



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
 STATE PUBLIC HEALTH LABORATORY  
**ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT**

RECEIVED  
 BY: Tracy Green at 8:18 am, Nov 23, 2022

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 105443	NAME OF AGENCY Raymore Police Department	DATE OF INSPECTION 11/24/2022
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LOCATION OF INSTRUMENT (STREET AND CITY) 100 Municipal Cir. Raymore, Missouri 64083	TIME OF INSPECTION 3:15 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) 21°
- PRINTER WORKING PROPERLY
- TIME AND DATE DISPLAYING PROPERLY

**BREATH ALCOHOL ACCURACY STANDARDS**

- SIMULATOR SOLUTION  COMPRESSED ETHANOL-GAS MIXTURE
- STANDARD SUPPLIER Guth Laboratories, Inc. LOT # 22310 EXP. DATE 08/11/2024
- SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIM. SN SD2256 SIM. NIST EXP DATE 09/08/2023

- 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 <u>.100</u>	TEST 2 <u>.099</u>	TEST 3 <u>.099</u>
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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	<u>0</u>	(0-.04)	<u>0</u>	(.05-.09)	<u>0</u>	(.10-.14)	<u>1</u>	(.15-.19)	<u>0</u>	(OVER .19)	<u>0</u>
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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 <u>Joshua Giaccone #ADS</u>	PRINT NAME Joshua Giaccone
TYPE II PERMIT NUMBER/EXPIRATION DATE 220105 03/29/2024	TELEPHONE NUMBER (816) 331-0530

**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: 105443  
Version no: 532B

TEST RECORD 01268

Temp Date Time 210L  
-----  
s/

Air Blank:  
11/24/22 15:16 .000  
Calibration Check:  
21 11/24/22 15:16 .100

Subject Name

Maintenance

Subject I.D. 20105

J. Giaccone #905

Operator Name, I.D.

Raymore P.D.

Location

AS IV Serial no: 105443  
Version no: 532B

TEST RECORD 01269

Temp Date Time 210L  
-----  
s/

Air Blank:  
11/24/22 15:18 .000  
Calibration Check:  
22 11/24/22 15:18 .099

Subject Name

Maintenance

Subject I.D. #20105

J. Giaccone #905

Operator Name, I.D.

Raymore P.D.

Location

AS IV Serial no: 105443  
Version no: 532B

TEST RECORD 01270

Temp Date Time 210L  
-----  
s/

Air Blank:  
11/24/22 15:20 .000  
Calibration Check:  
23 11/24/22 15:20 .099

Subject Name

Maintenance

Subject I.D. #20105

J. Giaccone #905

Operator Name, I.D.

Raymore P.D.

Location

AS IV Serial no: 105443  
Version no: 532B

TEST RECORD 01271

Temp Date Time 210L  
-----  
s/

VOID: RFI  
12 11/24/22 15:21

Subject Name

Maintenance

Subject I.D. #20105

J. Giaccone #905

Operator Name, I.D.

Raymore P.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 **22310** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **August 16, 2022**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.1205%** (w/vol) ethyl alcohol. The expiration date for this lot number is **August 11, 2024** 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.*





Paula Nickelson
Acting Director

Michael L. Parson
Governor

SIMULATOR CERTIFICATION REPORT

SIMULATOR INFORMATION

Simulator Serial Number: SD2256 Manufacturer: Guth
Model Number: 10-4D
Agency: RAYMORE PD
Agency Address: 100 MUNICIPAL CIRCLE, RAYMORE, MO 64083

NIST THERMOMETER INFORMATION

Serial Number: 17KMM00690 Bias: 0.01
Uncertainty: 0.02
Date of Certification: 11/10/2021 Date of Expiration: 11/10/2022

ENVIRONMENTAL CONDITIONS

The environmental conditions during testing are within the tolerances of DHSS BAP method 3.

VERIFICATION RESULTS

Table with 3 columns: Simulator Average (34.00), NIST Average (33.98), Combined Uncertainty (.05)

The combined uncertainty is calculated with a k=2 value.

ADJUSTMENT RESULTS

No adjustment was needed.

Date of testing: 9/8/2022
Certification Expiration: 9/8/2023
Simulator testing technician: M. BOND

Notes on Condition: none
Deviation(s) from method: none

DHSS BAP Scientist Approving: BRIANNA MEDRANO
Certification No: SD2256\_982022

X Brianna Medrano (signature)

DHSS BAP Scientist Approving



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



**PERMIT**  
**TYPE II**  
**JOSHUA B. GIACONE**

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, INTOX EC/IR II**

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 3/29/2022

*Laura Q. Noy*

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

NUMBER 220105

*Doreen T. Nickelson*

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

EXPIRES 3/29/2024

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** GIACONE, JOSHUA  
**Permit No** 220105  
**Date Issued** 3/29/2022    **Date Expires** 3/29/2024

