



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	PRINTER SN 097.9584.946	DATE OF INSPECTION 06/09/2022
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LOCATION OF INSTRUMENT (STREET AND CITY) 147 South Main Street, Laurie MO	TIME OF INSPECTION 5:08 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) 34 C SIMULATOR SN DR 6929 SIMULATOR 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 ➡ .095

TEST 3 ➡ .096

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).

**INSPECTING OFFICER**

SIGNATURE

*Steven McQueen*

PRINT NAME

Steven McQueen

TYPE II PERMIT NUMBER/EXPIRATION DATE

200053 02/19/2024

TELEPHONE NUMBER

(573) 374-4871

**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

AS IV Serial no: 099365  
Version no: 532B

TEST RECORD 01184

Temp	Date	Time	a/ 210L
Air Blank:			
	06/09/22	17:08	.000
Calibration Check:			
19	06/09/22	17:08	.095

Air Blank:  
06/09/22 17:08 .000  
Calibration Check:  
19 06/09/22 17:08 .095

Subject Name

Subject I.D.

*Maint check 1*  
Operator Name, I.D.

Location

AS IV Serial no: 099365  
Version no: 532B

TEST RECORD 01187

Temp	Date	Time	a/ 210L
VOID: RFI			
	06/09/22	17:14	

VOID: RFI  
12 06/09/22 17:14

Subject Name

Subject I.D.

*RFI check*  
Operator Name, I.D.

Location

AS IV Serial no: 099365  
Version no: 532B

TEST RECORD 01185

Temp	Date	Time	a/ 210L
Air Blank:			
	06/09/22	17:11	.000
Calibration Check:			
21	06/09/22	17:11	.095

Air Blank:  
06/09/22 17:11 .000  
Calibration Check:  
21 06/09/22 17:11 .095

Subject Name

Subject I.D.

*Maint check 2*  
Operator Name, I.D.

Location

AS IV Serial no: 099365  
Version no: 532B

TEST RECORD 01186

Temp	Date	Time	a/ 210L
Air Blank:			
	06/09/22	17:13	.000
Calibration Check:			
21	06/09/22	17:13	.096

Air Blank:  
06/09/22 17:13 .000  
Calibration Check:  
21 06/09/22 17:13 .096

Subject Name

Subject I.D.

*Maint check 3*  
Operator Name, I.D.

Location



**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.*



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. Way*

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

*Steven McQueen*

acting director

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 680-0771 (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**

