



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 108263	NAME OF AGENCY Woodson Terrace Police	DATE OF INSPECTION 02-15-2022
LOCATION OF INSTRUMENT (STREET AND CITY) 4305 Woodson Road, Woodson Terrace MO 63134		TIME OF INSPECTION 2110

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 6-8-2023 (Bot # 801)

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIM. SN DR3942 SIM. NIST EXP DATE 8-23-2022

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 .099 TEST 2 .099 TEST 3 .100

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 (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 **Matthew Anton**

TYPE II PERMIT NUMBER/EXPIRATION DATE **200184 5-28-2022**

TELEPHONE NUMBER
(636) 474-9941

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: 108263
Version no: 532B

TEST RECORD 00624
s/
Temp Date Time 210L

Air Blank: 02/15/22 21:30 .000
Calibration Check: 19 02/15/22 21:30 .100

Subject Name

Anton 113

Subject I.D.

Same

Operator Name, I.D.

self Test 3

Location

WTPD

AS IV Serial no: 108263
Version no: 532B

TEST RECORD 00623
s/
Temp Date Time 210L

Air Blank: 02/15/22 21:28 .000
Calibration Check: 18 02/15/22 21:28 .099

Subject Name

Anton 113

Subject I.D.

Same

Operator Name, I.D.

self Test 2

Location

WTPD

AS IV Serial no: 108263
Version no: 532B

TEST RECORD 00622
s/
Temp Date Time 210L

Air Blank: 02/15/22 21:26 .000
Calibration Check: 17 02/15/22 21:26 .099

Subject Name

Anton 113

Subject I.D.

Same

Operator Name, I.D.

self Test 1

Location

WTPD

RFI

AS IV Serial no: 108263
Version no: 532B

TEST RECORD 00625

s/
Temp Date Time 210L

VOID: RFI
12 02/15/22 21:32

Subject Name

Anton 113

Subject I.D.

Same

Operator Name, I.D.

self Test RFI

Location



GUTH LABORATORIES, INC.

590 NORTH 57th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-654-5470

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°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.



Missouri Department of Health and Senior Services
 P.O. Box 570, Jefferson City, MO 65102-0570 Phone: 573-751-6400 FAX: 573-751-6010
 RELAY MISSOURI for Hearing and Speech Impaired 1-800-735-2966 VOICE 1-800-735-2466
Donald G. Kauerauf
 Director



Michael L. Parson
 Governor

SIMULATOR CERTIFICATION REPORT

SIMULATOR INFORMATION

Simulator Serial Number: DR3942 **Manufacturer:** Guth
Model Number: 2100
Agency: WOODSON TERRACE PD
Agency Address: 4305 WOODSON RD, WOODSON TERRACE, MO 63134

NIST THERMOMETER INFORMATION

Serial Number: 17KMM00690 **Bias:** 0.00
Uncertainty: 0.02
Date of Certification: 11/6/2020 **Date of Expiration:** 11/6/2021

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>
34.00	34.02	.04

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

ADJUSTMENT RESULTS

No adjustment was needed.

Date of testing: 8/23/2021
Certification Expiration: 8/23/2022
Simulator testing technician: M. BOND

Notes on Condition: none

Deviation(s) from method: none

DHSS BAP Scientist Approving: B. LUTMER
Certification No: DR3942_8232021



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



**PERMIT
 TYPE II**

MATTHEW D ANTON

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 5/28/2020

NUMBER 200184

EXPIRES 5/28/2022

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES



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 ANTON, MATTHEW
Permit No 200184
Date Issued 5/28/2020 **Date Expires** 5/28/2022

