STREET AND CITY) 1999 Hwy 52 Tuscumbia, Missouri 65082	TIME OF INSPECTION 7:22 pm
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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 # 21080 EXP. DATE 03/08/2023

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIM. SN MP2941 SIM. NIST EXP DATE 12/07/2021

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	(0-.04)	0	(.05-.09)	0	(.10-.14)	2	(.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).

ok

**INSPECTING OFFICER**

SIGNATURE

PRINT NAME  
Corporal Patrick

TYPE II PERMIT NUMBER/EXPIRATION DATE  
200233 08/24/2022

TELEPHONE NUMBER  
(573) 369-2341

**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: 111630  
Version no: 532B

TEST RECORD 00691

Temp Date Time <sup>s/</sup> 210L

Air Blank:  
08/13/21 19:22 .000  
Calibration Check:  
23 08/13/21 19:22 .098

Subject Name

test #1

Subject I.D.

Patricik 200233

Operator Name, I.D.

Miller County

Location

AS IV Serial no: 111630  
Version no: 532B

TEST RECORD 00692

Temp Date Time <sup>s/</sup> 210L

Air Blank:  
08/13/21 19:24 .000  
Calibration Check:  
24 08/13/21 19:24 .097

Subject Name

#2 test

Subject I.D.

Patricik 200233

Operator Name, I.D.

Miller County

Location

AS IV Serial no: 111630  
Version no: 532B

TEST RECORD 00693

Temp Date Time <sup>s/</sup> 210L

Air Blank:  
08/13/21 19:25 .000  
Calibration Check:  
24 08/13/21 19:25 .098

Subject Name

test #3

Subject I.D.

Patricik 200233

Operator Name, I.D.

Miller County

Location

AS IV Serial no: 111630  
Version no: 532B

TEST RECORD 00694

Temp Date Time <sup>s/</sup> 210L

Air Blank:  
08/13/21 19:26 .000  
Subject Test: Auto  
25 08/13/21 19:26 .000

Subject Name

Blank test

Subject I.D.

Patricik 200233

Operator Name, I.D.

Miller County

Location

AS IV Serial no: 111630  
Version no: 532B

TEST RECORD 00695

Temp Date Time <sup>s/</sup> 210L

VOID: RFI  
12 08/13/21 19:29

Subject Name

RFI test

Subject I.D.

Patricik 200233

Operator Name, I.D.

Miller County

Location



**GUTH LABORATORIES, INC.**

590 NORTH 67th STREET • HARRISBURG, PA 17111-4811 • TELEPHONE: 717-584-5470

## CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **21080** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **March 10, 2021**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.1214%** (w/vol) ethyl alcohol. The expiration date for this lot number is **March 8, 2023** 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



**PERMIT  
TYPE II**

**SCOTT E PATRICK**

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 8/24/2020

NUMBER 200233

EXPIRES 8/24/2022

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** PATRICK, SCOTT  
**Permit No** 200233  
**Date Issued** 8/24/2020 **Date Expires** 8/24/2022