



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 111762	PRINTER SN 09B.3589.487	DATE OF INSPECTION 08/15/2021
LOCATION OF INSTRUMENT (STREET AND CITY) Stone County Jail Galena, MO		TIME OF INSPECTION 15:52

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 04/06/2022
- SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIMULATOR SN SD2282 SIMULATOR EXP DATE 12/01/2021

- 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 ➔ .103	TEST 2 ➔ .103	TEST 3 ➔ .102
---------------	---------------	---------------

- 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)	1	(.15-.19)	0	(OVER .19)	1
----------	---	---------	---	-----------	---	-----------	---	-----------	---	------------	---

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 Deputy Kyle Stults
TYPE II PERMIT NUMBER/EXPIRATION DATE 290292 12/16/2021	TELEPHONE NUMBER (417) 368-4888

Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office
2875 James Boulevard
Poplar Bluff, MO 63901

D

AS IV Serial no: 111762
Version no: 532B

TEST RECORD 00389

Temp Date Time ^{g/} 210L

Air Blank: 08/15/21 13:52 .000
Calibration Check: 20 08/15/21 13:52 .000

Subject Name

Monthly Maint
Subject I.D.

Self
Operator Name, I.D.

K. Stults
Location

Stone Co Jail

AS IV Serial no: 111762
Version no: 532B

TEST RECORD 00390

Temp Date Time ^{g/} 210L

Air Blank: 08/15/21 13:55 .000
Calibration Check: 21 08/15/21 13:55 .103

Subject Name

Monthly Maint
Subject I.D.

Test 1
Operator Name, I.D.

K. Stults
Location

Stone Co Jail

AS IV Serial no: 111762
Version no: 532B

TEST RECORD 00391

Temp Date Time ^{g/} 210L

Air Blank: 08/15/21 13:58 .000
Calibration Check: 22 08/15/21 13:58 .103

Subject Name

Monthly Maint
Subject I.D.

Test 2
Operator Name, I.D.

K. Stults
Location

Stone Co Jail

AS IV Serial no: 111762
Version no: 532B

TEST RECORD 00392

Temp Date Time ^{g/} 210L

Air Blank: 08/15/21 14:00 .000
Calibration Check: 23 08/15/21 14:00 .102

Subject Name

Monthly Maint
Subject I.D.

Test 3
Operator Name, I.D.

K. Stults
Location

Stone Co Jail

AS IV Serial no: 111762
Version no: 532B

TEST RECORD 00393

Temp Date Time ^{g/} 210L

VOID: RFI
12 08/15/21 14:02

Subject Name

Monthly Maint
Subject I.D.

RFI
Operator Name, I.D.

K. Stults
Location

Stone Co Jail

Monthly Maint
08/15/2021
Stone County Sheriffs Office
Deputy Kyle Stults
Permit # 290292
Exp Date: 12/16/2021



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



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

2

PERMIT
TYPE II

KYLE G STULTS

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 12/16/2019

NUMBER 290292

EXPIRES 12/16/2021

MO 500-0771 (G-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LA0-4 (11G-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 **STULTS, KYLE**
Permit No **290292**
Date Issued **12/16/2019** Date Expires **12/16/2021**