

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	NAME OF AGENCY Dullivan Police	Don't 3 Jan 2022					
LOCATION OF INSTRUMENT (STREET AND CITY)	Sufficient MO 620.	LTIME OF INSPECTION					
DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)							
TEMPERATURE OF ALCO SENSOR (10°C - 40°C) 22°C							
PRINTER WORKING PROPERLY							
TIME AND DATE DISPLAYING PROPE	RLY						
BREATH ALCOHOL ACCURACY STANDA	RDS						
SIMULATOR SOLUTION	☐ COMPRESSE	D ETHANOL-GAS MIXTURE					
STANDARD SUPPLIER Buth	Labs LOT# 07 1380	EXP. DATE <u>09/13/23</u>					
SIMULATOR TEMPERATURE (34°C ±	0.2°C) <u>33.98 C</u> SIM. SN <u>M. 835 7.3</u>	SIM. NIST EXP DATE <u>08/05/22</u>					
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 → , 097%	TEST 2 098%	TEST 3 - , 100%					
RFI DETECTOR OPERATING							
INDICATE THE NUMBER OF BREATH TES (DO NOT INCLUDE SELF-ADMINISTERED REFUSALS (004)							
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). Instrument is operating within DDH. specifications.							
NSPECTING OFFICER							
CHATURE /	4	PRINT NAME					
Kregory a, We		Gregory A. West					
TYPE II PERMIT NUMBER/EXPIRATION DATE R 10 1 2 1 D Ce/o 4 /2	3	TELEPHONE NUMBER 573-468-8-00/					
Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office by mail, fax, or email.							

		Location	Operator Name, I.D.	Subject I.D.	AS IU Serial ro: 182461 Version no: 532B TEST RECORD 80961 Temp Date Time 216L VOID: RFI 12 01/03/22 13:29 Subject Name
	Location	Operator Name, I.D.	Subject I.D.	Subject Name	AS IU Serial no: 182461 Uersion no: 532B IEST RECORD 88968 Temp Date Time 2101 für Blank: 81/83/22 13:26 .888 Calibration Check: 23 81/83/22 13:26 ,188
	Location	Operator Name, I.D.	Subject I.D.	Subject Name	AS IU Serial no: 18746; Version no: 532B TEST RECORD 90%59 Temp Date Time 210L Air Blank:
Н.	Location	Operator Name, I.D.	Subject I.D.	Subject Name	AS IV Serial no: 182461 Version no: 5328 TEST RECORD 00958 Temp Date Time 2181 Air Blank: 81/83/22 13:19 .888 Calibration Check: 22 81/83/22 13:19 .897



CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 21380 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on September 15, 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 September 13, 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 GREGORY A. WEST

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.

DATE6/4/2021	wante		
NUMBER 210121	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY		
EXPIRES 6/4/2023	(ldd knish		
MO 580-0771 (6-10)	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES		

LAB-4 (R6-10)



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 WEST, GREGORY Permit No

210121

Date Issued 6/4/2021 Date Expires 6/4/2023

