



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 111779	PRINTER SN 09B.3589.547	DATE OF INSPECTION 08/15/2021
LOCATION OF INSTRUMENT (STREET AND CITY) Stone County Jail Galena, MO		TIME OF INSPECTION 14:04

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 ➡ .096	TEST 2 ➡ .096	TEST 3 ➡ .096
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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	0	(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).

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

B

AS IV Serial no: 111779
Version no: 532B

TEST RECORD 80452

Temp Date Time 210L

Air Blank:
88/15/21 14:04 .000
Calibration Check:
20 88/15/21 14:04 .000

Subject Name

Monthly Maint

Subject I.D.

Self

Operator Name: I.D.

K. Stultz 290292

Location

Stone Co Jail

OS IV Serial no: 111779
Version no: 532B

TEST RECORD 80453

Temp Date Time 210L

Air Blank:
88/15/21 14:07 .000
Calibration Check:
21 88/15/21 14:07 .000

Subject Name

Monthly Maint

Subject I.D.

Test 1

Operator Name: I.D.

K. Stultz 290292

Location

Stone Co Jail

OS IV Serial no: 111779
Version no: 532B

TEST RECORD 80454

Temp Date Time 210L

Air Blank:
88/15/21 14:13 .000
Calibration Check:
22 88/15/21 14:13 .000

Subject Name

Monthly Maint

Subject I.D.

Test 2

Operator Name: I.D.

K. Stultz 290292

Location

Stone Co Jail

OS IV Serial no: 111779
Version no: 532B

TEST RECORD 80455

Temp Date Time 210L

Air Blank:
88/15/21 14:15 .000
Calibration Check:
23 88/15/21 14:15 .000

Subject Name

Monthly Maint

Subject I.D.

Test 3

Operator Name: I.D.

K. Stultz 290292

Location

Stone Co Jail

OS IV Serial no: 111779
Version no: 532B

TEST RECORD 80456

Temp Date Time 210L

Air Blank:
88/15/21 14:17 .000
Calibration Check:
24 88/15/21 14:17 .000

Subject Name

Monthly Maint

Subject I.D.

RFI

Operator Name: I.D.

K. Stultz 290292

Location

Stone Co Jail

Monthly Maint
08/15/2021

Stone County Sheriff's Office

Deputy Kyle Stultz

Permit # 290292

Exp Date: 12/16/2021



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

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 500-0771 (G-10)

LA0-4 (16-10)

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**



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