



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 107993	NAME OF AGENCY BRECKENRIDGE HILLS POLICE DEPT.	DATE OF INSPECTION 09/19/2022
LOCATION OF INSTRUMENT (STREET AND CITY) 9623 ST. CHARLES ROCK ROAD, ST. LOUIS MO		TIME OF INSPECTION 10:52 am

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 LABS LOT # 21380 EXP. DATE 09/13/2023
- SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIM. SN MP6536 SIM. NIST EXP DATE 03/25/2023

- 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 .105	TEST 2 .105	TEST 3 .105
--------------	--------------	--------------

- 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	3	(0-.04)	0	(.05-.09)	0	(.10-.14)	0	(.15-.19)	0	(OVER .19)	0
----------	---	---------	---	-----------	---	-----------	---	-----------	---	------------	---

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 RANDY VONCLOEDT DSN 287
TYPE II PERMIT NUMBER/EXPIRATION DATE 220142 05/11/2024	TELEPHONE NUMBER (314) 426-1214

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: 105451
Version no: 532B

TEST RECORD 01604

Temp Date Time 210L

Air Blank:
09/19/22 11:08 .000
Calibration Check:
21 09/19/22 11:08 .105

Subject Name

N/A

Subject I.D.

N/A

Operator Name, I.D.

Vincent 287

Location

9623 Marko

St. Louis MO 63114

HT 287

AS IV Serial no: 105451
Version no: 532B

TEST RECORD 01605

Temp Date Time 210L

Air Blank:
09/19/22 11:09 .000
Calibration Check:
22 09/19/22 11:09 .105

Subject Name

N/A

Subject I.D.

N/A

Operator Name, I.D.

Vincent 287

Location

9623 Marko

St. Louis MO 63114

HT 287

AS IV Serial no: 105451
Version no: 532B

TEST RECORD 01606

Temp Date Time 210L

Air Blank:
09/19/22 11:11 .000
Calibration Check:
22 09/19/22 11:11 .105

Subject Name

N/A

Subject I.D.

N/A

Operator Name, I.D.

Vincent 287

Location

9623 Marko

St. Louis MO 63114

HT 287

AS IV Serial no: 105451
Version no: 532B

TEST RECORD 01607

VOID: RFI
12 09/19/22 11:12

Temp Date Time 210L

Subject Name
N/A

Subject I.D.
N/A

Operator Name, I.D.
Vincent 287

Location
9623 Marko

St. Louis MO 63114

HT 287



SIMULATOR CERTIFICATION REPORT

SIMULATOR INFORMATION

Simulator Serial Number: MP6536 Manufacturer: Guth
 Model Number: 12V500
 Agency: BRECKENRIDGE HILLS PD
 Agency Address: 9623 ST. CHARLES ROCK RD, ST. LOUIS, MO 63114

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

<u>Simulator Average</u>	<u>NIST Average</u>	<u>Combined Uncertainty</u>
33.99	34.00	.03

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

ADJUSTMENT RESULTS

No adjustment was needed.

Date of testing: 3/25/2022
 Certification Expiration: 3/25/2023
 Simulator testing technician: R. SCHILDKNECHT

Notes on Condition: none

Deviation(s) from method: none

DHSS BAP Scientist Approving: BRIANNA MEDRANO
 Certification No: MP6536_3252022

X Brianna Medrano

DHSS BAP Scientist Approving

Simulator Calibration Certification
 issued by Lab Manager, DHSS BAP
 Revision Date: 05/16/2018

Breath Alcohol Program
 1903 Northwood Drive, Suite 4
 Poplar Bluff, MO 63901

DHSS BAP Document 3.6A
 Revision 1
 Page 1 of 1



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 **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 $34^{\circ}\text{C} \pm .2^{\circ}\text{C}$, 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

2

**PERMIT
 TYPE II**

RANDY J. VON CLOEDT

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 5/11/2022

NUMBER 220142

EXPIRES 5/11/2024

MO 580-6771 (6-10)

Laura E. Noy

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

David E. Nielsen

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-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 VON CLOEDT, RANDY
 Permit No 220142
 Date Issued 5/11/2022 Date Expires 5/11/2024

