



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 099365	NAME OF AGENCY Laurie Police Department	DATE OF INSPECTION 03/30/2022
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LOCATION OF INSTRUMENT (STREET AND CITY) 147 South Main Street, Laurie Mo 65038	TIME OF INSPECTION 5:00 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 LOT # 21190 EXP. DATE 06/08/2023

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 40 SIM. SN DR 6929 SIM. NIST EXP DATE 08/03/2022

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 ← .095	TEST 2 ← .096	TEST 3 ← .097
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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-.04) 1	(.05-.09)	(.10-.14)	(.15-.19)	(OVER .19) 2
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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 Steven McQueen
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TYPE II PERMIT NUMBER/EXPIRATION DATE 220058 02/19/2024	TELEPHONE NUMBER (573) 374-4871
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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: 099365
Version no: 532B

TEST RECORD 01172

Temp	Date	Time	s/	210L
Air Blank:				
	03/30/22	17:41	.000	
Calibration Check:				
19	03/30/22	17:41	.095	

Air Blank:
03/30/22 17:41 .000

Calibration Check:
19 03/30/22 17:41 .095

Subject Name

maint check 1
Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 099365
Version no: 532B

TEST RECORD 01173

Temp	Date	Time	s/	210L
Air Blank:				
	03/30/22	17:43	.000	
Calibration Check:				
20	03/30/22	17:43	.096	

Air Blank:
03/30/22 17:43 .000

Calibration Check:
20 03/30/22 17:43 .096

Subject Name

Maint check 2
Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 099365
Version no: 532B

TEST RECORD 01174

Temp	Date	Time	s/	210L
Air Blank:				
	03/30/22	17:44	.000	
Calibration Check:				
21	03/30/22	17:44	.097	

Air Blank:
03/30/22 17:44 .000

Calibration Check:
21 03/30/22 17:44 .097

Subject Name

Maint. Check 3
Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 099365
Version no: 532B

TEST RECORD 01175

Temp	Date	Time	s/	210L
VOID: RFI				
12	03/30/22	17:47		

VOID: RFI
12 03/30/22 17:47

Subject Name

Rft check
Subject I.D.

Operator Name, I.D.

Location



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

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PERMIT
TYPE II
STEVEN McQUEEN

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 2/19/2022

NUMBER 220058

EXPIRES 2/19/2024

Laura Q. Day

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Steven McQueen

acting director
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

LAB-4 (R6-10)



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 McQUEEN, STEVEN
Permit No 220058
Date Issued 2/19/2022 Date Expires 2/19/2024





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 **21190** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **June 9, 2021**, 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 **June 8, 2023** 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 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.